

POST

*** NOTICE OF PUBLIC MEETING ***

BOARD OF EXAMINERS

LOCATION: Capitol Building
The Guinn Room
101 N. Carson Street
Carson City, Nevada

VIDEOCONFERENCE: Grant Sawyer State Office Building
555 E. Washington Avenue, Ste. 5100
Las Vegas, Nevada

DATE AND TIME: August 13, 2013 at 10:00 a.m.

Below is an agenda of all items to be considered. **Action will be taken on items preceded by an asterisk (*)**. Items on the agenda may be taken out of the order presented, items may be combined for consideration by the public body, and items may be pulled or removed from the agenda at any time at the discretion of the Chairperson.

AGENDA

1. **PUBLIC COMMENTS**
- *2. **FOR POSSIBLE ACTION – APPROVAL OF THE JULY 9, 2013 BOARD OF EXAMINERS’ MEETING MINUTES**
- *3. **FOR POSSIBLE ACTION – AUTHORITY TO PAY MINING CLAIM REFUNDS**
 - A. **Department of Taxation – \$78,390**

Pursuant to Senate Bill 493, Section 16.7 of the 2011 Legislature, the Department of Taxation must submit mining claim refund requests to the Board of Examiners for approval. The Department of Taxation is requesting authority to pay four refund requests totaling \$78,390. This results in a remaining balance of \$300,098 in mining claim funds.

***4. FOR POSSIBLE ACTION – SALARY ADJUSTMENTS**

The 2011 Legislative Session made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet certain salary deficiencies for fiscal year 2013 that might be created between the appropriated money of the respective departments, commissions, and agencies and the actual cost of the personnel of those departments, commissions, and agencies that are necessary to pay for salaries. Under this legislation, the following amounts from the General Fund and/or Highway Fund are recommended:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
3823	Business and Industry – Real Estate Administration	\$3,249	
	Total	\$3,249	

***5. FOR POSSIBLE ACTION – REQUEST FOR DELEGATION OF CONTRACT APPROVAL AUTHORITY**

A. Department of Administration – Board of Examiners

Pursuant to the Governor’s approval of AB 41 of the 2013 Legislative Session, the Clerk of the Board is requesting delegation authority to approve all contracts for amounts less than \$50,000. ***Relates to Action Item #6***

***6. FOR POSSIBLE ACTION – STATE ADMINISTRATIVE MANUAL**

The State Administrative Manual (SAM) is being submitted to the Board of Examiners’ for approval of additions and revisions in the following Chapters: ***Relates to Action Item #5***

A.

- **0310 – Department of Administration – Clerk of the Board of Examiners – Requested Changes to the State Administrative Manual**
- **0316 – Department of Administration – Clerk of the Board of Examiners – Approval of Interlocal Contracts**
- **0322 – Department of Administration – Clerk of the Board of Examiners – Independent Contract Review**

***7. FOR POSSIBLE ACTION – NOTIFICATION OF INTENT TO FILE FOR A GRANT OR LOAN FROM THE DISASTER RELIEF ACCOUNT WHICH REQUIRES AN EXTENSION TO COLLECT DATA**

A. Department of Public Safety – Division of Emergency Management – Clark County Flood

Pursuant to NRS 353.2755, the Division of Emergency Management on behalf of Clark County is requesting additional time to the original extension due to the time needed to identify all costs associated with the flood damage repairs and to identify potential insurance claim offsets to the various departments and agencies with damage to structures and facilities. Clark County respectfully requests an extension to the original request of September 11, 2013 to March 31, 2014.

***8. FOR POSSIBLE ACTION – REQUEST FOR FUND ALLOCATION FROM THE DISASTER RELIEF FUND**

A. Department of Public Safety – Division of Emergency Management – Caughlin Fire - \$267,547.32

Pursuant to NRS 353.274, the City of Reno, Sierra Fire Protection District, and the Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Caughlin Fire, which occurred on November 18, 2011.

City of Reno	\$162,548.75
City of Reno-Non-FMAG	\$ 42,330.57
Sierra Fire Protection District	\$ 23,132.00
Truckee Meadows Fire	\$ 39,536.00
Total	\$267,547.32

B. Department of Public Safety – Division of Emergency Management – Washoe Drive Fire - \$116,164

Pursuant to NRS 353.274, Sierra Fire Protection District and Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Washoe Drive Fire, which occurred on January 19, 2012.

***9. FOR POSSIBLE ACTION – APPROVAL TO PAY A CASH SETTLEMENT AND ISSUE TAX CREDIT**

Pursuant to NRS 41.037, 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.

A. Department of Taxation – \$7,644,336

Pursuant to NRS 41.037, the department requests the approval of a settlement agreement with several companies regarding sales/use tax for complementary patron and employee meals. In this agreement the Department of Taxation requests the approval to pay a cash settlement in the amount of \$4,500,000 for taxpayers who are no longer in business and provide tax credits in the amount of \$3,144,336 for taxpayers who are still in business.

***10. FOR POSSIBLE ACTION – REQUEST FOR GENERAL FUND ALLOCATION FROM THE INTERIM FINANCE COMMITTEE CONTINGENCY FUND**

A. Department of Taxation – \$529,226

Pursuant to NRS 353.268, Department of Taxation, requests an allocation of \$529,226 from the Interim Finance Committee Contingency Fund to implement the excise tax imposed from SB374, Section 24.4 in the 77th Legislative Session, relating to the sale of marijuana, edible marijuana products and marijuana-infused products.

B. Attorney General – \$3,008

Pursuant to NRS 353.268, Office of the Attorney General – Crime Prevention, requests an allocation of \$3,008 from the Interim Finance Committee Contingency Fund to cover a revenue shortfall of License Plate Charges.

C. Department of Health and Human Services – Division of Public and Behavioral Health – Southern Nevada Adult Mental Health Services – \$3,093,226

Pursuant to NRS 353.268, the Division of Public and Behavioral Health, requests an allocation of \$3,093,226 from the Interim Finance Committee Contingency Fund to renovate all of building #3 at Southern Nevada Adult Mental Health Services as shown in the revised CIP 13-C08.

***11. FOR POSSIBLE ACTION – STATE VEHICLE PURCHASE**

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

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Department of Public Safety – Investigation Division	3	\$68,292
Department of Public Safety – Highway Patrol	199	\$10,936,337
Department of Conservation and Natural Resources – Division of State Parks	6	\$145,013
Department of Wildlife - Operations	3	\$97,468
Department of Wildlife – Fisheries Management	6	\$207,549
Department of Wildlife – Game Management	4	\$110,402
Department of Wildlife – Habitat	3	\$78,836
Department of Wildlife – Law Enforcement	7	\$182,872
Department of Wildlife – Conservation Education	1	\$28,015
Department of Wildlife – Diversity	2	\$47,050
Total:	234	\$11,901,834

***12. FOR POSSIBLE ACTION – VICTIMS OF CRIME FY 2013 4TH QUARTER REPORT AND FY 2014 1ST QUARTER RECOMMENDATION**

NRS 217.260 requires the Board of Examiners to estimate available revenue and anticipated claim costs each quarter. If revenues are insufficient to pay anticipated claims, the statute directs that claim payments must be reduced proportionately. The Victims of Crime Program Coordinator recommends paying the Priority 1 & 2 claims at 100% and Priority 3 claims at 100% of the approved amount for the 1st quarter of FY 2014.

***13. FOR POSSIBLE ACTION – VICTIMS OF CRIME PROGRAM (VOCP) APPEAL**

Pursuant to NRS 217.117 Section 3, the applicant or Clerk of the Board may, within 15 days after the appeals officer renders a decision, appeal the decision to the Board. The Board shall consider the appeal on the record at its next scheduled meeting if the appeal and the record are received by the Board at least 5 days before the meeting. Within 15 days after the meeting the Board shall render its decision in the case or give notice to the applicant that a hearing will be held. The hearing must be held within 30 days after the notice is given and the Board shall render its decision in the case within 15 days after the hearing. The Board may affirm, modify or reverse the decision of the appeals officer.

A. Stacy Howell

The issue before the Board is the appeal of a denial for VOCP assistance due to late reporting of crimes to police. Ms. Howell has filed multiple requests for hearings and appeals. Ms. Howell failed to submit appeals timely and failed to appear at several hearings.

***14. FOR POSSIBLE ACTION – LEASES**

BOE #	LESSEE	LESSOR	AMOUNT
1.	Office of the Attorney General – Bureau of Consumer Protection (Las Vegas)	Ufigurito, LLC.	\$68,400
	Lease Description: This is an extension of an existing lease and addition to current facilities which has been negotiated to house the Office of the Attorney General – Bureau of Consumer Protection. Term of Lease: 06/01/2017 – 05/31/2018		
2.	Department of Health and Human Services – Division of Child and Family Services (Fallon)	Venturacci Properties, LP	\$36,716
	Lease Description: This is an extension of an existing lease which has been negotiated to house the Department of Health and Human Services – Division of Child and Family Services. Term of Lease: 09/01/2013 – 08/31/2017		

BOE #	LESSEE	LESSOR	AMOUNT
3.	Department of Health and Human Services – Health Division – Health Care Quality and Compliance (Las Vegas)	KJ LaPlaza, LLC.	\$1,704,816
	Lease Description: This is an extension of an existing lease and addition to current facilities which has been negotiated to house the Department of Health and Human Services – Health Division – Health Care Quality and Compliance. Term of Lease: 09/01/2013 – 08/31/2023		
4.	Department of Health and Human Services – Health Division – Child Care Licensing (Las Vegas)	WBCMT 2007-C33 c/o LNR Partners	\$416,628
	Lease Description: This is a new location which has been negotiated to house the Department of Health and Human Services – Health Division – Child Care Licensing. Term of Lease: 11/01/2013 – 01/31/2021		
5.	Department of Health and Human Services – Division of Public and Behavioral Health (Yerington)	Douglas & S. JoAnn Roderick	\$241,945
	Lease Description: This is an extension of an existing lease and addition to current facilities which has been negotiated to house Department of Health and Human Services – Division of Public and Behavioral Health. Term of Lease: 09/01/2013 – 08/31/2018		
6.	Department of Health and Human Services – Division of Welfare and Supportive Services (Las Vegas)	Plaza Vegas, LLC.	\$1,187,414
	Lease Description: This is a new location which is needed to provide additional client services which will house the Division of Welfare and Supportive Services. Term of Lease: 11/01/2013 – 10/31/2018		
7.	Department of Health and Human Services – Division of Welfare and Supportive Services (Las Vegas)	MEOW, LLC.	\$1,659,378
	Lease Description: This is a new location which is needed to provide additional client services which will house the Division of Welfare and Supportive Services. Term of Lease: 11/01/2013 – 10/31/2018		
8.	Office of the Military (Carson City)	North Carson, LLC.	\$18,600
	Lease Description: This is a new location which has been negotiated to house the Office of the Military. Term of Lease: 08/01/2013 – 07/31/2014		
9.	Department of Health and Human Services – Division of Child and Family Services (Yerington)	Douglas & S. JoAnn Roderick	\$52,129
	Lease Description: This is an existing lease which has been re-negotiated to full service, specifically to include janitorial services to house the Division of Child and Family Services. Term of Lease: 09/01/2013 – 03/31/2017		
10.	Department of Business and Industry – Industrial Relations Division (Carson City)	The Trust for Methodist Development of the First United Methodist Church	\$928,210
	Lease Description: This is an extension of an existing lease to house the Division of Industrial Relations. Term of Lease: 09/01/2013 – 08/31/2018		

***15. FOR POSSIBLE ACTION –CONTRACTS**

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	012	NUCLEAR PROJECTS OFFICE - HIGH LEVEL NUCLEAR WASTE	NEVADA DIVISION OF EMERGENCY MANAGEMENT	FEDERAL	\$50,000	
	Contract Description:	This is a new interlocal agreement that provides federal funds specifically for Nevada Division of Emergency Management activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governors Association.				
	Term of Contract:	Upon Approval - 06/30/2014	Contract # 14669			
2.	012	NUCLEAR PROJECTS OFFICE - HIGH LEVEL NUCLEAR WASTE	NEVADA HIGHWAY PATROL	FEDERAL	\$50,000	
	Contract Description:	This is a new interlocal agreement that provides federal funds specifically for Nevada Highway Patrol activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governors Association.				
	Term of Contract:	Upon Approval - 06/30/2014	Contract # 14667			
3.	012	NUCLEAR PROJECTS OFFICE - HIGH LEVEL NUCLEAR WASTE	STATE HEALTH DIVISION RADIATION CONTROL PROGRAM	FEDERAL	\$40,000	
	Contract Description:	This is a new interlocal agreement to provide federal funds specifically for Nevada State Health Division activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governors Association.				
	Term of Contract:	Upon Approval - 06/30/2014	Contract # 14668			
4.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE FUND	NYE COUNTY DISTRICT ATTORNEY	OTHER: REVENUE CONTRACT	\$25,000	
	Contract Description:	This is a new revenue contract to provide prosecution services on behalf of the Office of the District Attorney, Nye County.				
	Term of Contract:	05/13/2013 - 06/30/2015	Contract # 14605			
5.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	CITY OF HENDERSON	FEE: REVENUE CONTRACT FOR COST SHARING OF THE VINE SYSTEM	\$50,000	
	Contract Description:	This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System. The public safety entities that utilize this system will cost share with the Office of the Attorney General.				
	Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14646			
6.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	DEPARTMENT OF CORRECTIONS	FEE: REVENUE CONTRACT FOR COST SHARING OF THE VINE SYSTEM	\$140,000	
	Contract Description:	This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System. The public safety entities that utilize this system will cost share with the Office of the Attorney General.				
	Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14644			

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7.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	LAS VEGAS METRO POLICE DEPARTMENT	FEE: REVENUE CONTRACT FOR COST SHARING OF THE VINE SYSTEM	\$180,000	
	Contract Description:	This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System. The public safety entities that utilize this system will cost share with the Office of the Attorney General.				
		Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14645		
8.	030	ATTORNEY GENERAL'S OFFICE - VICTIMS OF DOMESTIC VIOLENCE	NYE COUNTY SHERIFF'S OFFICE	OTHER: REVENUE CONTRACT FOR COST SHARING OF THE VINE SYSTEM	\$10,000	
	Contract Description:	This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System. The public safety entities that utilize this system will cost share with the Office of the Attorney General.				
		Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14604		
9.	080	DEPARTMENT OF ADMINISTRATION – DIRECTOR'S OFFICE	AERIS ENTERPRISE, INC.	GENERAL	\$322,514	SOLE SOURCE
	Contract Description:	This is a new contract for ongoing programming & analysis of enterprise computer applications existing in the Dept of Administration during fiscal years 2014 & 2015. The programs include the Nevada Executive Budget System (NEBS), Nevada Employee Action and Timekeeping System (NEATS), Nevada Project Accounting System (NPAS), Nevada Applicant Tracking System (NVAPPS), Human Resource Data Warehouse (HRDW), Contract Entry and Tracking System (CETS), Nevada Open Government, and Priorities/Performance Based Budgeting (PPBB). Typical activities include general analysis or troubleshooting of problems, programming to correct problems, design, development and deployment of new modules to enhance existing programs or improve functionality of the development, upgrading source code programming, infrastructure, middleware, or any other component as requested to resolve issues, improve functionality, or improve performance, and modifications to maintain browsers.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14769		
10.	082	DEPARTMENT OF ADMINISTRATION – STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$169,055	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Belrose building located at 620/628 Belrose Street, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14655		
11.	082	DEPARTMENT OF ADMINISTRATION – STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$115,971	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Bradley building located at 2501 East Sahara Avenue, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14656		
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$320,572	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Department of Motor Vehicles located at 2701 East Sahara Avenue, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14657		

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13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$978,630	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Grant Sawyer building located at 555 East Washington Avenue, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14658		
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$115,432	
	Contract Description:	This is a new contract that continues ongoing janitorial services for Welfare - Henderson Building located at 520 South Boulder Highway, Henderson, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14659		
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	ACCURATE BUILDING MAINTENANCE	FEE: BUILDING RENT INCOME FEES	\$179,863	
	Contract Description:	This is a new contract that continues ongoing janitorial services for Welfare - Owens located at 1040 West Owens Avenue, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14660		
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	JEROD, INC. DBA FASTSIGNS LAS VEGAS	FEE: BUILDING RENT INCOME FEES	\$35,000	
	Contract Description:	This is a new contract that continues ongoing sign installation and removal for various state buildings in the Las Vegas area, to be used upon the written request and approval of a Buildings and Grounds designee.				
		Term of Contract:	Upon Approval - 06/30/2017	Contract # 14511		
17.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	RENO TAHOE FRANCHISING, INC.	FEE: BUILDING RENT INCOME FEES	\$77,904	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Tourism building (more commonly known as the LAXALT building) located at 401 N. Carson Street, Carson City, Nevada.				
		Term of Contract:	09/01/2013 - 08/31/2017	Contract # 14639		
18.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	RENO TAHOE FRANCHISING, INC.	FEE: BUILDING RENT INCOME FEES	\$12,395	
	Contract Description:	This is the first amendment to the original contract, which continues ongoing janitorial services to the Nevada State Library and Archives building located at 100 N. Stewart Street, Carson City, Nevada. This amendment extends the termination date from August 31, 2013 to October 31, 2013 and increases the maximum amount from \$8,349.66 to \$20,789.66. The increased amount includes \$7,394.66 for the extension and \$5,000 for extra services to be provided on an as needed basis and as approved by the Buildings and Grounds Division.				
		Term of Contract:	07/01/2013 - 10/31/2013	Contract # 14591		

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19.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	SAVAGE & SON, INC.	FEE: BUILDINGS RENT INCOME FEES	\$50,000	
	Contract Description:	This is a new contract that continues ongoing plumbing, westside heating ventilation and air conditioning and backflow certification services to various state buildings in Northern Nevada at the written request of a Buildings and Grounds designee.				
		Term of Contract:	Upon Approval - 08/31/2017	Contract # 14600		
20.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	THOMPSON GARAGE DOORS	FEE: BUILDINGS AND GROUNDS RENT INCOME FEES	\$20,000	
	Contract Description:	This is a new contract that continues ongoing repair, install, service and replacement of all types of overhead garage doors and openers.				
		Term of Contract:	Upon Approval - 08/31/2017	Contract # 14724		
21.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	XCEL MAINTENANCE SERVICES, INC.	FEE: BUILDING RENT INCOME FEES	\$46,960	
	Contract Description:	This is a new contract that continues ongoing janitorial services for Buildings and Grounds located at 2621 E. Sahara Avenue, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/31/2017	Contract # 14653		
22.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	XCEL MAINTENANCE SERVICES, INC.	FEE: BUILDING RENT INCOME FEES	\$421,980	
	Contract Description:	This is a new contract that continues ongoing janitorial services for the Department of Motor Vehicles located at 8250 West Flamingo Road, Las Vegas, Nevada.				
		Term of Contract:	08/31/2013 - 08/17/2017	Contract # 14654		
23.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	GEOTECHNICAL & ENVIRONMENTAL	OTHER: TRANSFER FROM CAPITAL PROJECT FUND	(\$18,022)	PROFESSIONAL SERVICE
	Contract Description:	This is the first amendment to the original contract; which provides provide construction material testing services for the Southern Desert Correctional Center, Core Expansion; Project No. 11-C01; Contract No. 25074. This amendment reduces the maximum amount from \$98,700 to \$80,678 due to the project being complete and thus eliminating the need for any additional construction and material testing services.				
		Term of Contract:	04/03/2012 - 06/30/2015	Contract # 13192		

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24.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - 2005 MILITARY CIP PROJECTS - LVRC-NON-EXEC	CORE CONSTRUCTION SERVICES OF NEVADA, INC. DBA CORE CONSTRUCTION	BONDS 4% OTHER: TRANSFER FROM CAPITAL PROJECT FUNDS 5% FEDERAL 91%	\$59,909	PROFESSIONAL SERVICE
	Contract Description:	This is the fourth amendment to the original contract; which provides construction manager at risk services for the field maintenance shop, Las Vegas, NV; Project No. 09-C13; Contract No. 7604. This amendment increases the maximum amount from \$21,931,054 to \$21,990,963 for photovoltaic infrastructure construction costs for the covered military vehicle parking structures at the field maintenance shop project.				
		Term of Contract:	05/08/2012 - 06/30/2015	Contract # 13094		
25.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	ACCESS TECHNOLOGIES SERVICES	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74660.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14676		
26.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	ARCHITECTS + LLC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74658				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14677		
27.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	CHARLES ABBOTT ASSOCIATES, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74471				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14687		
28.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	CSG CONSULTANTS, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74475				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14675		
29.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	ENGINEERING PARTNERS, LLC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional mechanical/electrical plan checking services as required. SPWD Contract No. 77534				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14693		

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30.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	GARY GUY WILSON PROFESSIONAL CORP.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74472				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14680		
31.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	GARY GUY WILSON PROFESSIONAL CORP.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74669				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14684		
32.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	HYTTINEN, ROGER DBA HYTTINEN ENGINEERING	OTHER: VARIES DEPENDING ON PROJECT	\$50,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional structural plan checking services as required. SPWD Contract No. 73029				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14709		
33.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	INTERWEST CONSULTING GROUP, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74473.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14678		
34.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	NAFFA INTERNATIONAL, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74648.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14690		
35.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	PLAN CHECK ASSOCIATES, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74474				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14685		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
36.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	PURCELL KROB ELECTRICAL PROFESSIONAL	OTHER: AGENCY - MILITARY	\$15,500	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide a lighting system design for the Nevada Army National Guard Munitions Bunker in Carson City, NV. SPWD Project No. 13-A026; Contract No. 80451				
37.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION All Budget Accounts	WILLDAN ENGINEERING, INC.	OTHER: VARIES DEPENDING ON PROJECT	\$100,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74477				
38.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	BOARD OF REGENTS-UNR	OTHER: DETR (STATE CAREER ENHANCEMENT PRG FUNDS)	\$600,000	EXEMPT
	Contract Description:	This is a new interlocal agreement that continues to provide pass-through funding from DETR to NSHE Nevada Industry Excellence for training programs for Nevada businesses. *Relates to contract #94				
39.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	ECONOMIC DEVELOPMENT AUTHORITY	GENERAL	\$1,200,000	
	Contract Description:	This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
40.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	HUMBOLDT COUNTY	GENERAL	\$100,000	
	Contract Description:	This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
41.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	HIGHWAY 95 REGIONAL DEVELOPMENT AUTHORITY	GENERAL	\$230,000	
	Contract Description:	This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14696		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
42.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	LINCOLN COUNTY REGIONAL DEVELOPMENT AUTHORITY	GENERAL	\$110,000	
	Contract Description:	This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14689		
43.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	NORTHERN NEVADA DEVELOPMENT AUTHORITY	GENERAL	\$470,000	
	Contract Description:	This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14694		
44.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	NYE COUNTY	GENERAL	\$160,000	
	Contract Description:	This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14692		
45.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	NORTHEASTERN NEVADA REGIONAL DEVELOPMENT AUTHORITY	GENERAL	\$160,000	
	Contract Description:	This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14700		
46.	102	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	WHITE PINE COUNTY ECONOMIC DIVERSIFICATION PROGRAM	GENERAL	\$220,000	
	Contract Description:	This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14713		
47.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE IT SERVICES	NATIONAL ASSOCIATION OF STATE AUDITOR COMPTROLLERS AND TREASURER	GENERAL	\$350,000	SOLE SOURCE
	Contract Description:	This is a new contract to provide evaluation of state functions in finance, human resources, procurement and Information Technology. This benchmark study will provide analysis to determine where deficiencies exist, where the state is doing a good job and provide comparisons with other states.				
		Term of Contract:	Upon Approval - 06/30/2014	Contract # 14766		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
48.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE IT SERVICES OFFICE OF CIO	GARTNER, INC.	FEE: USER FEES	\$160,900	EXEMPT
	Contract Description:	This is a new contract that continues subscription-based research and related services for the Division of Enterprise Information Technology Service's (EITS) professional staff, including providing information about best practices related to cloud email services, document production, mobile application development, enterprise software replacement, network design, and systems strategy. Pursuant to NRS 332.195, the vendor has authorized EITS to join or use the City of Las Vegas' contract with the Gartner Corporation.				
	Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14523			
49.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE IT SERVICES NETWORK TRANSPORT SERVICES	COMMNET OF NEVADA, LLC.	OTHER: REVENUE	\$29,087	
	Contract Description:	This is the first amendment to the original revenue contract, which continues ongoing rack space rental and DS1 circuits at Prospect Peak in Eureka county. This amendment increases the maximum amount of the contract from \$82,571.64 to \$111,658.68 due to adding one additional DS1 circuit from Toulon Peak to Prospect Peak for a total of 3 DS1 circuits.				
	Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14298			
50.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE IT SERVICES NETWORK TRANSPORT SERVICES	LAS VEGAS METROPOLITAN POLICE	OTHER: REVENUE	\$15,248	
	Contract Description:	This is a new revenue contract for two new rack spaces at Apex Peak in Clark County with the Las Vegas Metro Police Department.				
	Term of Contract:	10/01/2013 - 06/30/2017	Contract # 14650			
51.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE IT SERVICES SECURITY	IT'S PARTNERS, LLC.	FEE: USER FEES	\$100,000	SOLE SOURCE
	Contract Description:	This is a new contract to provide configuration and integration services for the Altiris Endpoint Security and Management Solution. Contractor will also provide certified training in the state's Altiris deployment. Both services are a requirement of the state's deployment of Altiris.				
	Term of Contract:	Upon Approval - 06/30/2014	Contract # 14652			
52.	240	OFFICE OF VETERANS SERVICES - VETERANS' HOME ACCOUNT	BRENT DENNIS	OTHER: PATIENT MEDICAL SERVICES FEES 34% FEDERAL 66%	\$12,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide ongoing psychologist services to the Nevada State Veterans Home. The services of a psychologist are necessary to provide consulting on psychological issues, training for staff on handling residents, and to assist staff to coordinate treatment of residents.				
	Term of Contract:	Upon Approval - 04/30/2014	Contract # 14610			
53.	300	DEPARTMENT OF EDUCATION - PROFESSIONAL DEVELOPMENT AND STANDARDS	WESTED	GENERAL	\$320,000	
	Contract Description:	This is a new contract to design and conduct a field test, develop, conduct and report on a validation study of the Nevada Educator Performance Framework.				
	Term of Contract:	Upon Approval - 06/30/2015	Contract # 14649			

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
54.	300	DEPARTMENT OF EDUCATION - CAREER AND TECHNICAL EDUCATION	CAREER AND TECHNICAL EDUCATION CONSORTIUM OF STATES, INC.	GENERAL	\$200,000	SOLE SOURCE
	Contract Description:	This is a new contract to provide analysis, review and development services to fully implement Nevada's state system of student career and technical skill standards and assessments. Develop and pilot assessments for each of the sets of validated state standards.				
		Term of Contract:	Upon Approval - 06/30/2014	Contract # 14665		
55.	315	STATE PUBLIC CHARTER SCHOOL AUTHORITY	PAUL O'NEILL	FEE: CHARTER SCHOOL FEES	\$36,000	PROFESSIONAL SERVICE
	Contract Description:	This is the first amendment to the original contract for the development of a Memorandum of Understanding to identify the roles and responsibilities of the State Public Charter School Authority (SPCSA), provide training to SPCSA staff to understand the legal, compliance, and reporting requirements of the Local Education Agency as required by the Individuals with Disability Act and ADA. This amendment increases the maximum amount from \$24,000 to \$60,000 to continue implementation of monitoring and enforcement activities for students with disabilities.				
		Term of Contract:	06/07/2013 - 06/30/2014	Contract # 14589		
56.	400	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIRECTOR’S OFFICE – ADMINISTRATION	TEACHING STRATEGIES, LLC	GENERAL	\$686,625	
	Contract Description:	This is a new contract to implement a program to pilot Teaching Strategies Gold (TSG) as Nevada's Kindergarten Inventory of Development Statewide (Silver State Kids). TSG will be used by licensed kindergarten teachers in the first four to six weeks of the school year. The contract provides for the per-child portfolio licensing fees, implementation support fees, and training of trainers. Publicly funded programs serving children from birth to age five will also be included allowing tracking of data linked to the state longitudinal data system. Senate Bill 486 provides the appropriations for a pilot program for the assessment of school readiness. This contract will satisfy the first stage of the requirements in the bill.				
		Term of Contract:	08/13/2013 – 06/30/2015	Contract # 14445		
57.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - DESERT REGIONAL CENTER	PGAL, LLC.	GENERAL 50.2% FEDERAL 49.8%	\$30,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide architectural and engineering design services for various renovations of the Administration Building and Building 1306 at Desert Regional Center. The contract also provides for the possibility of future projects as needs are identified.				
		Term of Contract:	Upon Approval - 12/31/2015	Contract # 14585		
58.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING & POLICY	CLARK COUNTY	OTHER: INTER GOVERNMENTAL TRANSFER	\$25,201,536	
	Contract Description:	This is a new contract that continues ongoing Inter-Governmental Transfers from Clark County to the Division of Health Care Financing and Policy for the voluntary contributions which is calculated on the inpatient, outpatient, and Graduate Medical Education hospital services for the non-state publically owned and operated hospitals.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14080		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
59.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING & POLICY - ADMINISTRATION	CAPTIONS UNLIMITED OF NEVADA	GENERAL 50% FEDERAL 50%	\$55,789	
	Contract Description:	This is the second amendment to the original contract, which provides ongoing real time captioning services for staff that are hearing impaired. This amendment increases the maximum amount of the contract by \$55,789, from \$140,000 to \$195,789 due to the increase in staff utilizing the services and also adds a Business Associate Addendum and contract budget to the attachments.				
		Term of Contract:	07/01/2010 - 06/30/2014	Contract # 11049		
60.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING & POLICY - NEVADA CHECK-UP PROGRAM	HEALTH DIVISION, FAMILY & COMMUNITY WELLNESS IMMUNIZATION PROGRAM	FEDERAL	\$2,768,448	
	Contract Description:	This is a new interlocal agreement to provide ongoing reimbursement to the Health Division for the indirect cost of/and Title XXI share of vaccines purchased for Nevada Checkup recipients. This reimbursement ensures uninsured and underinsured children of the state of Nevada are provided necessary immunizations.				
		Term of Contract:	07/01/2013 - 06/30/2017	Contract # 14228		
61.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - MENTAL HEALTH AND DEVELOPMENTAL SERVICES - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	BOARD OF REGENTS-UNSOM	GENERAL	\$1,025,000	
	Contract Description:	This is a new interlocal agreement that continues ongoing psychiatric services outside regular operating hours to the Northern Nevada Adult Mental Health Services and Southern Nevada Adult Mental Health Services. It provides a valuable training program for residents and enables services such as on-call, patient observation unit, high risk rounds and psychiatric evaluations to be performed on a 24-hour basis.				
		Term of Contract:	03/18/2013 - 06/30/2015	Contract # 14393		
62.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNICABLE DISEASES	ACCESS TO HEALTHCARE NETWORK	FEDERAL	\$1,017,231	
	Contract Description:	This is the second amendment to the original contract, which provides processing of Health Insurance Continuation Program claims to eligible Ryan White Part B clients. This amendment increases the maximum amount from \$874,472 to \$1,891,703 to cover the increase in Ryan White Part B clients in Southern Nevada.				
		Term of Contract:	08/01/2011 - 07/31/2015	Contract # 12199		
63.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - BIOSTATISTICS AND EPIDEMIOLOGY	NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS	OTHER: REVENUE	\$13,500	
	Contract Description:	This is a new contract to incorporate questions about social determinants in the Nevada 2013 Behavioral Risk Factor Surveillance System.				
		Term of Contract:	01/01/2013 - 12/31/2013	Contract # 14672		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
64.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	ESMERALDA COUNTY	OTHER: REVENUE	\$11,554	
	Contract Description:	This is a new revenue contract for the state to promote individual and family health in the county utilizing the State's community health nurses.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14634		
65.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	LANDER COUNTY	OTHER: REVENUE	\$96,060	
	Contract Description:	This is a new revenue interlocal contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14691		
66.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	LYON COUNTY	OTHER: REVENUE	\$282,282	
	Contract Description:	This is a new revenue contract that continues ongoing provision for the Health Division to promote individual and family health in the county utilizing the state's community health nurses. Services will include testing, screening and treatment of tuberculosis and sexually transmitted diseases, as necessary.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14546		
67.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	MINERAL COUNTY	OTHER: REVENUE	\$51,984	
	Contract Description:	This is a new revenue contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14632		
68.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	NYE COUNTY	OTHER: REVENUE	\$245,398	
	Contract Description:	This is a new revenue contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the state's community health nurses. Services will include testing, screening and treatment of tuberculosis and sexually transmitted diseases, as necessary.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14544		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
69.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH - COMMUNITY HEALTH SERVICES	WHITE PINE COUNTY	OTHER: REVENUE	\$57,866	
	Contract Description:	This is a new revenue interlocal contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.				
70.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORT SERVICES - ADMINISTRATION	IBM CORPORATION	GENERAL 4% FEDERAL 96%	\$17,860	
	Contract Description:	This is a new contract for installation and configuration of the SmartCloud software, which is necessary to enable new functionality of the new PureFlex hardware platform. PureFlex is a complex multiplatform computing platform that includes: networking, storage and computing power into a single rack with a single management interface for all components. This will be the platform that houses all UNIX computing going forward for the agency, and is required to meet growing demand for resources.				
71.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORT SERVICES - ENERGY ASSISTANCE PROGRAM	HOUSING DIVISION	FEDERAL	\$39,364	
	Contract Description:	This is the second amendment to the interlocal agreement to provide the Department of Business and Industry, Housing Division Weatherization Assistance Program (WAP) with 5% of the Low Income Home Energy Assistance Program Block Grant to help fund WAP for low income families. WAP encourages and enables households to reduce their home energy needs by providing for various energy conservation measures, which decreases the need for energy assistance. This amendment increases the maximum amount from \$1,935,922.70 to \$1,975,287 due to the release of remaining federal fiscal year 2013 grant funds.				
72.	408	DEPARTMENT OF HEALTH AND HUMAN SERVICES - MENTAL HEALTH AND DEVELOPMENTAL SERVICES - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	EXECUTIVE PEST SERVICES, LLC.	GENERAL	\$17,400	
	Contract Description:	This is the first amendment to the original contract, which continues ongoing pest control at Southern Nevada Adult Mental Health Services' campuses. This amendment extends the termination date from August 15, 2013 to August 31, 2015 and increases the maximum amount from \$12,600 to \$30,000 to fund the additional two years and add a contingency fund for unforeseen events.				
		Term of Contract:	08/15/2011 - 08/31/2015	Contract #	12384	

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES	
73.	408	DEPARTMENT OF HEALTH AND HUMAN SERVICES - MENTAL HEALTH AND DEVELOPMENTAL SERVICES - SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES	FAMILY FIRST MEDICAL, LLC.	GENERAL	\$267,084	FORMER EMPLOYEE	
		Contract Description: This is the first amendment to the original contract, which continues ongoing physician level general medical services for the Rawson-Neal Psychiatric Hospital. This amendment increases the maximum amount from \$1,240,000 to \$1,507,083.60 due to an increase in hours from 100 per week to 156 per week for the provision of history and physical evaluations to Psychiatric Observation Unit patients to meet CMS and Joint Commission requirements					
		Term of Contract:	05/08/2012 - 12/31/2013	Contract # 13254			
74.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - UNITY/SACWIS	PUBLIC CONSULTING GROUP, INC.	GENERAL 51.6% FEDERAL 48.4%	\$96,140	SOLE SOURCE	
		Contract Description: This is a new contract to convert the current AlloCAP system from Microsoft Access to a web-based cost allocation plan for DCFS. This software is used to process the quarterly cost allocation for Title IV-E Foster Care and Adoption administrative expenses and Children's Mental Health's year end cost settlement with the Division of Health Care Financing and Policy called the Certified Public Expenditure Report.					
		Term of Contract:	Upon Approval - 06/30/2014	Contract # 14630			
75.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CALIENTE YOUTH CENTER	ROITMAN, NORTON A. MD	GENERAL	\$24,120		
		Contract Description: This is the second amendment to the original contract, which continues ongoing psychiatric services for youth at Caliente Youth Center. This amendment increases the contract maximum from \$24,120 to \$48,240 to provide contract authority to cover FY14.					
		Term of Contract:	06/05/2012 - 06/30/2014	Contract # 13243			
76.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	DOUGLAS COUNTY	OTHER: REVENUE	\$478,006		
		Contract Description: This is a new revenue interlocal agreement for ongoing assessment payment each fiscal year by the county to the Division of Child and Family Services pursuant to NRS 432B.326 for child protective services assessments to Douglas County.					
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14625			
77.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	LYON COUNTY	OTHER: REVENUE	\$700,581		
		Contract Description: This is a new revenue interlocal agreement for ongoing assessment payment each fiscal year by the county to the Division of Child and Family Services pursuant to NRS 432B.326 for child protective services assessments to Lyon County.					
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14602			

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
78.	690	COLORADO RIVER COMMISSION	SARA A. PRICE, ESQ.	OTHER: WATER AND POWER REVENUES	\$270,000	
	Contract Description:	This is a new contract to provide professional services related to the 50 year Lower Colorado River Multi-Species Conservation Program (LCRMSCP or MSCP). Service to include advice and assistance on policy development, and implementation of the program. Work to include transactional work, on-going review, oversight and participation in all applicable on-going technical, financial and work plan documents; and to assist in the interfacing of the MSCP with the new requirements under the Hoover Power Allocation Act of 2011 to include the MSCP requirements in potential contracts with new hydropower allottees; and to provide advice and oversight on other environmental, water and power matters as directed.				
	Term of Contract:	Upon Approval - 06/30/2017	Contract # 14637			
79.	690	COLORADO RIVER COMMISSION - POWER DELIVERY SYSTEM	BURNS & MCDONNELL ENGINEERING CO., INC.	OTHER: POWER SALES REVENUE	\$450,000	
	Contract Description:	This is a new contract to provide engineering services for the Colorado River Commission on an as needed basis for projects associated with the operation and maintenance of its high-voltage electrical transmission and distribution system.				
	Term of Contract:	08/13/2013 - 06/30/2015	Contract # 14627			
80.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - WILDLAND FIRE PREVENTION PROGRAM	WASHOE COUNTY	OTHER: COUNTY FUNDS	\$100,000	
	Contract Description:	This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and Washoe County will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.				
	Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14590			
81.	706	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES FORESTRY DIVISION All Budget Accounts	NORTH LYON COUNTY FIRE PROTECTION DISTRICT	OTHER: FIRE PROTECTION DISTRICT FUNDS	\$15,000	
	Contract Description:	This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and North Lyon County Fire Protection District will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.				
	Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14629			
82.	706	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES FORESTRY DIVISION All Budget Accounts	TRUCKEE MEADOWS FIRE PROTECTION DISTRICT	OTHER: FIRE PROTECTION DISTRICT FUNDS	\$360,000	
	Contract Description:	This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and Truckee Meadows Fire Protection District, on behalf of itself and Sierra Fire Protection District, will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.				
	Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14588			

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
83.	709	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - ADMINISTRATION	WEBSOFT DEVELOPERS, INC.	FEDERAL	\$17,985	
	Contract Description:	This is a new contract to provide installation, maintenance and support of FacilityMap Framework powered by GeoCortex for the Nevada Division of Environmental Protection, the Division of State lands, the Division of Forestry, and Nevada State Historical Preservation Office GIS System application. The vendor will provide technical support in response to specific inquiries as well as software maintenance by way of patches, updates, and upgrades as applicable.				
		Term of Contract:	Upon Approval - 12/31/2014	Contract # 14603		
84.	740	DEPARTMENT OF BUSINESS AND INDUSTRY - ADMINISTRATION	APPLIED ANALYSIS	OTHER: MORTGAGE SETTLEMENT FUNDS	\$40,000	PROFESSIONAL SERVICE
	Contract Description:	This is a new contract to provide professional market research and analysis services to the Department of Business and Industry/University of Nevada Las Vegas-LIED Institute in collaboration with publishing a Housing Index to stakeholders within the State of Nevada. This proposal will provide for extensive analysis of the Nevada housing market which will be crucial as Nevada embarks on a path of housing recovery.				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14636		
85.	742	DEPARTMENT OF BUSINESS AND INDUSTRY B&I - INDUSTRIAL RELATIONS DIV All Budget Accounts	SIERRA NEVADA ADMINISTRATORS	OTHER: WORKERS' COMPENSATION AND SAFETY FUND	\$220,000	
	Contract Description:	This is a new contract to provide ongoing workers' compensation claims administration services for the State of Nevada Uninsured Employer's Claims Account, as required by NRS 616C.220(1)				
		Term of Contract:	07/01/2013 - 06/30/2015	Contract # 14718		
86.	748	DEPARTMENT OF BUSINESS AND INDUSTRY - REAL ESTATE - EDUCATION AND RESEARCH	IRON DATA SOLUTIONS, INC.	GENERAL 41% FEE: REAL ESTATE EDUCATION FUND - FEES FROM REAL ESTATE LICENSEES 59%	\$40,800	SOLE SOURCE
	Contract Description:	This is a new contract to modify the Real Estate Division licensing application software and database to incorporate additional data fields and tracking for licensee compliance with new education and trust account filing requirements.				
		Term of Contract:	Upon Approval - 11/30/2013	Contract # 14712		
87.	754	DEPARTMENT OF BUSINESS AND INDUSTRY - MANUFACTURED HOUSING	CHARLES ABBOTT AND ASSOCIATES, INC.	FEE: INSPECTION FEES	\$46,001	SOLE SOURCE
	Contract Description:	This is the first amendment to the original contract, which provides inspections and required testing for the installation of manufactured/mobile homes and commercial coaches; inspections and tests for home repairs and the replacement of heat producing appliances with the home; and approval of plans/modifications of plans as requested by the division. The amendment extends the termination date from December 31, 2014 to June 30, 2015 and increases the maximum amount from \$9,999 to \$56,000 due to the continued need for these services.				
		Term of Contract:	01/23/2013 - 06/30/2015	Contract # 14025		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
88.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	AFC FIRE COMPANY, LLC.	OTHER: BUSINESS ENTERPRISE SET ASIDE FUND	\$45,000	
	Contract Description:	This is a new contract that continues on-going annual inspection and testing of fire suppression systems and hood filter repair and maintenance (including ANSUL certification) at all existing Business Enterprises of Nevada locations in Southern Nevada including the three sites located at the Hoover Dam.				
		Term of Contract:	Upon Approval - 05/31/2017	Contract # 14612		
89.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	ALARMCO, INC.	OTHER: BUSINESS ENTERPRISES SET ASIDE	\$15,000	
	Contract Description:	This is a new contract to provide repair, replacement and maintenance services for security and surveillance equipment, key and digital locks and cameras, closed circuit television (CCTV), access control systems and locksmith services for all Business Enterprise of Nevada sites in Southern Nevada, including three sites at the Hoover Dam. Services include bi-annual inspections; monthly service for the 9-camera CCTV system and monitoring of the burglar alarm system at the Arizona Lookout Site at Hoover Dam; and monthly monitoring of the fire alarm system at the High Scaler Cafe and gift store at Hoover Dam.				
		Term of Contract:	Upon Approval - 06/30/2015	Contract # 14355		
90.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - VOCATIONAL REHABILITATION	NEVADA BROADCASTERS ASSOCIATION	GENERAL 21.3% FEDERAL 78.7%	\$28,500	SOLE SOURCE
	Contract Description:	This is the second amendment to the original contract, which continues to provide radio public service announcements to promote employment opportunities for Nevadans with disabilities and to offer assistance to employers in making reasonable accommodations to applicants/employees with disabilities. This amendment extends the termination date from August 31, 2013 to June 30, 2014, increases the contract amount from \$99,500 to \$128,000 due to a continued need for these services and includes a modification to the scope of work extending the service term.				
		Term of Contract:	03/13/2012 - 06/30/2014	Contract # 13152		
91.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	BOARD OF REGENTS-CSN	FEDERAL	\$390,113	EXEMPT
	Contract Description:	This is a new interlocal agreement to provide funds to the College of Southern Nevada Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.				
		Term of Contract:	Upon Approval - 07/31/2014	Contract # 14663		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
92.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	BOARD OF REGENTS-TMCC	FEDERAL	\$50,148	EXEMPT
	Contract Description:	This is a new interlocal agreement to provide funds to the Truckee Meadows Community College's Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.				
	Term of Contract:	Upon Approval - 07/31/2014	Contract # 14661			
93.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	BOARD OF REGENTS-WNC	FEDERAL	\$19,188	EXEMPT
	Contract Description:	This is a new interlocal agreement to provide funds to the Western Nevada College's Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.				
	Term of Contract:	Upon Approval - 07/31/2014	Contract # 14662			
94.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT	OTHER: CAREER ENHANCEMENT PROGRAM	\$600,000	
	Contract Description:	This is a new interlocal agreement to provide funding in support of the Governor's Office of Economic Development training program, Train Employees Now and the Emerging Small Business Certification Program. The program was launched to upgrade the skills of potential employees of businesses relocating to or expanding into Nevada, which is anticipated to reduce dependence on the Nevada unemployment system. *Relates to contract #38				
	Term of Contract:	09/01/2013 - 06/30/2014	Contract # 14643			
95.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	MONTANA DEPARTMENT OF LABOR AND INDUSTRY	FEDERAL	\$20,000	EXEMPT
	Contract Description:	This is a new interlocal agreement, which provides for the update of Nevada's Workforce Informer website. The Montana Department of Labor and Industry, Workforce Services Division, has been designated by the U.S. Department of Labor to provide the hardware, software, infrastructure, and personnel necessary to update the operational functionality of the Labor Market Information Partnership consortium of states Workforce Informer websites. The Workforce Informer website provides up-to-date and important labor market information to Nevada's employer community and other key customers.				
	Term of Contract:	Upon Approval - 09/30/2013	Contract # 14611			
96.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	WORKFORCE CONNECTIONS	FEDERAL	\$1,423,900	EXEMPT
	Contract Description:	This is the second amendment to the original interlocal agreement, which continues ongoing employment and training services to adults in southern Nevada as required by the Workforce Investment Act (WIA) of 1998 (Code of Federal Regulations Part 652 et al). This amendment increases the maximum amount from \$8,316,715 to \$9,740,615 by transferring \$1,423,900 from the WIA Dislocated Worker funding allocation to the WIA Adult funding allocation.				
	Term of Contract:	07/01/2012 - 06/30/2014	Contract # 13663			

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
97.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY	WORKFORCE CONNECTIONS	FEDERAL	(\$1,423,900)	EXEMPT
	Contract Description:	This is the second amendment to the original interlocal agreement, which continues ongoing employment and training services to dislocated workers in southern Nevada as required by the Workforce Investment Act (WIA) of 1998 (Code of Federal Regulations Part 652 et al). This amendment reduces the maximum amount from \$4,847,926 to \$3,424,026 by transferring \$1,423,900 from the WIA Dislocated Worker funding allocation to the WIA Adult funding allocation.				
		Term of Contract:	07/01/2012 - 06/30/2014	Contract # 13664		
98.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY - SPECIAL FUND	EMCOR SERVICES DBA MESA ENERGY SYSTEMS	GENERAL 1.9% OTHER: BEN, ESD SPECIAL FUND AND CAREER ENHANCEMENT PROGRAM 29.1% FEDERAL 69%	\$40,000	
	Contract Description:	This is the first amendment to the original contract, which continues ongoing HVAC service and repair for the Department of Employment Training and Rehabilitation facilities in Las Vegas Nevada, on an as needed basis. This amendment increases the maximum amount from \$9,500 to \$49,500 due to unanticipated repairs and the continued need for service.				
		Term of Contract:	06/05/2013 - 06/30/2015	Contract # 14483		
99.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY - SPECIAL FUND	WESTERNAIRE MECHANICAL	OTHER: ESD SPECIAL FUND	\$9,500	
	Contract Description:	This is the first amendment to the original contract, which continues ongoing HVAC maintenance services and repair for the Department of Employment, Training and Rehabilitation facilities in Reno/Sparks, Carson City, and Fallon areas. This amendment increases the maximum amount from \$9,500 to \$19,000 due to a greater than anticipated need for these services.				
		Term of Contract:	04/09/2013 - 05/31/2015	Contract # 14195		
100.	960	SILVER STATE HEALTH INSURANCE EXCHANGE - SILVER STATE HEALTH INSURANCE EXCHANGE ADMINISTRATION	KPS 3, INC.	FEDERAL	\$1,350,000	
	Contract Description:	This is the first amendment to the original contract to provide marketing and outreach education about the Exchange to the State of Nevada. This amendment adds language to the scope of work and increases the maximum amount from \$6,000,000 to \$7,350,000 due to additional marketing and outreach demand affecting Nevada's underinsured and uninsured populations.				
		Term of Contract:	01/08/2013 - 03/31/2014	Contract # 13950		

***16. FOR POSSIBLE ACTION – MASTER SERVICE AGREEMENTS**

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
MSA 1.	MSA	VARIOUS STATE AGENCIES	CELTIC ENERGY INCORPORATED	OTHER: VARIOUS	\$250,000	
	Contract Description:	This is a new contract to provide third-party consulting services for energy services performance contracting (ESPC) to meet the requirements of NRS 333A.086.				
		Term of Contract:	08/13/2013 - 05/31/2014	Contract # 14683		

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
MSA 2.	MSA	VARIOUS STATE AGENCIES	LEXMARK INTERNATIONAL, INC.	OTHER: VARIOUS	\$1,000,000	
	Contract Description:	This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Services (MPS) contracts enable efficient and cost effective use of office equipment, and provide a vehicle for a vendor to assume the management of an agency's printer and multi-function copier fleet.				
		Term of Contract:	Upon Approval - 08/31/2014	Contract # 14515		
MSA 3.	MSA	VARIOUS STATE AGENCIES	RICOH AMERICAS CORP.	OTHER: VARIOUS	\$1,000,000	
	Contract Description:	This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Service (MPS) contracts enable efficient and cost effective use of office equipment, and provides a vehicle for a vendor to assume the management of an agency's printer and multi-function copier fleet.				
		Term of Contract:	08/13/2013 - 08/31/2014	Contract # 14651		
MSA 4.	MSA	VARIOUS STATE AGENCIES	STRATEGIC PROGRESS, LLC.	OTHER: VARIOUS	\$500,000	
	Contract Description:	This is a new contract to assist agencies in securing and administering Federal grant awards to support the delivery of programs to benefit Nevadans. The contract will be mandatory for state agencies to use when buying these services. Services will be performed on an as-needed basis and will include, but not be limited to, working with state agencies to develop grant strategies to support existing programs, identifying new Federal funding opportunities, consulting and project management of special competitive opportunities in conjunction with state agency personnel, preparing applications and budgets, administering awarded grant funds, and training of state grant analysts in effective grant writing and administration.				
		Term of Contract:	Upon Approval - 06/30/2017	Contract # 14579		
MSA 5.	MSA	VARIOUS STATE AGENCIES	TOSHIBA AMERICA BUSINESS SOLUTIONS, INC.	OTHER: VARIOUS	\$1,000,000	
	Contract Description:	This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Services (MPS) contracts enable efficient and cost effective use of office equipment and provides a vehicle to assume the management of an agency's printer and multi-function copier fleet.				
		Term of Contract:	Upon Approval - 08/31/2014	Contract # 14702		

17. INFORMATIONAL ITEM

A. Department Of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS Chapters 111, Statutes of the Nevada, 1989 at page 263, the Division of State Lands 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. Also, pursuant to Chapter 355, Statutes of Nevada, 1993, at page 1153, the agency is to report quarterly on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program. This submittal reports on program activities for the fiscal quarter ending December 31, 2012 (reference NRS 321.5954).

Brief description

- **1989 Tahoe Basin Act**

- The agency reports there were no transfers of lands or interests in lands during the quarter

➤ There were no acquisitions of lands or interests in lands during the quarter.

- **Lake Tahoe Mitigation Program**

➤ There was one transaction finalized in this quarter. The transaction included 1,467 square feet of environmentally sensitive land coverage from a private homeowner in the Stateline area of Douglas County. That transaction was completed on May 21, 2013.

18. BOARD MEMBERS' COMMENTS/PUBLIC COMMENTS

***19. FOR POSSIBLE ACTION – ADJOURNMENT**

Notice of this meeting was posted in the following locations:

Blasdel Building, 209 E. Musser St., Carson City, NV

Capitol Building, 101 N. Carson St., Carson City, NV

Legislative Building, 401 N. Carson St., Carson City, NV

Nevada State Library and Archives, 100 Stewart Street, Carson City, NV

Notice of this meeting was emailed for posting to the following location:

Capitol Police, Grant Sawyer State Office Building, 555 E. Washington Ave, Las Vegas, NV

Brad Carson bcarson@dps.state.nv.us

Notice of this meeting was posted on the following website:

<http://budget.nv.gov/Meetings>

We are pleased to make reasonable accommodations for members of the public who are disabled and would like to attend the meeting. If special arrangements for the meeting are required, please notify the Department of Administration at least one working day before the meeting at (775) 684-0222 or you can fax your request to (775) 684-0260.

DETAILED AGENDA

August 13, 2013

1. PUBLIC COMMENTS

Comments:

*2. FOR POSSIBLE ACTION – APPROVAL OF THE JULY 9, 2013 BOARD OF EXAMINERS’ MEETING MINUTES

Clerk’s Recommendation: I recommend approval.

Motion By: _____ Seconded By: _____ Vote: _____

Comments:

*3. FOR POSSIBLE ACTION – AUTHORITY TO PAY MINING CLAIM REFUNDS

A. Department of Taxation – \$78,390

Pursuant to Senate Bill 493, Section 16.7 of the 2011 Legislature, the Department of Taxation must submit mining claim refund requests to the Board of Examiners for approval. The Department of Taxation is requesting authority to pay four refund requests totaling \$78,390. This results in a remaining balance of \$567,978 in mining claim funds eligible for reimbursement.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ Seconded By: _____ Vote: _____

Comments:

***4. FOR POSSIBLE ACTION – SALARY ADJUSTMENTS**

The 2011 Legislative Session made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet certain salary deficiencies for fiscal year 2013 that might be created between the appropriated money of the respective departments, commissions, and agencies and the actual cost of the personnel of those departments, commissions, and agencies that are necessary to pay for salaries. Under this legislation, the following amounts from the General Fund and/or Highway Fund are recommended:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
1130	Controller's Office	\$3,249	
	Total	\$3,249	

Clerk's Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____

Comments:

***5. FOR POSSIBLE ACTION – REQUEST FOR DELEGATION OF CONTRACT APPROVAL AUTHORITY**

A. Department of Administration – Board of Examiners

Pursuant to the Governor's approval of AB 41 of the 2013 Legislative Session, the Clerk of the Board is requesting delegation authority to approve all contracts for amounts less than \$50,000.

Relates to Action Item #6

Clerk's Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____

Comments:

***6. FOR POSSIBLE ACTION – STATE ADMINISTRATIVE MANUAL**

The State Administrative Manual (SAM) is being submitted to the Board of Examiners’ for approval of additions and revisions in the following Chapters: ***Relates to Action Item #5***

A.

- **0310 – Department of Administration – Clerk of the Board of Examiners – Requested Changes to the State Administrative Manual**
- **0316 – Department of Administration – Clerk of the Board of Examiners – Approval of Interlocal Contracts**
- **0322 – Department of Administration – Clerk of the Board of Examiners – Independent Contract Review**

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____

Comments:

***7. FOR POSSIBLE ACTION – NOTIFICATION OF INTENT TO FILE FOR A GRANT OR LOAN FROM THE DISASTER RELIEF ACCOUNT WHICH REQUIRES AN EXTENSION TO COLLECT DATA**

A. **Department of Public Safety – Division of Emergency Management – Clark County Flood**

Pursuant to NRS 353.2755, the Division of Emergency Management on behalf of Clark County is requesting additional time to the original extension due to the time needed to identify all costs associated with the flood damage repairs and to identify potential insurance claim offsets to the various departments and agencies with damage to structures and facilities. Clark County respectfully requests an extension to the original request of September 11, 2013 to March 31, 2014.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____

Comments:

***8. FOR POSSIBLE ACTION – REQUEST FOR FUND ALLOCATION FROM THE DISASTER RELIEF FUND**

**A. Department of Public Safety – Division of Emergency Management –
Caughlin Fire - \$267,547.32**

Pursuant to NRS 353.274, the City of Reno, Sierra Fire Protection District, and the Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Caughlin Fire, which occurred on November 18, 2011.

City of Reno	\$162,548.75
City of Reno-Non-FMAG	\$ 42,330.57
Sierra Fire Protection District	\$ 23,132.00
Truckee Meadows Fire	\$ 39,536.00
Total	\$267,547.32

**B. Department of Public Safety – Division of Emergency Management –
Washoe Drive Fire - \$116,164**

Pursuant to NRS 353.274, Sierra Fire Protection District and Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Washoe Drive Fire, which occurred on January 19, 2012.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

***9. FOR POSSIBLE ACTION – APPROVAL TO PAY A CASH SETTLEMENT AND ISSUE TAX CREDIT**

Pursuant to NRS 41.037, 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.

A. Department of Taxation – \$7,644,336

Pursuant to NRS 41.037, the department requests the approval of a settlement agreement with several companies regarding sales/use tax for complementary patron and employee meals. In this agreement the Department of Taxation requests the approval to pay a cash settlement in the amount of \$4,500,000 for taxpayers who are no longer in business and provide tax credits in the amount of \$3,144,336 for taxpayers who are still in business.

Clerk's Recommendation: I recommend approval.

Motion By:

Seconded By:

Vote:

Comments:

***10. FOR POSSIBLE ACTION – REQUEST FOR GENERAL FUND ALLOCATION FROM THE INTERIM FINANCE COMMITTEE CONTINGENCY FUND**

A. Department of Taxation – \$529,226

Pursuant to NRS 353.268, Department of Taxation, requests an allocation of \$529,226 from the Interim Finance Committee Contingency Fund to implement the excise tax imposed from SB374, Section 24.4 in the 77th Legislative Session, relating to the sale of marijuana, edible marijuana products and marijuana-infused products.

B. Attorney General – \$3,008

Pursuant to NRS 353.268, Office of the Attorney General – Crime Prevention, requests an allocation of \$3,008 from the Interim Finance Committee Contingency Fund to cover a revenue shortfall of License Plate Charges.

C. Department of Health and Human Services – Division of Public and Behavioral Health – Southern Nevada Adult Mental Health Services – \$3,093,226

Pursuant to NRS 353.268, the Division of Public and Behavioral Health, requests an allocation of \$3,093,226 from the Interim Finance Committee Contingency Fund to renovate all of building #3 at Southern Nevada Adult Mental Health Services as shown in the revised CIP 13-C08.

Clerk's Recommendation: I recommend approval.

Motion By:

Seconded By:

Vote:

Comments:

***11. FOR POSSIBLE ACTION – STATE VEHICLE PURCHASE**

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

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Department of Public Safety – Investigation Division	3	\$68,292
Department of Public Safety – Highway Patrol	199	\$10,936,337
Department of Conservation and Natural Resources – Division of State Parks	6	\$145,013
Department of Wildlife - Operations	3	\$97,468
Department of Wildlife – Fisheries Management	6	\$207,549
Department of Wildlife – Game Management	4	\$110,402
Department of Wildlife – Habitat	3	\$78,836
Department of Wildlife – Law Enforcement	7	\$182,872
Department of Wildlife – Conservation Education	1	\$28,015
Department of Wildlife – Diversity	2	\$47,050
Total:	234	\$11,901,834

***12. FOR POSSIBLE ACTION – VICTIMS OF CRIME FY 2013 4TH QUARTER REPORT AND FY 2014 1ST QUARTER RECOMMENDATION**

NRS 217.260 requires the Board of Examiners to estimate available revenue and anticipated claim costs each quarter. If revenues are insufficient to pay anticipated claims, the statute directs that claim payments must be reduced proportionately. The Victims of Crime Program Coordinator recommends paying the Priority 1 & 2 claims at 100% and Priority 3 claims at 100% of the approved amount for the 1st quarter of FY 2014.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

***13. FOR POSSIBLE ACTION – VICTIMS OF CRIME PROGRAM (VOCP) APPEAL**

Pursuant to NRS 217.117 Section 3, the applicant or Clerk of the Board may, within 15 days after the appeals officer renders a decision, appeal the decision to the Board. The Board shall consider the appeal on the record at its next scheduled meeting if the appeal and the record are received by the Board at least 5 days before the meeting. Within 15 days after the meeting the Board shall render its decision in the case or give notice to the applicant that a hearing will be held. The hearing must be held within 30 days after the notice is given and the Board shall render its decision in the case within 15 days after the hearing. The Board may affirm, modify or reverse the decision of the appeals officer.

A. Stacy Howell

The issue before the Board is the appeal of a denial for VOCP assistance due to late reporting of crimes to police. Ms. Howell has filed multiple requests for hearings and appeals. Ms. Howell failed to submit appeals timely and failed to appear at several hearings.

Clerk’s Recommendation: I recommend to uphold the denial of this claim.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

***14. FOR POSSIBLE ACTION – LEASES**

Ten statewide leases were submitted to the Board for review and approval.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

***15. FOR POSSIBLE ACTION –CONTRACTS**

One Hundred independent contracts were submitted to the Board for review and approval.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

***16. FOR POSSIBLE ACTION – MASTER SERVICE AGREEMENTS**

Five master service agreements were submitted to the Board for review and approval.

Clerk’s Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____
Comments:

17. INFORMATIONAL ITEM

A. Department Of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS Chapters 111, Statutes of the Nevada, 1989 at page 263, the Division of State Lands 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. Also, pursuant to Chapter 355, Statutes of Nevada, 1993, at page 1153, the agency is to report quarterly on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program. This submittal reports on program activities for the fiscal quarter ending December 31, 2012 (reference NRS 321.5954).

Brief description

- **1989 Tahoe Basin Act**
 - The agency reports there were no transfers of lands or interests in lands during the quarter
 - There were no acquisitions of lands or interests in lands during the quarter.

- **Lake Tahoe Mitigation Program**

- There was one transaction finalized in this quarter. The transaction included 1,467 square feet of environmentally sensitive land coverage from a private homeowner in the Stateline area of Douglas County. That transaction was completed on May 21, 2013.

18. BOARD MEMBERS' COMMENTS/PUBLIC COMMENTS

***19. FOR POSSIBLE ACTION – ADJOURNMENT**

Clerk's Recommendation: I recommend approval.

Motion By:

Seconded By:

Vote:

Comments:

MINUTES

MEETING OF THE BOARD OF EXAMINERS

July 9, 2013

The Board of Examiners met on Tuesday, July 9, 2013, in the Guinn Room on the second floor of the Capitol Building, 101 N. Carson St., Carson City, Nevada, at 10:00 a.m. Present were:

Members:

Governor Brian Sandoval
Attorney General Catherine Cortez Masto
Clerk Jeff Mohlenkamp

Others Present:

Tonya Brown, Advocate for the Innocent
Michael Weston
Ty Robbin
Bryan Stockton, Attorney General's Office
Nancy Bowman, Tort Manager
Mandi Davis, Division of Public Health and Behavioral Health
Barbara Weisenthal, Ryan White Program
Steve Fisher, Division of Welfare and Supportive Services
Steve McBride, Juvenile Services
Deanette Kluever, Division of Child and Family Services
Todd Rich, Division of Insurance
Dennis Perea, Department of Employment, Training and Rehabilitation
Carol Turner, Workforce Connections
Kimberly Elliott, Grants Team
Kimberlee Tarter, Purchasing Division
Sumiko Maser, Department of Taxation
Kurt Green, Northern Nevada Adult Mental Health Services
Clayton Bussiere, Northern Nevada Adult Mental Health Services
Marilynn Hesterlee, Health Division
Siri McMillin, Rural Clinics
Janet Murphy, Aging and Disability Services
Michael McMahon, Division of Welfare and Supportive Services
Tamara Nash, Department of Employment, Training and Rehabilitation
Teri Preston, State Public Works Division
Julie Kidd, State Public Works Division
Chris Nielsen, Department of Taxation
Brian Flanner, State Public Charter School Authority
Scott Sisco, Department of Corrections
Deb Cook, Controller's Office
Carla Spencer, Controller's Office
Dan Olsen, Health Division
Ellen Crecelius, Department of Health and Human Services
Bonnie Long, Department of Health and Human Services

Katie Armstrong, Attorney General's Office
David Gustafson, Enterprise IT Services
Sandra Cherub, Associated Press
James Kirkpatrick, Health Division

1. PUBLIC COMMENTS

Comments:

Governor: Good morning ladies and gentlemen. I'd like to call the Board of Examiners Meeting to order. Can you hear us loud and clear in Southern Nevada? Give me just a thumbs up.

Governor: All right. All right. We'll begin with Agenda Item No. 1, public comment. Is there any public comment from Southern Nevada?

Governor: I'll take that as a no. Any public comment from here in Carson City?

Tonya Brown: Good morning.

Governor: Good morning.

Tonya Brown: Tonya Brown, Advocate for the Innocent, Advocate for the Inmates. I have come here today as I have in the past. Basically, I'm here to let you know I agreed -- I went into -- on good faith, signed a settlement agreement with you and others and over the course of the last 18 months -- 19 months, you have continually breached the settlement agreement, and so far that -- to violate my constitutional rights that I have now served -- Wayne Howe has now accepted service in the suit, and I'm letting you know. I would have personally served you, but we served outside. So you as a Board of Examiners, you make deals with individuals, plaintiffs in cases, and this is not the only case in the wrongful death of Nolan Cline, which I was the administrator and the heir to, that you breached that settlement agreement that now you are being sued over. But you have, not personally, Brian Sandoval, but others with regard to other settlement agreements; it seems to be a practice and a policy of this Board and other boards in which you breach these contracts you make with plaintiffs and plaintiffs such as inmates. And that is something that I brought to you as the Board of Prison Commissioners. I asked at that time to fix it and you sealed up the records claiming confidentiality, which was never a part of any settlement agreement. In fact, it was public document in which I was able to use to exonerate certain names, which was a part of the settlement agreement again. And when I brought to you that the members -- certain members within the Attorney General's office had been withholding evidence in cases including the Nolan Cline case and Michael Spencer's case, you shut me up. That's what this suit is about. You breached the settlement agreement and doing so, you violated my constitutional rights. Thank you. Have a good day.

Governor: Thank you, Ms. Brown. Is there anyone else who would like to provide public comment to the Board? Yes, sir.

Michael Weston: Yes, I would.

Governor: Please come forward, sir.

Michael Weston: Governor, I was here last summer and...

Governor: And if you would please state your name.

Michael Weston: Yeah, I'm sorry. Michael Weston, long time Nevada resident. Last summer when I was here, at that time it was my case with the D.A.'s office and all the corruption that I've been facing on a rig citation from the NHP that the D.A., six months ago, after the meeting I saw you last summer here, since they have no objections to vacating this citation, returning my \$300 fine and my court costs. Now, I'm facing a judge, Scott Pearson in Reno, which I went to yesterday for a hearing, and he says he's powerless to throw out what the D.A. brought against me in the first place for conviction and job security, you might say. And now under pressure of protesting in front of their courthouse for a year, which I didn't like and it's gotten a lot of publicity -- the world's largest crime scene banner which I produced, and it's been here in Carson -- a lot of people have seen it -- and it's on YouTube, it's on Info Wars, Alex Jones. It's getting numerous hits. It's being seen all over. It's on a number of websites now.

My point is when I went to the court a couple weeks ago to get a form, it's called a Hearing Set Date form to see the judge, I was immediately surrounded by five Washoe County sheriff deputies while I was up at the counter at the clerk getting my paperwork, where forms are requested, and she wouldn't give me the forms. I had to go online with the help of Ty Robbins and get the form and get it filled out and take it down to the court. And each time I go there I'm -- they come up -- they come up to you, they fool around, they intimidate you, they like -- you feel like you're going to get arrested for something. Dale Evans with the Attorney General's office, the letter I got from your office stated that they saw no improprieties, no breaks in the dash cam video which now the D.A.'s office admits that the video was tampered and they're saying it's even legal. They finally admitted it on here that it's okay to do that, you know, take two minutes out of here, one minute out of here and then every remaining 16 minutes has missing seconds. And that's the pattern of what happens when they play around with the two timestamps. One, they cleaned up to show no break, the other one shows breaks. And for 4 years and 10 months after I got the citation in '05, I was stopped 31 times.

And I told the FBI, I went to the FBI, they looked at the tape. I told them give me a polygraph if you want. They said, "No, we don't give polygraphs" -- to the fact that I've been stopped by the NHP and harassed 31 times, and on stop 29 and stop 31, I had guns pulled on me, pointed at my head by two different officers both times at night, usually on the same area from downtown Reno quarter -- or casino district area to Exit 7 where we live. Most of -- 90 percent of the stops were in that area during the nightshift, or the swing shift or whatever. And, you know, I felt threatened. A gun could have gone off. I could've had my head blown off. They illegally searched my car. The trooper, Ed Bowers, who's still on the force should be in prison, ordered me in front of the dash cam video the second time to restage the verbal exchange. I mean this crap should not be going on, Governor. If I was the governor, I would get on the phone to the judge and I would say hey, let this guy have his day in court.

To this day, I've never been able to appeal this case. I've timely submitted my appeal papers or file stamp dated and signed, and the court clerk, Robin, there at the Washoe County Clerk Courthouse would not forward my papers to the district court for appeal. And I went back to -- numerous times over a week and a half to see the court administrator and say, "Hey, what's

going on?” And they said, “Oh, we don’t know where he is. We don’t -- we can’t get a hold of him,” nothing. And the last two times I went there, I sat in the lobby for a couple hours and I was going to sit there all day until he showed up, and they threatened to arrest me; you can’t loiter here, you can’t stay in here. If he’s not here, you can’t hang around. This is gestapo tactics, and Governor, this should not be happening. If I was the governor, I’d be on the phone right now and say, “Hey, let this guy have his day in court.”

You know, I had an impeccable record. I’ve been driving for -- ever since I was 16. No tickets, no accidents in 45 years. I’m a retired pilot. No accidents, no violations. I’ve raised two kids, both come back from the service from Afghanistan and one in the Marines in training had an accident there. Been married 32 years. I’ve never committed any crimes. I’ve been in business 35 years, not a single complaint with the Better Business Bureau. I do everything right and all this happened because I brought a complaint one night to the NHP saying hey -- or not a complaint, I just called and said you guys need to get the NDOT sand trucks out here because there’s -- on I-80, there was a blizzard and black ice and there’s people injured. One lady was rolled over. We couldn’t help her. She was trapped in a pickup upside down in the mud and the snow on the side of the road.

I go home, I pick up the phone. I call the Reno NHP and I said “Hey, you guys need to get some sand trucks out here. You’ve got -- you’ve got rollover -- you’ve got a rollover, you’ve got spinouts and SUVs all over the place upside -- you know, on the side of the road.” And I was told, “Mr. Weston, we’re not the babysitters for NDOT. You can go ahead and call them yourself.” And I said, “Well, there’s no after-hours phone number to call.” And they said, “Well, that’s your problem,” and slams the phone down. I pick up the phone again and I says, “If somebody there doesn’t call NDOT, I’m going to call Governor Guinn’s mansion that night,” which I did. The next morning, I get an apology from Captain White, who said “They were out of line and we’re sorry for this. They shouldn’t have done this. They should have handled it better.”

Four months later I’m driving home from work and I get run off the road or forced to get off the road because two guys are speeding in a construction zone near Keystone Avenue. It’s about 45 miles an hour there. So I get back on the road and I’m heading up -- about a mile up ahead is Trooper Ed Bowers, at the time I didn’t know who he was. And I pulled up behind him and he stopped what looked like one of the vehicles. And after a few -- after he said, you know, “Would this be one of the vehicles that were racing and run you -- forced you to get off the road?” And I said “I can’t be sure. I couldn’t get the license number. They were doing about 80 miles an hour.” And he did cite that vehicle for, I think, it was 72 miles an hour. And then he says -- after a few moments he says, “Would you be Mr. Weston by any chance,” and I says, “Yes.” And he says, “Do you remember me? I’m Trooper Ed Bowers. You called and complained about our department and calling everybody, and Senator Wracho, I called him about what happened.”

And so, anyway, he orders me in front of the dash cam video on his car...

Governor: Okay, Mr. Weston. I’m going to have to limit you a little bit because I have to be respectful of everybody else’s time.

Michael Weston: All right. Okay, I'll make it short.

Governor: Yeah.

Michael Weston: My point is now the corruption in the judicial system is so unbelievably corrupt, it's like I'm dealing with a licensed -- I mean a criminal enterprise run by licensed criminals in dirty diapers. I mean, that's the way I feel about this whole system. There's no due process. There's no justice, nothing. You get -- you're threatened. You're stopped by NHP. The D.A. who brought the original charge against me says right here "We have no objections, Mr. Weston, to vacating your -- but we're going to --" and all this, "We're going to leave it up to the judge." The judge is sitting there worried about me suing the state. And I've already told them I won't sue the state if they'd just let me have my day in court and get this damn thing vacated, because the D.A. who brought the charge is now saying, "Hey, we're willing to drop it." Now, I've got to face a judge, who now I may be protesting him with the world's largest signs and going after him. And this publicity is getting on YouTube, it makes Nevada look bad.

I just ordered -- I just got this morning a 300-foot -- mailed to me UPS -- banner that I plan on stretching it clear -- if I have to -- clear across the front of the Capitol all the way down to the State Legislature and send that to Time Magazine and Newsweek and say, "Hey, this is what a guy has to do to get justice in this state." That's all I have to say and I appreciate the letters last summer, said you're confident that I will prevail through the legal system, and I'm going -- but it's -- I'm still not there, and this should not be happening. I should not have to spend this much time and effort to deal with a \$300 nonarrest, rigged citation by NHP. And that trooper, Ed Bowers, should be fired. Chris Perry, I believe, is a colonel for the NHP or -- oh, no, I'm sorry, he was promoted to...

Governor: Director Perry has -- is retired.

Michael Weston ...Public Safety or whatever. They need to get rid of that trooper, because he'll go out and do that to somebody else, if he's not done it already. And you've got to deal with these people, Governor. This makes the state look bad and innocent people like myself get screwed and, you know, I've been fighting this for eight years. Just six months ago, they said they have no objections to vacating this.

Governor: All right. Thank you very much, Mr. Weston.

Michael Weston: Thank you.

Governor: Is there anyone else who would like to provide public comment to the Board of Examiners?

Ty Robbin: I've got something real quick. Hi there, people in Vegas. Oh, nobody's there. I was going to ask if anyone saw the recent video coming out of Las Vegas...

Governor: Sir, if you would identify yourself for the record.

Ty Robbin: Sure. My name is Ty Robbin. And I did serve Mr. Howell, who is your Attorney General, correct, for Mrs. Tonya over here. Is that correct? I just wanted to make sure that he's your Attorney General.

Governor: I don't know -- I don't know, Mr. Robbin.

Ty Robbin: You don't know Mr. Howell? He's your -- I just want to make sure nobody's running out the back door and I don't have to chase them over into the -- to the Save Mart, you know. So anyhow, he accepted the papers on your behalf and your behalf, Mrs. Masto, on behalf of Mrs. Brown. So I wanted to make sure that's on the record so nobody can say they weren't personally served, because I can't personally serve you without going through the security. So anyhow, that's on the record.

And I would just say that the Carson City -- my experience with their -- serving the subpoena to Ms. Martinovich last year has really wound up to be quite a problem for me, and there will be a complaint coming, and it'll be naming Carson City Department of Alternative Sentencing. And what I find interesting is that you just signed a bill, SB 101, right? Do you recall that bill, Senate Bill 101? What it does is it allows alternative sentencing which is their jailhouse court police to have jurisdiction over pretrial defendants. But prior to that law, which went into effect July 1st of this year, they didn't have jurisdiction. And I had these people coming over to my house, kicking in my doors, hiring bounty hunters to kick in my doors, shoot me with Taser guns, trying to kidnap me across the state line. So that whole thing's resulted in a big lawsuit in Sacramento Federal Court.

And like I said, you know, I'm filing a complaint under Section 1983 for my violation of civil rights right here in Carson City related to serving a subpoena to your former director of NDOT, Susan Martinovich. So I also find it ironic that this fellow over here, Gerald Gardener, correct? Is that right?

Gerald Gardener: That's my name.

Ty Robbin: Was the Deputy Attorney -- or District Attorney to Neil Rombardo when all this went down. So I think you guys overplayed your hand and that complaint will be coming soon, too. So thank you for the time.

Governor: Thank you, Mr. Robbin.

Ty Robbin: All right.

Governor: Any further public comment?

***2. FOR POSSIBLE ACTION – APPROVAL OF THE JUNE 11, 2013 BOARD OF EXAMINERS’ MEETING MINUTES**

Clerk’s Recommendation: I recommend approval.

Motion By: Attorney General Seconded By: Governor Vote: 2-0

Comments:

Governor: All right. We will move on to Agenda Item No. 2, which is approval of the June 11, 2013 Board of Examiners Meeting minutes. Madam Attorney General, have you had an opportunity to review the minutes and do you have any changes?

Attorney General: Yes, I’ve reviewed them. No, I have no changes and I would move for approval.

Governor: Okay. I will second the motion. All those in favor, please say aye.

Attorney General: Aye.

Governor: Aye. Motion passes two, zero.

***3. FOR POSSIBLE ACTION – AUTHORITY TO PAY MINING CLAIM REFUNDS**

A. Department of Taxation – \$78,390

Pursuant to Senate Bill 493, Section 16.7 of the 2011 Legislature, the Department of Taxation must submit mining claim refund requests to the Board of Examiners for approval. The Department of Taxation is requesting authority to pay four refund requests totaling \$78,390. This results in a remaining balance of \$567,978 in mining claim funds eligible for reimbursement.

Clerk’s Recommendation: I recommend approval.

Motion By: Attorney General Seconded By: Governor Vote: 2-0

Comments:

Governor: We will move on to Agenda Item No. 3, authority to pay mining claim refunds. Mr. Mohlenkamp.

Clerk: Thank you, Governor. Before the Board, for the second to last time, is an action item to authorize the payment of mining claims, in this case, for \$78,390. As you recall, initially there was authority out there for \$18,158,531.00. This will bring the total amount of claims that have been submitted, including payments and credits to \$17,590,553. So the remainder that’s out there that can come forth next month is \$567,978.00. And we have sent notices to all those

parties who have the opportunity to let them know that the clock is ticking. They had to file by June 30th. So next month will be the last time we'll see this on the Agenda. Anybody that doesn't meet that time window will not be authorized to make a claim before the Board.

Governor: So time is up. So they needed to submit their request for refund by June 30. Do you know, as we sit here, whether there were any additional...

Clerk: I don't.

Governor: ...requests?

Clerk: I don't. I expect there probably were a few. Like I said, next month we'll bring the final amount and then this -- you won't see this on the Agenda after that.

Governor: I'm not complaining. All right. I have no questions regarding this matter. The Chair will accept a motion for approval to pay mining claim refunds in the amount of \$78,390.

Attorney General: So moved.

Governor: I'll second the motion. All in favor please say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two, zero.

***4. FOR POSSIBLE ACTION – SALARY ADJUSTMENTS**

The 2011 Legislative Session made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet certain salary deficiencies for fiscal year 2013 that might be created between the appropriated money of the respective departments, commissions, and agencies and the actual cost of the personnel of those departments, commissions, and agencies that are necessary to pay for salaries. Under this legislation, the following amounts from the General Fund and/or Highway Fund are recommended:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
1130	Controller's Office	\$10,129	
	Total	\$10,129	

Clerk's Recommendation: I recommend approval.

Motion By: _____ **Seconded By:** _____ **Vote:** _____

Comments: Pulled From Agenda per Controller's Office

Governor: Mr. Mohlenkamp, I understand that Agenda Item No. 4 has been pulled from the -- or withdrawn from the Agenda.

Clerk: That's correct, Governor. We received contact from the Controller's office they had filed this request in the abundance of caution looking at their personnel thinking that they might need the funds. Analysis has concluded that they will not need these additional funds, so they've requested to withdraw that.

Governor: All right. Thank you.

***5. FOR POSSIBLE ACTION – TORT CLAIM**

**A. Gypsum Resources, LLC – TC 16567
Amount of Claim - \$920,000**

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General

Seconded By: Governor

Vote: 2-0

Comments:

Governor: We will move on to Agenda Item No. 5, tort claim. Is there somebody here on this Agenda item?

Bryan Stockton: Good morning. I'm Bryan Stockton, Senior Deputy Attorney General. I was representing the Attorney General's office in this case.

Nancy Bowman: Nancy Bowman, Tort Manager.

Governor: Thank you. So if you would take us through briefly the nature of the lawsuit, please.

Bryan Stockton: The nature of the lawsuit; in 2003, the legislature at the behest of Senator Dina Titus passed SB 358, which created an area adjacent to the Red Rock Canyon National Conservation Area where Clark County was no longer allowed to change the zoning in there. It would have rural zoning, two homes per acre. The major landowner in there was Gypsum Resources. They own the development rights for what's basically been the Blue Diamond Gypsum Mines since the '40s. And so based on the zoning, they could put 1,200 homes in there. They were proposing to put 8,000 homes.

And so the legislature passed this law to free zoning. Clark County also passed an ordinance and they were sued as well. The federal district court and, ultimately, the Nevada Supreme Court held that it was unconstitutional under Sections 20 and 21 of the Nevada Constitution local and special laws, and also under Section 25 of the Nevada Constitution in that it -- they held that it destroyed the uniformity of state laws in the area of zoning. And they also -- we also argued that there was a natural resources exception because this was adjacent to the National Conservation

Area, and the Supreme Court rejected that as well. And the claim here is for attorney fees. The case is done and...

Governor: Procedurally, it went to and then it was appealed to the Ninth Circuit. The Ninth Circuit sought clarification of state law from the Nevada Supreme Court. The Nevada Supreme Court is the one that essentially found the law to be unconstitutional.

Bryan Stockton: Correct.

Governor: All right. Now -- and you're saying that this settlement in the amount of -- or the district court granted attorney's fees in the sum of \$1.1 million?

Bryan Stockton: No, no. It's -- the plaintiffs who filed their motion for attorney fees for \$1,100,000.00. Now, that included everything against Clark County and the state but, of course, there's really no discretion for the district court. They have to award attorney fees and not based on what's billed, but based on the lodestar factor. So the actual figure we'd be looking at is \$1.6 million.

Governor: Yeah, I'm just reading straight out of the memo from here.

Bryan Stockton: I apologize. That's incorrect, I clarified that.

Governor: All right. And you were able to negotiate this down to \$920,000?

Bryan Stockton: Correct.

Governor: And then it -- there's also a sentence here that says Clark County settled with Gypsum, which removed them from the case. Do you know what the nature of that settlement was?

Bryan Stockton: Yes. They agreed to -- they agreed to rescind their ordinance which prevented them from even looking at zoning in the area, and they only agreed that they would look at it and consider any development proposal that Gypsum might make in the future.

Governor: Now, did their settlement include a monetary piece?

Bryan Stockton: It did not.

Governor: And so why are -- why is the state on the hook for all the attorney's fees?

Bryan Stockton: We're not on the hook for all of the attorney fees. So if you want to go through the numbers, I can.

Governor: Okay.

Bryan Stockton: The \$1.6 million would be the lodestar figure, and of the -- if you look at the underlying -- the district court case, that amount would come to -- and let me preface this with when I did the numbers, we had the figures -- lodestar figure and, I don't know, do you want me to explain the lodestar?

Governor: You might for everybody else's benefit.

Bryan Stockton: Okay. All right. In federal court, it doesn't matter what the plaintiff's attorney bills. What the court awards based on Supreme Court precedent is what's called the lodestar. And that's the average hour -- or not average, but the prevailing hourly rate for attorneys in that field in that area. And they produce case law that they -- Gypsum actually paid \$400 an hour, but they produced case law that showed that it was about \$700 an hour, actually, and for partners. And so all I recalculated was the partners and added that and that's where I got the \$1.6 million. And of that, about a third would be attributed -- when I ran the numbers, and I didn't bring the specifics, about a third of that would be attributed to Clark County for their half of the district court case, and then all of the appellate costs would be on the State. So ours would be about two-thirds, so it'd be...

Governor: So two-thirds of the fees were generated...

Bryan Stockton: Those are rough figures. I...

Governor: ...by the state? But let me finish my sentence, please.

Bryan Stockton: Sure.

Governor: The two-thirds of the fees were generated before the Ninth Circuit?

Bryan Stockton: No. One-third against us and the district court, and one-third in the appeal. We briefed it and argued both in the Ninth Circuit and briefed and argued in the Nevada Supreme Court.

Governor: I guess, like I said, I'm not certain where you're getting this \$1.6 million figure because it says the district court granted attorney's fees and costs to Gypsum Resources in the amount of \$1,103,363.00.

Bryan Stockton: Okay, I apologize. That's -- the amount they billed to Gypsum was the \$1.1 million, approximately.

Governor: Amount they billed, is that the law firm?

Bryan Stockton: Correct. That's the amount the law firm billed Gypsum...

Governor: Okay.

Bryan Stockton: ...because they had an agreement to represent them for \$400 an hour. Now, the federal courts, they don't -- they ignore that \$400 an hour and they calculate it based on the lodestar, which is the \$700 an hour. And so if you look at the fees based on the \$700 an hour, it would be the \$1.6 million.

Governor: But that -- again, I guess I'm just confused because it -- this says the district court granted attorney fees and costs. So why is the \$1.6 million?

Bryan Stockton: Again, that memo, it says the district court -- the district court has not awarded anything.

Attorney General: So that was a mistake? That should not be?

Governor: That's a mistake? It should...

Bryan Stockton: Yes, that's a mistake.

Governor: Okay. All right. I was just trying to get this clear.

Bryan Stockton: I thought I had said that was in there. I apologize.

Governor: Okay. But I guess that's not even relevant as much, because it says you've negotiated this down to \$920,000.

Bryan Stockton: Correct. And that includes an additional of about \$75,000 in costs that are wrapped up in that -- that are not attorney fees, but they're wrapped up in that \$920,000, that would be in addition to the \$1.1 million.

Governor: And so is Clark County paying the balance between the \$920,000 and the \$1.6 million?

Bryan Stockton: No. Gypsum is just going to have to -- they're just eating that.

Governor: So Clark County isn't participating in the \$920,000 at all?

Bryan Stockton: Correct. That's just our share.

Governor: Okay. When you say "our share," does that allow Gypsum to still go after Clark County? But they've already settled.

Bryan Stockton: They agreed not to go after Clark County, so this is all they get.

Governor: Okay. And are you going to seek any kind of compensation or share from Clark County for the \$920,000?

Bryan Stockton: No. Because this only represents our share of the -- like I said, the \$1.6 million or higher. It would likely be higher than the \$1.6 million. That's all I was able to calculate. So the rest of it represents what would either be Clark County's share or that Gypsum is just going to absorb.

Governor: So there was a time when the district court decided against Clark County and the State. Clark County chose to settle...

Bryan Stockton: Correct.

Governor: ...and we decided to appeal to the Ninth Circuit?

Bryan Stockton: Correct.

Governor: And that's what ran our attorney's fee bill up to \$920,000?

Bryan Stockton: Well, it's more than that, but \$920,000 is what they were willing to settle for.

Governor: Was there ever an effort to try and resolve the case prior to the decision by the Nevada Supreme Court?

Bryan Stockton: We made -- we made several -- they didn't get very far, though. There were the -- what I tried to do is I tried -- what -- well, it's kind of a long answer, but when they -- when Senator Titus was testifying on SB 358, she testified that the 1,200 homes which is the current zoning would allow on the property would not, quote, "pencil out." And so I tried to get Gypsum to kind of at least give us a figure of how many homes would pencil out, because I don't know if you're familiar with the Blue Diamond Hill. The closest place to get access to water for the subdivision is about a quarter mile away and it's up a 400-foot cliff. And so it's going to take, you know -- and so I just tried to find out how many homes.

And then when we were in the Ninth Circuit, Gypsum did offer to settle and if we would withdraw our appeal, they would waive the attorney fees at that point, but we decided to go forward.

Governor: And as part of the settlement, Gypsum's agreed to waive any right to post-judgment interest?

Bryan Stockton: Yes.

Governor: Okay.

Bryan Stockton: Well, the terms are actually that, as long as we pay it within 10 days, they will waive any interest. If it's not paid within 10 days, it begins to accrue interest at that point.

Governor: Okay. Ten days from when?

Bryan Stockton: When this Board approves it.

Governor: And how much is that?

Bryan Stockton: I didn't calculate that amount.

Governor: Okay. Well, and we -- this is the end of the hunt basically, isn't it?

Bryan Stockton: Yes.

Governor: I mean, we've lost at every level.

Bryan Stockton: And the settlement is, it's contingent on your approval. If you don't approve it today, then we go to district court and fight it out.

Governor: What's left to fight about?

Bryan Stockton: Attorney fees.

Governor: Oh, okay. So they -- it says here as part of the order that their right to recover attorney's fees shall be determined on motion to be filed March 16th. So have they already filed their motion?

Bryan Stockton: They had filed their motion. We were getting close to an agreement at the time my response was due, so I went ahead and filed a response. And at that point, we finally came to the agreement and we filed a motion for stay -- for the district court to stay the proceeding pending this meeting today.

Governor: And in their motion, is that where they ask for the \$1.6 million, or do you recall?

Bryan Stockton: Well, they didn't provide a number there. What they did is they provided the number of hours they spent and the \$700 per hour, and then you had to figure out the \$1.6 million.

Governor: The going rate now is \$700 an hour?

Bryan Stockton: It is for big city firms and they're out of Los Angeles, Wilshire Boulevard.

Attorney General: So they picked a going rate out of the district of -- not from Nevada, but out of California?

Bryan Stockton: That's what they provided evidence of.

Attorney General: So can I follow up...

Governor: Yeah.

Attorney General: ...because I -- because this is part of my concern as well. So right now, what's pending before the district court is the amount of attorney's fees and costs? They're entitled to it but the issue is, can we fight to get it lower than that?

Bryan Stockton: Correct.

Attorney General: Okay. And so the -- pending before them, all they have to show is a prevailing wage somewhere, apparently in California...

Bryan Stockton: Well, it's supposed to be...

Attorney General: ...and the hours?

Bryan Stockton: ...the jurisdiction that's relevant and...

Attorney General: So would that be our counter in the motion, is that jurisdiction wouldn't be relevant and what we should be looking at is \$400 or whatever the prevailing rate is here in Nevada?

Bryan Stockton: We could but, I'm guessing, for this kind of firm, it's higher than \$400 per hour.

Attorney General: But we haven't checked to see?

Bryan Stockton: No, I don't -- I don't know.

Attorney General: Okay.

Bryan Stockton: But they did provide case law where federal courts had accepted \$700 per hour as reasonable in this type of case.

Attorney General: And so have we filed a response yet to...

Bryan Stockton: Yes.

Attorney General: And what was our -- I guess, give me your recommendation on why it's better to settle and not fight in district court to try to lower this rate. I mean, what would be our arguments to try to lower this rate?

Bryan Stockton: Well, the arguments to lower the rate are, one, that the \$700 an hour is unreasonable. Two, that a larger portion should be a portion to Clark County. Given the history of litigation before Judge Jones in this case, my -- I'm not confident that he's going to bring it down very much. And in looking at the -- in filing the response and I didn't bring the exact arguments we made, but those are the arguments that he asked for, a portion between us and Clark County and that he should -- you know, he should get the prevailing rate in the -- in this

jurisdiction, you know. And the best estimate I have is we're going to be on the hook for about \$1.2 million.

Attorney General: And that's not including post-judgment interest?

Bryan Stockton: That's including post-judgment. Well, and then, interest will be on top of that.

Governor: What's the best case scenario for state?

Bryan Stockton: The best case scenario is if Judge Jones just cut it in half, it'd be about \$800,000 is my best -- I mean, I've had some accountants look at it -- not accountants, but some of our financial people look at it and the \$1.6 million is about the minimum the total award's going to be. If you cut it in half without, you know, apportioning as closely as you should, then it would be \$800,000.

Attorney General: And what's your argument that Clark County should be on the hook for some of this?

Bryan Stockton: It's not -- it's kind of a funny -- the way the case law works is they have to apportion it between defendants whether that other defendant has to pay or not. And so the Clark -- even though Clark County -- they waive their attorney fees against Clark County, the court must apportion it against Clark County. And so if he decided not to look closely at it and just cut it in half, the best case scenario would be the \$800,000, but I think that's very unlikely.

Attorney General: And, Nancy, as you're manager of the contingency fund, this money would be coming out of the Contingency Fund, correct, or where would this money be coming from if we were to pay it -- or the tort fund? I mean, the tort fund.

Nancy Bowman: Yeah, it would come from the tort fund. That is correct. And...

Attorney General: How much money do we have in the tort fund now?

Nancy Bowman: Because we just started the new biennium, I've got \$3.6 million.

Attorney General: Okay.

Nancy Bowman: It's new funding for this fiscal year, and I've got \$3.8 million in my reserve account.

Attorney General: And do we have any other cases that we're aware of that are going to be a dollar amount that might have to be paid out of that contingency fund over the next biennium or the next year...

Nancy Bowman: We do...

Attorney General: ...or, excuse me, the tort fund?

Nancy Bowman: The tort fund. We do have that Contreras case that's out there, that we think we're going to try and settle that in the next three to four months. Other than that, I am not aware right now of any large tort claims.

Attorney General: And have you had a chance to look at this issue, and what's your recommendation on settlement in this particular case? Have you had a chance to be involved in it at all?

Nancy Bowman: I was not very involved with the negotiation piece. I was on annual leave when this all came about, so Bryan and Keith Monroe, the Assistant Attorney General, both looked at it.

Attorney General: Okay. So the best case scenario, going back to the Governor's question, would -- that the judge would rule in our favor that we just owe attorney's fees in the amount of \$800,000 or splits?

Bryan Stockton: Well, that's if he splits it in half, and the case law is that if he just split it in half, it probably wouldn't stand up on appeal, frankly. But I think that is the best case scenario.

Governor: And remind me again why the 1.6 number is the number that we're working from.

Bryan Stockton: So the way I did that is they had billing -- they provided us billing statements, where they showed how many hours each person had spent on the case, and there were a certain number of hours by partners and then a certain number of hours by associates. And I didn't recalculate the associates' wages. I only recalculated the partners' wages, added that to the total amount; that's where the \$1.6 million comes up. If you calculate just the partners' time at the \$700 an hour, that's where the \$1.6 million comes up.

Governor: So that's your calculation. That may not be...

Bryan Stockton: Correct.

Governor: ...the courts calculation.

Bryan Stockton: Correct.

Attorney General: The courts calculation could be higher or lower?

Bryan Stockton: It could be much higher. They got an excellent result in the courts under -- there's a case called Hensley versus Eckhart, 461 US 424. They can even enhance it because what they got was an excellent result. We lost. They declared the constitutional was -- or the statute was unconstitutional on all grounds, so the court can even enhance it beyond that.

Governor: I just -- it sounds like we're in a box here and I -- it's just a tough one to swallow because there goes a third of our tort...

Nancy Bowman: Mm-hmm.

Governor: ...fund.

Nancy Bowman: Mm-hmm.

Governor: What are we, nine days...

Nancy Bowman: Yeah.

Governor: ...into the new biennium? All right. I -- like I said, I -- it's a tough one to swallow, but it is what it is. And so I have no further questions. Madam Attorney General...

Attorney General: I don't either. Thanks. Just a comment, I guess -- and I feel the same way you do. The risk we would be taking moving forward going before the judge is that we might be -- owe more money than what we have now. I guess the only good thing about this settlement now is that there would be no post-judgment interest if we pay it within 10 days. And how much did you -- did you calculate the post-judgment interest?

Bryan Stockton: I did.

Attorney General: Okay.

Governor: But it sounds like Clark County walks away from this without paying a dollar.

Bryan Stockton: They did. And that was the settlement, and they settled at the district court, so...

Governor: So they're looking pretty good right now.

Bryan Stockton: We thought we had a good case. We thought the law would support us and the natural resources exception seemed to apply, and so we...

Attorney General: Is this the...

Bryan Stockton: ...we gave it our best shot.

Attorney General: ...is this the case where LCB also filed?

Bryan Stockton: Correct. LCB filed an brief in the Ninth Circuit and at the Nevada Supreme Court.

Attorney General: Okay.

Governor: I have nothing further.

Attorney General: No.

Governor: If there are no further questions, the Chair will accept a motion to approve payment of the settlement amount of \$920,000 as provided in Agenda Item No. 5.

Attorney General: So moved.

Governor: Second the motion. Any questions? All in favor, please say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two, zero. Thank you.

Bryan Stockton: Thank you.

***6. FOR POSSIBLE ACTION – STATE ADMINISTRATIVE MANUAL**

The State Administrative Manual (SAM) is being submitted to the Board of Examiners' for approval of additions and revisions in the following Chapters:

- A. 0330 – Department of Administration – State Public Works Division – Minor Remodeling, Repair, and Maintenance Contracts**
- B. 0326 – Department of Administration – Board of Examiners – Independent Contracts Not Requiring Board of Examiners' Review**
- C. 0328 – Department of Administration – Board of Examiners – Lease Contracts**
- D. 0338 – Department of Administration – Purchasing – Solicitation Requirements**
- E. 0504 – Department of Administration – State Public Works Division – Insurance and Self-Insurance**
- F. 1000 – Department of Administration – State Public Works Division – Name Change from Buildings and Grounds to State Public Works Division**
- G. 1002 – Department of Administration – State Public Works Division – Serving the Capitol**
- H. 1004 – Department of Administration – State Public Works Division – Scope of Services**

- I. 1006 – Department of Administration – State Public Works Division – Procedure for Service**
- J. 1012 – Department of Administration – State Public Works Division – Maintenance, General**
- K. 1016 – Department of Administration – State Public Works Division – Craft Services**
- L. 1018 – Department of Administration – Nevada State Library and Archives – Mail Services**
- M. 1020 - Department of Administration – State Public Works Division – Leases**
- N. 1022 - Department of Administration – State Public Works Division – Rent Charges for State Owned Buildings**
- O. 1024 - Department of Administration – State Public Works Division – Office Space**
- P. 1026 - Department of Administration – State Public Works Division – Protection of State Property**
- Q. 1028 - Department of Administration – State Public Works Division – Energy Conservation**
- R. 1030 - Department of Administration – State Public Works Division – Energy Information and Assistance**
- S. 1900 - Department of Administration – State Public Works Division – Name Change from Public Works Board to Public Works Division**
- T. 1902 - Department of Administration – State Public Works Division – General**
- U. 1904 - Department of Administration – State Public Works Division – Capital Improvement Program**
- V. 1906 - Department of Administration – State Public Works Division – New Construction**
- W. 1908 - Department of Administration – State Public Works Division – Remodeling, Repairs, and Maintenance**
- X. 1910 - Department of Administration – State Public Works Division – Acceptance of Grants and Contracts**

- Y. 1912 - Department of Administration – State Public Works Division – Inspection of State Buildings**
- Z. 1914 - Department of Administration – State Public Works Division – Building Official Role**
- AA. 1916 - Department of Administration – State Public Works Division – Emergency Contract Authority**
- BB. 2404 - Department of Administration – Division of Internal Audits – Implementation of Legislative Audit Recommendations**
- CC. 2508 - Department of Administration – Budget Division – Budget Preparation**
- DD. 2514 - Department of Administration – State Public Works Division – Operation and Maintenance for Capital Improvements**
- EE. 2542 - Department of Administration – Department of Human Resource Management – Position Control**
- FF. 3708 - Department of Administration – Department of Human Resource Management – Unemployment Compensation Assessment**

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General

Seconded By: Governor

Vote: 2-0

Comments:

Governor: We'll move on to Agenda Item No. 6, State Administrative Manual. Mr. Mohlenkamp.

Clerk: Thank you, Governor. Before the Board is a number of modifications to the state administrative manual. I have to say that all but one of these are really cleanups. They're name changes to reflect -- and this is very belated and I apologize for that in advance. The merger that happened two years ago -- or it's actually about a year and nine months ago, the Department of Administration, we had a number of name changes that had not been made within SAM. For example, State Public Works Board transferred over to the State Public Works Division, Human -- Department of Personnel, Human Resources Division -- things of that nature. So there's a lot of cleanup going on here in names to make sure that we have the -- reflected the right groups.

There is a few statute references that are included. It didn't change anything; it just included the reference to the statute instead of just saying Nevada revised statute. There's some inclusion of websites links basically into the SAM manual so people can go directly to the various division

websites where they would find the information. And then there's some cleanup language. There's just some misspellings and things of that nature.

The only thing of substance in here is Item BB, which is submitted by the Division of Internal Audits. And what they're requesting, is currently if the Legislative Council Bureau does an audit, there's a requirement to follow up on a six-month basis to say how well we have done at implementing the recommendations. Currently, agencies have to submit to the Internal Audits Division 30 days before that's due to LCB. What we're finding is that too often there's not enough leg work that's been done and Internal Audits is right up against the time frame on trying to submit a good response to LCB. So they're requesting in here that agencies be required to submit their responses that would be reviewed by LCB -- reviewed by Internal Audits and also by myself 45 days instead of 30 days. So it gives them an extra 15 days to -- with which to work on their responses and make sure that we have a timely response and an adequate response. And so I would ask for your support of that additional 15 days. It does -- it does require agencies to move a little quicker on their responsiveness, but we think it's going to deliver a better product to LCB when we do this. So that's the only substantive change before the Board in all these various changes to the SAM manual.

Governor: Have you heard any opposition to this proposed change to 2404?

Clerk: I have not received anything from the agencies that would suggest that they have problems with it. I'm not sure how well agencies scoured the -- you know, our Agenda looking for these types of things, and so it may be that people are not really entirely aware of the change. I don't believe it's a real hardship. It does require a little bit more timely planning on their part, but our staff will be reaching out to them and trying to make sure that they are aware of the changes. So we'll be sending notification in the form of an agency policy directive so they'll be aware of that.

Governor: I have no further questions.

Attorney General: No.

Governor: If there are no questions, the Chair will accept a motion for approval of the proposed changes to the State Administrative Manual as described in Agenda Item No. 6.

Attorney General: So moved.

Governor: I second the motion. All those in favor of the motion, please say aye.

Attorney General: Aye.

Governor: Aye. Motion passes two, zero.

***7. FOR POSSIBLE ACTION – LEASES**

Seven statewide leases were submitted to the Board for review and approval.

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General

Seconded By: Governor

Vote: 2-0

Comments:

Governor: We'll move on to Agenda Item No. 7, leases. Mr. Mohlenkamp.

Clerk: Thank you, Governor. Before the Board are seven leases for consideration. And as you can see, we seem to have hit the end of the savings road which is bittersweet. It's...

Governor: Good news and bad news.

Clerk: As a budget director, it's sad. I think it does indicate that our real estate market is changing and moving to positive ground, though. One thing I want to comment on, No. 5...

Governor: Yes.

Clerk: ...is this is the training room -- the computer training room for the Controller. They were -- the legislature authorized funding to open up a training. This is over on Fairview here in Carson City, and so it indicates the State's Controller's office it's only an additional training room -- a computer training room that they will be using to provide training to state employees on the use of the state accounting system and things of that nature.

Governor: My only question is why are we signing a 10-year lease? Is that just better market...

Clerk: Yeah.

Governor: ...or better price?

Clerk: That's my understanding. I did reach out and talk to staff and we're -- you can see that we're doing a lot of these longer leases because we're getting better rates for that. I know that when the legislature approved this funding that they had some concerns over whether there was enough demand for the training and there -- they've asked the Controller's office to report back with regard to how much training they're doing. And so we've also double checked and the lease does have "opt out" if there's lack of funding. So if for some reason in the executive budget or, ultimately, the legislature the next time around deems that there's really not adequate need this could be defunded if necessary, and that would be our ability to get out of the lease.

Governor: All right. I have no further questions regarding the other leases. Madam Attorney General?

Attorney General: No questions.

Governor: If there are no further questions, the Chair will accept a motion for leases 1 through 7 in Agenda Item.

Attorney General: I'll move for approval.

Governor: ...number -- or -- oops.

Attorney General: Oops.

Governor: Yes, that's right. Yeah. I'll second the motion. Any questions? All in favor, say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two to zero.

***8. FOR POSSIBLE ACTION – RENTAL AGREEMENTS**

Two rental agreements were submitted to the Board for review and approval.

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General Seconded By: Governor Vote: 2-0

Comments:

Governor: We will move on to Agenda Item No. 8, rental agreements. Mr. Mohlenkamp.

Clerk: Mr. Governor, before the Board are two separate agreements, both with the Department of Employment, Training and Rehabilitation. This is for storage of records primarily, but also for equipment. It looks to me that -- this is the first time I've seen these come on the Agenda, but I understand that this is not uncommon. We do have these come up periodically. And I may have spoken incorrectly on the records. I'm not certain if there are records. It might be just extra equipment. It looks like forms, whether that's actual records or just forms that they would use for future record keeping, I'm not sure. In any event, I understand this is fairly standard type process for us and I don't have any further comments.

Governor: I have no questions.

Attorney General: No questions. I'll move for approval.

Governor: Attorney General has moved for approval of Agenda Item No. 8, rental agreements one and two. I second the motion. All in favor, say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two, zero.

***9. FOR POSSIBLE ACTION – CONTRACTS**

Eighty independent contracts were submitted to the Board for review and approval.

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General

Seconded By: Governor

Vote: 2-0

Comments:

Governor: We'll move on to Agenda Item No. 9, contracts. Mr. Mohlenkamp.

Clerk: Thank you, Governor. Before the Board are 80 contracts for consideration. As you mentioned at the outset, Item No. 79 in this Agenda item were the Public Employees Benefits Program, a proposed contract with Liberty Dental Plan. The agency has requested that this be removed from the Agenda and not considered today. They have -- they need to have some further discussions with the vendor. Apparently, there's some lack of clarity with regard to exactly we're buying and what they're selling. And so this may be several months before this comes back on the Agenda. They'll be circling back and seeing -- making sure they can get on the same page.

Governor: All right. I had asked -- or I have questions regarding 27, 31, 64, 70 through 75 and that is all. And I will say I had had some questions regarding some of these Department of Wildlife and Forestry and having to do with firefighting, and they weren't really substantive questions, and I saw them out at the Bison fire yesterday and told them -- no circumstances did they need to be here. And I ask everybody if you would keep them in your thoughts and prayers. It's a horrible fire out there and they're out there on the front lines doing everything they can to put it out. They're working really hard. So with that, why don't we go ahead and commence with Contract No. 27, please. Good morning. If you'd just state your names for the record, please.

Mr. Daniels: Good morning, Governor. Mandi Davis, Section Manager for the State Health Division -- or actually it's the Division of Public and Behavioral Health.

Barbara Weisenthal: Barbara Weisenthal, Program Specialist for the Ryan White Program.

Siri McMillin: Program Specialist for the Ryan White Program.

Governor: Thank you. And my questions are not anything to do with the substance of the contract. It's a big number and I thought it would be a good opportunity to talk about what you do. Sir, please proceed.

Mrs. Davis: Okay. The Catamaran is also known as Catalyst are, they merged, I believe, this last year or so. They are our largest pharmacy benefits manager. They do help us with providing the medications for our Aide Up or AIDS drug assistance activities for our Ryan White clients. They are statewide and as it relates to providing the support for our Aide Up pharmacies. The University Medical Center is one of our Aide Up pharmacies, as well as Northern Nevada

Hopes. And under UMC, they also have satellite pharmacies, which is Walgreens, and the reason for that, it just allows our clientele to be able to reach the various pharmacies where they live. And so they've been beneficial and being at the site of client's residence area.

The contract is for a -- it's a four-year contract. I believe it terminates March 31st of 2017, and it has been in existence for...

Barbara Weisenthal: Well, it was a sub-grant at one time, and so now, we need to get into a contract and that's where we're at today, because we used to sub-grant out to Catalyst RX.

Mrs. Davis: The funds that -- the funds that fund this activity is from federal funds, from HRSA, as well as state funds and as well as pharmaceutical rebates. So the -- so we do get that benefit of receiving rebates based on the medication cost to the State. And those funds get reinvested back into the program. Most of it goes back into the -- our Aide Up program because that's where the cost is at for the program. Within Aide Up, there is three different programs; our medications, our state pharmacy assistance program that normally covers our Medicare Part D clients. They transition in and out into our program on a yearly basis. They pretty much get on our program for like -- at the end of our -- each calendar year, and they kind of roll off at the beginning of the quarter of the new year when the Medicare Part D drug plans kick in for them. And so it's a -- it's an evolving enrollment. And the third program is our continuation of benefits. And the continuation of benefits is basically our health insurance, and it's our deductibles and copays that we help our clients out.

Barbara Weisenthal: And if I could just add the Medicare Part D is the state portion, and that's our maintenance of effort, the mandate from the government to receive the funds. So that's what we do with those funds.

Governor: So it sounds like it's working well, and everybody needs to be served is being served?

Mrs. Davis: Yes.

Governor: Are there any waiting lists?

Mrs. Davis: We have no waiting lists...

Governor: Okay. Congratulations.

Mrs. Davis: ...for several years, I believe, we have not had a waiting list.

Barbara Weisenthal: We have not had a waiting list.

Clerk: Governor, if I might add, this is one of those programs that as we were looking at federal sequestration and that we were concerned about, obviously, these drugs are very important to the people who receive them. But they've done a really good job at recovering the benefits back from the -- back from the State -- or back from the federal government, you know, these

reimbursements that we receive. And so we've done a really good job of leveraging the funds. Currently, we don't see a problem with this funding going forward, so...

Mrs. Davis: We also have protocols in place that -- to avoid the waiting list. We would curtail other services that we provide. We also provide medical and support services. And, of course, with the change in the environment with ACA, we're going to monitor that closely. A majority of our clients will transition over to Medicaid.

Governor: Yeah, that's a great question -- or comment that prompts a question, is what the ACA -- how that'll affect your program.

Barbara Weisenthal: And it's about 50 percent of our clients.

Mrs. Davis: Yeah, about 50 percent of our clients. We have about -- a little over 1,400 clients enrolled in our program, so about 50 percent of them will transition over to Medicaid. Roughly about 15-16 percent of our remaining clients will transition over into the Marketplace. And so with that, there's -- based on HRSA's guidelines and direction, there could be a shift from medications into health insurance monitoring. So in order for us to ensure that our clients are transitioning over to the two main insurance entities, that there's a smooth transition so they don't fall through the gaps. And I believe our program will be more or less the very -- the exhilarating supportive services that maybe the Marketplace won't cover.

Governor: And that was going to be my next question, is if your client list is dropping down to 600, 700...

Mrs. Davis: Mm-hmm.

Governor: ...what do you do, you know, what are your next responsibilities?

Barbara Weisenthal: We anticipate, excuse me, we -- Barbara Weisenthal. We anticipate that we're not sure what exactly the Health Insurance Exchange is going to cover. Whatever it doesn't cover, we're going to pick up. And the feds have told us -- the federal government has told us that that's going to be part of our role.

Governor: I think there are some exchange representatives here today, so perhaps I'll ask that question then.

Barbara Weisenthal: And it's all -- we're still learning. We're still learning the process and what's going to be happening, so -- but we -- and then there will be the ancillary services that, you know, are still the wraparound services that we're still going to be needing to provide for the clients.

Governor: Okay. Madam Attorney General, do you have any questions?

Attorney General: No.

Governor: Thank you very much.

Mrs. Davis: Thank you.

Governor: Speaking of the Exchange, we'll move on to Contract 31.

Clerk: Yeah, and that's actually going to be the Welfare Division.

Governor: The Welfare Division?

Clerk: Yeah.

Governor: Okay. Good morning.

Steve Fisher: Good morning, Governor, Board members. For the record, Steve Fisher, Deputy Administrator for the Division of Welfare and Supportive Services. And Contract 31 is a contract with Deloitte Consulting. Deloitte Consulting is the IT consulting company that we hired to implement the eligibility engine for the Division of Welfare and Supportive Services, one piece of the Affordable Care Act Project. There's three major stakeholders; the Exchange, Silver State Exchange, Division of Welfare and Supportive Services, and the Division of Healthcare Finance and Policy, which is Medicaid. So those are really the three major stakeholders.

This particular contract is a contract with the Division of Welfare and Supportive Services for the eligibility section. The reason for the contract amendment is -- let's see, the Affordable Care Act was signed into law in April of 2010, a year ago. The Supreme Court weighed in on it. It's constitutional. Really from that point forward, CMS, the Center for Medicaid and Medicare, have been, for lack of a better term, scrambling to really put out the final federal regulations so that we know what they are.

Governor: What to do.

Steve Fisher: Yeah, what to do. And so based on those federal regulations coming out over the last four or five months as a matter of fact, I just received a final federal regulation on Friday, this last Friday. And you can imagine once those final federal regulations come down, we have to read them and then determine whether there is an impact to the project or not. And so what you have before you are three change orders to the project based on those federal regulations coming down and making an impact to the project at cost.

Governor: Feds pay for that?

Steve Fisher: Well, there's a four percent -- I believe four percent of that is general fund, six percent would be federal.

Governor: Now, we're getting up against a wall because we're supposed to be up and running.

Steve Fisher: 2000 -- yes. And so the -- yes.

Governor: Do we anticipate more new regulations prior to that date?

Steve Fisher: Well, we are at a -- what I would call a point of no return, meaning we have to implement what we have today. And then if there are significant changes, those changes will have to take place after we implement.

Governor: Well, haven't we told CMS that...

Steve Fisher: Yes, we have.

Governor: ...very fact that...

Steve Fisher: Yeah.

Governor: ...it's too late, and you've had enough time to give us the regulations that you expect us to abide by and we're at that point of no return.

Steve Fisher: That is correct.

Governor: And -- but we still anticipate even more regulations that'll be coming through?

Steve Fisher: We do, yes.

Governor: Okay. You know, I feel bad for you guys because...

Steve Fisher: It's tough, that it is.

Governor: Yeah. No, but if...

Steve Fisher: We are -- we are going to make the timeline. We're on schedule as far as, you know, what we know today. We are going to make the October 1st deadline.

Governor: No, my understanding is we are out in front of a lot of the states.

Steve Fisher: We are. We're -- and that's good and bad. Being out in front, right, if these changes are coming, and it's hard for us to react to them now because we're obviously trying to meet the deadline. But we are out in front of a lot of states, yes.

Governor: But we've been constructing this based upon the previous information that we had received in the regulations as they were...

Steve Fisher: There's draft regulations that come out and the public can weigh in on those draft regulations; based on those draft regulations, we make assumptions and we move forward. And we let CMS know, here's our assumptions and we have to move forward.

Attorney General: And based on the timelines the feds set for us.

Steve Fisher: Based on the timelines, yes.

Governor: All right. Well, that was the main purpose of my asking you to come up here...

Steve Fisher: Sure.

Governor: ...is to kind of give us an update of where we are, and please tell everybody who's responsible for interpreting and implementing those regulations that we appreciate their hard work.

Steve Fisher: I will. Thank you.

Governor: Thank you. 45, please, Contract 45. Good morning.

Steve McBride: Good morning. Steve McBride, Deputy Administrator for Juvenile Services for the Division of Child and Family Services.

Jeanette Clover: And I'm Deanette Kluever. I'm the Deputy over fiscal services for Child and Family Services.

Governor: And thank you. Essentially, I mean, we were reopening some of you and I'm curious to see how that's going and how many beds we're going to have and when they expect to be up and running.

Steve McBride: Well, we're anticipating getting started right after this with the repaired roof conditioning of the facility. We're hoping to have kids start entering the facility in a seating program that would start as early as October 15th of this year, and anywhere between that date and January 15th of 2014, keeping in mind that we sort of don't know what we don't know at this point with -- once we power everything up and see what needs to be attended to. The state will have the 96 beds, we'll have up to 50 beds for state correctional placements and the vendor will have the ability to use the other, up to 46 beds, for alternative placements for other placing agencies out of the state.

Governor: Out of state?

Steve McBride: Correct.

Governor: Okay. And part of the policy of this, at least from my perspective, was that a lot of the clients there are from Southern Nevada were having to go all the way to Elko. And won't the proximity to Las Vegas be very helpful in terms of family visitation?

Steve McBride: It will be and that was part of one of the charges of the Supreme Court Commission on Juvenile Justice Reform was to look at a regionalized approach to how we reform our system.

Governor: And you only anticipate that half the beds, approximately, will be necessary for state placements?

Steve McBride: We believe so and we gave ourselves some flexibility with being able to adapt to the commitment practices of the judicial districts. We're going to continue to operate beds at the Nevada Youth Training Center in Elko with Caliente Center in Caliente, of course, and then with this additional more secure care facility to complete our continuum of the need.

Governor: All right. Thank you. Madam Attorney General, do you have any questions or comments?

Attorney General: No, I guess, maybe a comment because this is a -- this is something that you're going to continue to monitor as part of a bigger picture of this juvenile justice for reform, correct?

Steve McBride: Correct. And we'll be continuing to participate on the Supreme Court of Commission of Juvenile Justice Reform among other commissions in the Nevada Association of Juvenile Justice Administrators and continue to be flexible and adaptive as we try to grow and improve and meet the needs of the State.

Attorney General: Yeah, and I will say I am a member of the Supreme Court Committee, and I think, Governor, this is a long time coming. I think justice reform. The plan that has been put forth that everybody, every key stakeholder has been working on is tremendous. So I'm looking forward to see how this really works to the benefit of our children that are going through the juvenile justice system. So thank you for all your hard work.

Steve McBride: Thank you.

Governor: Thank you very much. Contract 64, please, B&I.

Todd Rich: Good morning. Governor.

Governor: Good morning.

Todd Rich: For the record, Todd Rich. I serve as the Deputy Commissioner for the Nevada Division of Insurance. Do you want me to go through the contract; do you have specific questions?

Governor: Well, and I did read the memo that you provided and thank you very much. But the purpose for my asking you to be here today was just simply, this is funding through the Nevada Division of Insurance with regard to educating Nevadans about their rights as purchasers of insurance via the Affordable Care Act. And I just wanted to make sure -- because we've got

Health and Human Services, we've got Silver State Exchange, and we have Business and Industry all involved in this making sure that they're all coordinated and we're doing the -- they're all on, essentially, the same song sheet. So I don't know if you have any comment there.

Todd Rich: Sure. It's a good question and maybe -- let me start by saying that our role at the division is to -- is to review the qualified health plans that come in from carriers. We make sure that they are certified for a number of different issues. We look at the rate and form filings, making sure that the rates are adequate, that they're not excessive, that they're not discriminatory. Once they go through our certification process, we basically push them to the Exchange. And so we are on track, at this point, to get all the plans certified by the end of this month, and then we'll push it out to the Exchange so they can start building their website, which they're doing currently. So we anticipate that there'll be adequate plans out there.

Our division has worked very hard to make sure that there's coverage in the rural areas. We had some concerns with some of the carriers that we were in discussions with that, maybe, Filch, and Elko or Ely might not have access to plans through the Exchange, so we've made sure that there are coverage for those folks out there. We meet with the Exchange every week to ensure that we're on the same page and that things are moving quickly and effectively. It's like drinking from a fire hose right now. It's incredible. But I think the leadership at the Exchange along with our leadership has done a good job of aligning our objectives and making sure that we're moving forward.

So this contract will help us educate Nevadans on -- on once they purchase insurance, and I think what the Exchange is doing, and they've got much more money than we do as far as outreach and education, but they're trying to get the population that doesn't have insurance. We want to make sure that once you purchase an insurance product, and in this case health care, that you know that you have rights, that you can make complaints that we will follow up. We've put a new piece on our website that allows consumers to look up their provider or their broker to make sure they have an active license. Part of this funds, and we're using 400,000 from our grant, will be to supplement our website to make sure that it's very sophisticated, that folks can look up their health insurance rates and determine if those rates are adequate and how we came to that decision. And this will be inside and outside the Exchange.

And the Exchange is anticipating that about 120,000 Nevadans will sign up year one. We're in charge of regulating the entire marketplace, and a full-insured marketplace is a little over 600,000. So we've got most of our work outside the Exchange, but that's really the basis for this contract, along with educating folks on title insurance and our general insurance products that we do every year.

Governor: And I know you can't speak for the Exchange, but from your perspective, it looks like everything's on track.

Todd Rich: I think they've done a tremendous job and we have a really good partnership. They've -- from what we've seen, and we attend a lot of conferences, insurance related, and Nevada is top two or three states as far as state-based exchanges and the work they put in. So I think we're in a good position and we want to thank you for signing Assembly Bill 425, which

codified a lot of the federal requirements and put it into state law, and so we're able to regulate from a state perspective rather than looking at the federal requirements.

Governor: And I wish Mr. Hagar was here, and if you could pass it along to that group, that similar to the individuals that we were just speaking with, but the Silver State Exchange, as you say, is the national leader and is almost a model for what other states are doing. Is that accurate?

Todd Rich: Absolutely.

Governor: Yeah.

Todd Rich: Yes. They've -- and for the amount of staff they have, which is minimal, they push really hard and they're doing a lot of great things. They push us pretty hard, but we've created a really good partnership so we're excited. And I really anticipate October 1st that everything will go off without a hitch, unless the feds make more changes.

Clerk: Governor, I had the pleasure of serving on the Board as a nonvoting member for the Silver State Health Exchange, and I have to tell you that is a very active board. They meet -- they meet monthly. They had side groups that -- basically, sub-meetings and they are very, very active. So I think the selection of the board was also a really tremendous job.

Governor: Thank you, Mr. Mohlenkamp. Madam Attorney General, do you have any questions?

Attorney General: No.

Governor: Okay. Thank you, Mr. Rich.

Todd Rich: Thank you.

Governor: And I believe, finally, 70 through 75.

Dennis Perea: Good morning, Governor, Madam Attorney General. For the record, Dennis Perea. I serve as Deputy Director for the Department of Employment Training and Rehabilitation. I could give you a synopsis on what these contracts represent or I could try to answer any specific questions you might have.

Governor: You've probably anticipated my questions because...

Dennis Perea: I do.

Governor: There's a history here and I think there's been incredible improvement and an evolution here, so I am more interested -- I know what these contracts are about and why they're necessary and they're extremely important. But I'm kind of interested in -- or I am interested in, you know, where we've -- how far we've come.

Dennis Perea: Yes, Governor. I could start off by saying one of the -- being an ex-auditor, that one of the great things that has taken place this year is that they had unqualified audits on both program and their financials. That hasn't happened in the six years I've been with DETR, and I don't think it happened for a long time before I actually got to DETR. So they've cleaned up their audits; they've reduced their expenses dramatically. They went from 80 staff down to 33.18, I believe, and cut their cost way down. For whatever reason, they're still budgeted at about 20 percent; 10 percent admin and 10 percent program, but they're actually spending far less than that at this point. I believe their program year '12, they were at 14 percent. So they've cut their costs way down.

And they've actually, from a programmatic standpoint, they have started to serve a much tougher to serve population so they're starting to turn the tide even on their program side, in my opinion. Some of the recommendations that came out of the audit in 2011, most of which we couldn't implement because of the Department of Labor wouldn't grant us the waivers, we have implemented -- the Governor's Workforce Investment Board has passed down the mandate that 30 percent of the \$4 million goes into certificate job training. That is starting to take place now and we've also instituted more rigorous reporting on a quarterly basis, that the boards report back to DETR.

Governor: And can you quantify how much more money is actually going to the people served versus administrative costs?

Dennis Perea: I passed Carol Turner, but I -- before we started this process, they budgeted around 6.5. They -- for the last year, they budgeted 5.3 and spent 3.5. So in essence, it's come down between \$2.5 million and \$3 million.

Governor: And that's \$3 million that is going, again to the client -- will be getting served.

Carol Turner: That's correct. Carol Turner, from Workforce Connections. There's an additional \$1.5 million plus the unspent operations that we're continuing to roll out into contracts for next year, which adds to approximately the \$2.5 million that Mr. Perea mentions. We put -- in the new one stop, we've put 65 percent into client services which includes the training for certificates at 50 percent, as well as 15 percent into supportive services such as bus passes, rent subsidy, those types of things.

In the home office location contracts, we're putting 40 percent into training and supportive services. So of that \$2.5 million, a majority will be going to -- directly into the clients, you know, into the training as well as the supportive services.

Governor: And you're finding that your staff is able to meet all the requirements with -- even with the reductions in force?

Carol Turner: They are. We've seen about a 43 percent decrease in our FTE, 25 percent in the salary dollars. But we're actually gearing up programs; we're focusing on those that are most in need. We've put out additional contracts, specifically for adults and youth with disabilities. We focus on re-entry for youth as well as adults. We have former foster care contracts now. So in

essence, we're still increasing our efforts into the programmatic services. We're focusing -- we have four sector employees that focus on determining the demand jobs in the sectors that have been established, as well as rolling out some special curriculum for youth and new curriculum for adults in the stem focus for the science technology, engineering, and math which will, in essence, be where we believe the most demand is in the future for jobs, 80 percent plus.

Governor: And when you say the sectors, that means you're aligning with the economic development sector.

Carol Turner: We are. We actually have a staff member on each of the nine -- they're nonvoting members on each of the nine sectors. You'll find that Mr. Perea can confirm that like on the healthcare sectors and the clean energy sectors, we played a major role in the original two sectors. And we do have a staff representative on each of the sectors to, in essence, gather the information specifically regarding, you know, workforce demands and where the jobs are going to be.

Governor: Excellent. Thank you. Do you have any questions, Madam Attorney General? And just, again, compliment to what you've done, because I know that wasn't easy through the past 18 months, but I think the end result that we're hearing today is a great one. And again, it sounds like we're more organized, we're more focused, we're more targeted, and we're more efficient and more people are being served. So I don't know how we could ask for anything more.

Carol Turner: Absolutely.

Governor: Thank you.

Dennis Perea: If I may, I also want to talk about Nevada Works. They've reduced their expenses down to around eight percent for the current year. So they continue to become more efficient as well.

Governor: Thank you very much.

Carol Turner: All right. Thank you.

Governor: The last one I had marked has been withdrawn. Madam Attorney General, do you have any questions...

Attorney General: No.

Governor: ...regarding any of the contracts?

Attorney General: No, I don't.

Governor: I have none, so the Chair will accept a motion for approval of Contracts 1 through 80, with the exception of 79, which has been withdrawn.

Attorney General: So moved.

Governor: I second the motion. Any questions? All in favor, say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two to zero.

***10. FOR POSSIBLE ACTION – MASTER SERVICE AGREEMENTS**

Three master service agreements were submitted to the Board for review and approval.

Clerk's Recommendation: I recommend approval.

Motion By: Attorney General

Seconded By: Governor

Vote: 2-0

Comments:

Governor: Mr. Mohlenkamp, Agenda Item No. 10, master service agreements.

Clerk: Thank you, Governor. Before the Board are three master service agreements. This is new, something that we're doing with our grant's team. We're trying to provide a conduit for agencies to seek grant opportunities to be able to acquire the expertise necessary to, you know, get the application out, to make sure that we are on top of it. So what we have here, and this is -- this is new, is three different groups that can be used by state agencies when they see grant opportunities of if they know grant opportunities might be coming up; to be able to get this support from these people that have specific expertise.

You know, in some cases it doesn't make sense to hire full-time staff to be able to go after periodic grants. And in this case, it gives us an option to go after that expertise on a contractual basis. And so we're -- it's through the grants team that's part of my department that we're doing this as well as a variety of different training things, trying to basically increase our bandwidth of expertise so that we can be more successful in going after the grants. And so I'm pleased that this has taken a little bit of work, but that we've got these three before the Board, and I'll be interested in seeing how well they're used and reporting back to you in six or eight months as to whether this has really proven to not only be a good idea, but maybe something that's fruitful.

Governor: Will these entities bring to the state's attention, grant opportunities?

Clerk: This is more reactive on our part, where instead of them scouring and bringing to our attention grant opportunities, it's once we become aware of it, whether it's through a periodical, or word or mouth or direct information from the federal government. When we become aware of -- this is basically expertise to help facilitate us in securing the grant, more going after that leg work to help us to craft a proper grant application to make sure that we have got all the elements included that we need. And sometimes there's expertise needed, whether it's public safety or environmental or things of that nature. So these groups are supposed to have people with expertise in certain fields to kind of augment what we've got internally.

Governor: So where I'm going is, perhaps the state sometimes misses out on grant opportunities because we simply weren't aware of them. And I just want to make sure that we have all the boots on the ground out there searching to see if there are any grant opportunities.

Clerk: Yeah, and we do. One of the things that we've done internally and our grants team has made a real concerted effort on is making sure there's a central repository of grant opportunities. And so we have that on our website and we link out to many other websites that are out there whether they're nonprofits or largely a federal government. Kimberly Elliott is here. She runs the grants team and she can provide a little bit more guidance or help me out here a little bit.

Kimberly Elliott: Kimberly Elliott for the record. To answer your last question, once these contracts are approved by this entity, we will be scheduling meeting with the vendors. And we have some very proactive vendors that we have selected, and they will be looking for opportunities for the state and they will bring them to us. But we need to meet with them and meet with the different agencies to outline those needs, but they will be watching for the state.

Governor: No. And I know we may not get them all but I want to be in the game, not in the stand. Simple as that.

Clerk: Yeah, and they're really -- we really have taken an aggressive approach at making sure that we're aware of it. I think the main reason, I'll be honest with you, that we don't probably get some of the grants that we would want to, is the lack of resources to apply sometimes, whether it's -- whether it's the lack of sufficient number of grant writers, or those resources or lack of the state to basically to secure the grants. And those are -- those are two of the obstacles that we also have and that we know we need to address going forward.

Governor: All right. It sounds like a great opportunity. Thank you very much. Madam Attorney General, do you have any questions?

Attorney General: No, I'm good.

Governor: The Chair will accept a motion for approval of the master service agreements described in Agenda Item No. 10.

Attorney General: So moved.

Governor: Second the motion. All in favor, say aye.

Attorney General: Aye.

Governor: Aye. The motion passes two to zero.

11. BOARD MEMBERS’ COMMENTS/PUBLIC COMMENTS

Governor: Public -- or Board member comments. Madam Attorney General, any comments?

Attorney General: No.

Governor: No? All right. Public comment, any member of the public here in Carson City that would like to provide public comment to the Board? Anyone in Southern Nevada that would like to provide public comment to the Board?

***12. FOR POSSIBLE ACTION – ADJOURNMENT**

Motion By: Attorney General Seconded By: Governor Vote: 2-0

Comments:

Governor: Is there a motion for adjournment?

Attorney General: I’ll move for adjournment.

Governor: Second. All in favor, please say aye.

Attorney General: Aye.

Governor: Aye. Motion passes. This meeting is adjourned. Thank you very much, ladies and gentlemen.

Attorney General: Thank you very much.

Respectfully submitted,

JEFF MOHLENKAMP, CLERK

APPROVED:

GOVERNOR BRIAN SANDOVAL, CHAIRMAN

ATTORNEY GENERAL CATHERINE CORTEZ MASTO

SECRETARY OF STATE ROSS MILLER

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 12, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Melanie Young, Budget Analyst *my*
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.

DEPARTMENT OF TAXATION

Agenda Item Write-up:

Pursuant to Senate Bill 493, Section 16.7 of the 2011 Legislature, the Department of Taxation must submit mining claim refund requests to the Board of Examiners for approval. The Department of Taxation is requesting authority to pay four refund requests totaling \$78,390.00.

Additional Information:

Below is a table summarizing the action taken by the Board or pending the Board's approval at this time, and provides an outlook for future potential mining claim refunds. The fiscal year 2012 value includes a \$700 adjustment due to an administrative error that occurred with the very first mining claim refund request forwarded to the BOE in November 2011.

BOE Meeting Date	Mining Refund	MBT Credit	Grand Total
Fiscal Year 2012	\$16,327,608.50	\$619,390.00	\$16,946,998.50
Fiscal Year 2013 To Date	\$588,155.00	\$56,100.00	\$644,255.00
July 2013	\$267,880.00	\$0.00	\$267,880.00
One-Time Adjustment	(\$700.00)	\$0.00	(\$700.00)
Totals to Date	\$17,182,943.50	\$675,490.00	\$17,858,433.50
Total Mining Claims Deposited in State General Fund			\$18,158,531.50
Difference			\$300,098.00

Statutory Authority:

Senate Bill 493, Section 16.7, 2011 Legislative Session.

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



**STATE OF NEVADA
DEPARTMENT OF TAXATION**

Web Site: <http://tax.state.nv.us>

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Carson City, Nevada 89706-7937
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BRIAN SANDOVAL
Governor
ROBERT R BARENGO
Chair, Nevada Tax Commission
CHRISTOPHER NIELSEN
Executive Director

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HENDERSON OFFICE
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Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

Date: July 3, 2013
To: Melanie Young, Budget Analyst; Colleen Murphy, Budget Analyst 4
From: Sumiko Maser, Deputy Director, Administrative Services
CC: Mark Krmpotic, Legislative Counsel Bureau
Cathy Gregg, Budget Analyst 4
Subject: Board of Examiners Action Item – Mining Fee Refunds

In accordance with Senate Bill (SB) 493 (see Attachment A for relevant sections) of the 2011 Legislative Session, the Department of Taxation requests the Board of Examiners' approval for payment of the attached list of 45 applications for mining fee refunds, totaling \$267,880.00 (see Attachment B). These refunds are for amounts paid by mining claim holders pursuant to Nevada Revised Statute (NRS) 517.187 (see Attachment C for relevant sections). Section 16.7 of SB 493 repeals NRS 517.187 for mining claims fees adopted in Assembly Bill (AB) 6 during the 26th Special Session. AB 6, section 47 (see Attachment D for relevant sections), amended NRS 517.187 to impose an additional fee on each filing by persons holding 11 or more mining claims. The fees deposited by the State Controller in the State General Fund for FY 2010-FY 2013 totaled \$18,158,531.50.

Attachment B represents the Taxation's fourteenth submittal to the Board for approval of refund applications that the department received for amounts it verified were paid by the mining claim holders to the county recorders, forwarded by the county treasurers, and received by the State Controller's Office. SB 493, section 16.7, subsection 6 provides that all such claims presented by the department and approved by the Board "must be paid from the State General Fund."

SB 493, section 16.7, subsection 2 provides that the amount of fees paid by mining claim holders may be applied against the applicant's Modified Business Tax (MBT) liability with the excess amount carried forward until it is exhausted, unless the department determines it impractical to provide the full credit. Amounts that are not applied against an MBT liability will be refunded to the applicant. Due to lack of staff to track mining claim credits manually over an extended period, the department established a one-year timeframe in which it would be practicable to track and apply these amounts against MBT liabilities. Of the forty-five applications received and verified to date for this fourteenth submittal to the Board, the department did not identify any with MBT accounts that will have the requested refund amounts applied to their liabilities over the following year.

The department will continue to present refund applications to the Board for payment approval as it receives and verifies them. Pursuant to Section 16.7 of SB 493, applications for mining fee refunds will be accepted until June 30, 2013. To date, the department has forwarded 816 applications for refund, totaling \$17,182,943.50, for Board approval and identified 26 applicants that will have refund amounts, totaling \$675,490.00, applied to their MBT account liabilities.

Please contact Sumiko Maser at 684-2154 if you have questions or require additional information.

Attachments

Senate Bill No. 493–Committee on Revenue

CHAPTER.....

AN ACT relating to mining; creating the Mining Oversight and Accountability Commission and establishing its membership, powers and duties; revising provisions governing the calculation of net proceeds from certain mining operations conducted in this State; repealing a fee imposed on certain filings regarding mining claims; making an appropriation; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law does not provide for a single administrative body to oversee the activities of the various state agencies that have responsibility for the taxation, operation, safety and environmental regulation of mines and mining in this State. **Section 5** of this bill creates the Mining Oversight and Accountability Commission, consisting of seven members appointed by the Governor. Two of the members must be recommended by the Majority Leader of the Senate and two by the Speaker of the Assembly. In the first biennium, one member must be recommended by the Minority Leader of the Senate. In the next biennium, one member must be recommended by the Minority Leader of the Assembly. The authority of the Minority Leader of the Senate and the Minority Leader of the Assembly to make those recommendations alternates each biennium thereafter. **Section 7** of this bill requires the Commission to provide oversight of compliance with Nevada law relating to the activities of each state agency with respect to the taxation, operation, safety and environmental regulation of mines and mining in this State. **Section 7** also identifies particular state entities that are subject to the supervision of the Commission with respect to their activities related to mines and mining: (1) the Nevada Tax Commission and the Department of Taxation in the taxation of the net proceeds of minerals; (2) the Division of Industrial Relations of the Department of Business and Industry concerning the safe and healthful working conditions at mines; (3) the Commission on Mineral Resources and the Division of Minerals of the Commission; (4) the Bureau of Mines and Geology of the State of Nevada; and (5) the Division of Environmental Protection of the State Department of Conservation and Natural Resources in its activities concerning the reclamation of land used in mining. **Sections 8 and 13-16** of this bill establish certain reports and other information that those entities are required to provide to the Commission. **Section 11** of this bill authorizes the Commission to request the Legislative Commission to direct the Legislative Auditor to provide for a special audit or investigation of the activities of any state agency, board, bureau, commission or political subdivision in connection with the taxation, operation, safety and environmental regulation of mines and mining in this State. **Section 12** of this bill provides that certain regulations of the Nevada Tax Commission, Administrator of the Division of Industrial Relations, Commission on Mineral Resources and the State Environmental Commission concerning mines and mining are not effective unless they are reviewed by the Mining Oversight and Accountability Commission before being approved by the Legislative Commission. **Sections 12.5 and 12.7** of this bill revise provisions governing the calculation of net proceeds from certain mining operations conducted in this State.

During the 26th Special Session in 2010, the Legislature enacted a law imposing a fee on the filing of an affidavit of the work performed on or improvements made to a mining claim or an affidavit of the intent to hold a mining



and must be reverted to the State General Fund on or before September 21, 2012, and September 20, 2013, respectively.

Sec. 16.7. 1. Any person who paid any fee, interest or penalty imposed pursuant to NRS 517.187 may, on or before June 30, 2013, apply to the Department of Taxation pursuant to this section for a credit or refund of the total amount paid by the person pursuant to NRS 517.187.

2. Upon the receipt of an application pursuant to subsection 1 and proof to the satisfaction of the Department of Taxation of the total amount paid by the applicant pursuant to NRS 517.187, the Department shall:

(a) Except as otherwise provided in paragraph (b), allow the applicant a credit of the total amount paid by the person pursuant to NRS 517.187 against any liability of the person for the tax imposed pursuant to NRS 363B.110, and carry any unused portion of the credit forward until the credit is exhausted; or

(b) If the Department determines that it is impractical to provide a full credit to the applicant pursuant to paragraph (a), cause to be refunded to the applicant the total amount paid by the applicant pursuant to NRS 517.187.

3. A person who paid any fee, interest or penalty imposed pursuant to NRS 517.187 is not entitled to receive any penalty or interest on the amount paid.

4. The failure of any person to apply to the Department of Taxation pursuant to subsection 1 within the time prescribed constitutes a waiver of any demand against the State for any credit or refund of any fee, interest or penalty paid by or on behalf of the person pursuant to NRS 517.187.

5. Each county recorder shall, upon the request of the Department of Taxation, provide to the Department such documentation as the Department determines to be necessary to verify the total amount paid pursuant to NRS 517.187 by any person who applies to the Department pursuant to subsection 1.

6. All refunds made pursuant to this section must be paid from the State General Fund upon claims presented by the Department of Taxation, approved by the State Board of Examiners, and allowed and paid as other claims against the State are allowed and paid.

Sec. 17. The Department of Taxation shall submit to the Mining Oversight and Accountability Commission created by section 5 of this act at the first regular meeting of the Commission following the effective date of this section a comprehensive audit program that sets forth the Department's plan for completing an audit of every mining operator or other person who is required to



file a statement concerning the extraction of minerals in this State pursuant to NRS 362.100 to 362.240, inclusive.

Sec. 17.3. The amendatory provisions of section 12.5 of this act:

1. Do not apply to or affect any determination of gross yield or net proceeds required pursuant to NRS 362.100 to 362.240, inclusive, for the calendar year 2011.

2. Apply for the purposes of estimating and determining gross yield and net proceeds pursuant to NRS 362.100 to 362.240, inclusive, for the calendar year 2012 and each calendar year thereafter.

Sec. 17.5. The amendatory provisions of section 12.7 of this act:

1. Do not apply to or affect any determination of gross yield or net proceeds required pursuant to NRS 362.100 to 362.240, inclusive, for the calendar year 2013.

2. Apply for the purposes of estimating and determining gross yield and net proceeds pursuant to NRS 362.100 to 362.240, inclusive, for the calendar year 2014 and each calendar year thereafter.

Sec. 17.7. 1. The Nevada Tax Commission, on or before January 1, 2012, and subject to the requirements of section 12 of this act, shall adopt regulations to carry out the provisions of NRS 362.120, as amended by section 12.5 of this act.

2. In adopting regulations pursuant to subsection 1, the Nevada Tax Commission shall amend or repeal any of its existing regulations that conflict or are inconsistent with the provisions of NRS 362.120, as amended by section 12.5 of this act.

Sec. 18. Notwithstanding the provisions of section 5 of this act, as soon as practicable after the effective date of this section, the Governor shall appoint to the Mining Oversight and Accountability Commission created by section 5 of this act:

1. One member pursuant to paragraph (a), (b) and (c), respectively, of subsection 1 of that section whose term expires on June 30, 2012; and

2. One member pursuant to paragraph (a), (b), (c) and (d), respectively, of subsection 1 of that section whose term expires on June 30, 2013.

Sec. 19. 1. This section and sections 1 to 12, inclusive, and 13 to 18, inclusive, of this act become effective upon passage and approval.

2. Section 12.5 of this act becomes effective on January 1, 2012.



ATTACHMENT B

**Refund of Mining Fees Paid Pursuant to NRS 517.187
As of July 3, 2013**

<u>#</u>	<u>Name</u>	<u>Make Check Payable To</u>	<u>County Where Fees Paid</u>	<u>Date Received Claim</u>	<u>Amount Paid</u>
1	CANTEX GOLD CORP	CANTEX MINE DEVELOPMENT CORP	ESMERALDA	6/4/2013	\$ 2,635.00
2	CANTEX GOLD CORP	CANTEX MINE DEVELOPMENT CORP	LANDER	6/4/2013	\$ 5,270.00
3	CANTEX GOLD CORP	CANTEX MINE DEVELOPMENT CORP	HUMBOLDT	6/4/2013	\$ 11,305.00
4	CANTEX GOLD CORP	CANTEX MINE DEVELOPMENT CORP	NYE	6/4/2013	\$ 3,485.00
	GREFCO MINERALS INC.	GREFCO MINERALS INC.	ESMERALDA	6/5/2013	\$ 1,540.00
	GREFCO MINERALS INC.	GREFCO MINERALS INC.	MINERAL	6/5/2013	\$ 1,190.00
	LAURION MINERAL EXPLORATION, INC.	LAURION MINERAL EXPLORATION, INC.	CHURCHILL	6/13/2013	\$ 8,330.00
	PROXIMATE HOLDINGS INC.	PROXIMATE HOLDINGS INC.	CLARK	6/12/2013	\$ 2,940.00
	IMDEX, INC.	IMDEX, INC.	CLARK	6/12/2013	\$ 9,030.00
	ROBINSON NEVADA MINING COMPANY	ROBINSON NEVADA MINING COMPANY	WHITE PINE	6/7/2013	\$ 74,885.00
	CHEMETALL FOOTE CORP.	ROCKWOOD LITHIUM INC.			
	JERRY TAYLOR	FORMERLY CHEMETALL FOOTE CORP.	ESMERALDA	6/10/2013	\$ 5,390.00
	CANASIA INDUSTRIES NEVADA COPR.	JERRY TAYLOR	LINCOLN	6/13/2013	\$ 1,190.00
	WAYNE AIKEN	CANASIA INDUSTRIES NEVADA COPR.	ELKO	6/14/2013	\$ 1,120.00
	STERLING GOLD MINING COPORATION	WAYNE AIKEN	LINCOLN	6/17/2013	\$ 980.00
	LAURION MINERAL EXPLORATION, INC.	STERLING GOLD MINING COPORATION	NYE	6/18/2013	\$ 58,055.00
	CALAIS RESOURCES INC.	LAURION MINERAL EXPLORATION, INC.	CHURCHILL	6/20/2013	\$ 8,330.00
	CALAIS RESOURCES INC.	CALAIS RESOURCES INC.	NYE	6/24/2013	\$ 3,920.00
	OXIDOR CORPORATION	CALAIS RESOURCES INC.	NYE	6/24/2013	\$ 8,890.00
	MINEX RESOURCES INC.	OXIDOR CORPORATION	LINCOLN	6/24/2013	\$ 7,420.00
	MINEX RESOURCES INC.	MINEX RESOURCES INC.	ELKO	6/25/2013	\$ 700.00
	EXCALIBAR MINERALS LLC	MINEX RESOURCES INC.	LINCOLN	6/25/2013	\$ 140.00
	FIRST GOLD CORP	BRUCE V. TEMPLETON	ELKO	6/26/2013	\$ 3,570.00
	IRENE HARPER / MICHAEL	GOLD ACQUISITION CORP.	PERSHING	6/26/2013	\$ 11,970.00
	JUMBO NEVADA INC.	IRENE HARPER	LANDER	6/28/2013	\$ 2,450.00
	SAN ANTONIOS RESOURCES (USA) INC.	JUMBO NEVADA INC.	HUMBOLDT	6/27/2013	\$ 1,260.00
	BRUCE W. MILLER	SAN ANTONIOS RESOURCES (USA) INC.	ELKO	6/27/2013	\$ 1,260.00
	WILLIAM A BERG	BRUCE W. MILLER	LANDER	6/27/2013	\$ 700.00
	KENNETH BERG	WILLIAM A BERG	NYE	6/27/2013	\$ 140.00
	INCA GOLD	KENNETH BERG	NYE	6/27/2013	\$ 70.00
	INCA GOLD	INCA GOLD	NYE	6/28/2013	\$ 350.00
	BRIDGEPORT GOLD INC.	INCA GOLD	ESMERALDA	6/28/2013	\$ 420.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	ESMERALDA	6/27/2013	\$ 680.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	MINERAL	6/27/2013	\$ 255.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	LYON	6/27/2013	\$ 1,020.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	LYON	6/27/2013	\$ 340.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	HUMBOLDT	6/27/2013	\$ 680.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	HUMBOLDT	6/27/2013	\$ 3,060.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	WHITE PINE	6/27/2013	\$ 700.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	WHITE PINE	6/27/2013	\$ 8,365.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	NYE	6/27/2013	\$ 2,380.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	LINCOLN	6/27/2013	\$ 1,530.00
	BRIDGEPORT GOLD INC.	BRIDGEPORT GOLD INC.	EUREKA	6/27/2013	\$ 3,145.00
	CAMRON STITZEL	CAMRON STITZEL	EUREKA	6/28/2013	\$ 1,400.00
	CAMRON STITZEL	CAMRON STITZEL	ELKO	6/28/2013	\$ 70.00
	SCOTT LEWIS	SONORA REDMAC LTD/SCOTT LEWIS	WASHOE	6/24/2013	\$ 5,320.00
Total					\$ 267,880.00

CHAPTER 517 - MINING CLAIMS, MILL SITES AND TUNNEL RIGHTS

GENERAL PROVISIONS

NRS 517.003 "Division" defined.

LOCATION OF MINING CLAIMS, MILL SITES AND TUNNEL RIGHTS

LODE CLAIMS

NRS 517.010 Person entitled to locate; requirements for location.
NRS 517.030 Monumenting of claim; required removal of plastic monuments.
NRS 517.040 Map: Specifications; filing; distribution; use of filing fee.
NRS 517.050 Certificate of location: Recording; contents; effect of insufficiency.
NRS 517.080 Relocation of abandoned lode claim.

PLACER CLAIMS

NRS 517.090 Requirements for location.
NRS 517.100 Map: Specifications; filing; use of filing fee.
NRS 517.110 Certificate of location: Recording; contents; effect of insufficiency.

TAILINGS AND WASTE

NRS 517.115 Evidence of abandonment; acquisition after abandonment.

MILL SITES

NRS 517.120 Location of nonmineral land as mill site.
NRS 517.130 Requirements for location.
NRS 517.140 Certificate of location: Recording; contents; effect of insufficiency.

TUNNEL RIGHTS

NRS 517.150 Requirements for location.
NRS 517.160 Definition of boundaries; erection of monuments.
NRS 517.170 Recording of certificate of location; filing of map; effect of insufficiency.
NRS 517.180 Location of blind or unknown lode or vein in tunnel.

GENERAL PROVISIONS

NRS 517.185 Fee for each document filed; disposition.
NRS 517.187 Additional fee for filing made pursuant to NRS 517.230. [Effective through June 30, 2011.]
NRS 517.190 Notice of location: Filing; evidentiary effect.
NRS 517.195 Separate notices and certificates of location; effect of combining locations in notice or certificate.
NRS 517.200 Validation of defective certificate of location or change of boundaries: Filing of amended certificate of location; effect of amendment; correction of common error.
NRS 517.210 Survey of location: Evidentiary effect of field notes and surveyor's certificate.
NRS 517.213 Inclusion of patented mines and mining claims on county map; conformity of discrepancy between county map and record of survey showing location of mine or claim; duty of county recorder to provide map to county assessor.
NRS 517.215 Comparison of record of survey to county map of other claims; proposal to change map; notice; hearing.
NRS 517.230 Affidavit of work performed or improvements made; affidavit of owner or claimant; evidentiary effect of affidavits.
NRS 517.280 Certificates of location need not be sworn to; no required form.
NRS 517.290 Applicability of NRS 517.010 to 517.280, inclusive.
NRS 517.300 Unlawful acts; penalties.

EFFECT OF PREVIOUSLY RECORDED DOCUMENTS; CONVEYANCES

NRS 517.350 Written instruments recorded in office of county recorder before February 20, 1873, deemed to impart notice to subsequent purchasers and encumbrancers.

NRS 517.180 Location of blind or unknown lode or vein in tunnel. All blind lodes, or veins or lodes not previously known to exist, discovered in a tunnel run for the development of a vein or lode, or for the discovery of mines, and within 3,000 feet from the face of such tunnel, shall be located upon the surface and held in like manner to other lode claims under the provisions of this chapter.

[22:89:1897; C § 229; RL § 2443; NCL § 4141]

General Provisions

NRS 517.185 Fee for each document filed; disposition.

1. In addition to any recording fee, each filing pursuant to NRS 517.050, 517.080, 517.110, 517.140, 517.170, 517.200 and 517.230 must be submitted with a filing fee in an amount established pursuant to subsection 2. The county recorder shall collect the filing fee and, on or before the fifth working day of each month, deposit with the county treasurer all such fees collected during the preceding month. The county treasurer shall quarterly pay the money collected to the Division. The Division shall deposit with the State Treasurer, for credit to the Account for the Division of Minerals created pursuant to NRS 513.103, all money received pursuant to this section.

2. The Commission on Mineral Resources shall, by regulation, establish the filing fee required pursuant to subsection 1 in an amount not to exceed \$6 per claim.

(Added to NRS by 1985, 1494; A 1989, 1595; 1991, 1780; 1993, 298, 1686; 1995, 579; 1999, 891, 3629; 2001, 66)

NRS 517.187 Additional fee for filing made pursuant to NRS 517.230. [Effective through June 30, 2011.]

1. An additional fee is hereby imposed upon each filing made pursuant to NRS 517.230 regarding a mining claim held by a person who holds 11 or more mining claims in this State on the date of that filing, in the amount determined in accordance with subsection 2. The person making that filing shall remit the fee to the county recorder in such a manner that, at the option of that person:

(a) The fee is paid in full at the time of the filing;

(b) One-half of the fee is paid at the time of the filing and the remainder of the fee is paid not later than June 1 of the calendar year immediately following the filing date; or

(c) The fee is paid in full not later than June 1 of the calendar year immediately following the filing date.

2. If the greatest number of mining claims held in this State by any of the persons who hold any of the mining claims to which a filing made pursuant to NRS 517.230 pertains is:

(a) Not less than 11 and not more than 199 on the date of that filing, the fee imposed by this section is \$70 for each mining claim to which the filing pertains.

(b) Not less than 200 and not more than 1,299 on the date of that filing, the fee imposed by this section is \$85 for each mining claim to which the filing pertains.

(c) Not less than 1,300 on the date of that filing, the fee imposed by this section is \$195 for each mining claim to which the filing pertains.

3. The county recorder shall:

(a) Obtain from each person who makes a filing pursuant to NRS 517.230 an affidavit declaring that the greatest number of mining claims held in this State on the date of that filing by any of the persons who hold any of the mining claims to which the filing pertains is:

(1) Less than 11;

(2) Not less than 11 and not more than 199;

(3) Not less than 200 and not more than 1,299; or

(4) Not less than 1,300; and

(b) Based upon the information set forth in that affidavit, collect any fee imposed on that filing pursuant to this section.

4. Any person who:

(a) Fails to pay the fee imposed pursuant to this section within the time required shall pay a penalty in the amount of 10 percent of the amount of the fee that is owed, in addition to the fee, plus interest at the rate of 1 percent per month, or fraction of a month, from the date on which the fee is due until the date of payment.

(b) Knowingly makes a false declaration in an affidavit provided to a county recorder pursuant to subsection 3 is guilty of a misdemeanor and shall pay the amount of any additional fee, penalty and interest required pursuant to this section on account of the falsification.

5. The county recorder shall, on or before the fifth working day of each month, deposit with the county treasurer all the fees, penalties and interest imposed pursuant to this section which are collected during the preceding month. The county treasurer shall quarterly remit all money so collected to the State Controller, who shall place the money in the State General Fund.

6. The State Controller shall take such action as may be necessary to ensure that the fees, penalties and interest imposed pursuant to this section are paid in full.

(Added to NRS by 2010, 26th Special Session, 91)

NRS 517.190 Notice of location: Filing; evidentiary effect. A locator of a mining claim or a claim for a mill site or tunnel right may file with the county recorder a notice of location which is prima facie evidence in all courts of justice of the first location of that claim.

[Part 3:89:1897; A 1907, 418; 1941, 92; 1931 NCL § 4122]—(NRS A 1985, 1501)

NRS 517.195 Separate notices and certificates of location; effect of combining locations in notice or certificate.

1. A locator shall:

(a) Post a separate notice of location; and

(b) Record a separate certificate of location,

NRS 517.230 Affidavit of work performed or improvements made; affidavit of owner or claimant; evidentiary effect of affidavits.

1. On or before November 1 of the year for which labor is performed or improvements are made as required by law for a mining claim annually, the person in whose behalf the labor was performed or improvements made, or someone in the person's behalf, shall make and have recorded by the county recorder, in books kept for that purpose in the county in which the mining claim is situated, an affidavit setting forth:

- (a) The amount of money expended, or value of labor or improvements made, or both.
- (b) The character of expenditures or labor or improvements.
- (c) A description of the claim or part of the claim affected by the expenditures or labor or improvements.
- (d) The year for which the expenditures or labor or improvements were made and the dates on which they were made.
- (e) The name of the owner or claimant of the claim at whose expense the improvements or labor was made or performed.
- (f) The names of the persons, corporations, contractors or subcontractors who performed the work or made the improvements.

2. An affidavit made and recorded pursuant to subsection 1 or a copy thereof, certified by the county recorder, is prima facie evidence of the performance of the labor or the making of the improvements, or both.

3. On or before November 1 of each year that the performance of labor or the making of improvements is not required by law for a mining claim, the owner or claimant of the mining claim who intends to hold the claim, or someone in the owner or claimant's behalf, shall make and have recorded by the county recorder, in books kept for that purpose in the county in which the mining claim is situated, an affidavit setting forth:

- (a) The name and address of the owner or claimant of the mining claim.
- (b) The name of the mining claim, and the serial number, if any, assigned to the claim by the United States Bureau of Land Management.
- (c) The date that the affidavit was made.
- (d) A statement that the owner or claimant of the mining claim intends to hold the claim.

4. An affidavit made and recorded pursuant to subsection 3 or a copy thereof, certified by the county recorder, is prima facie evidence that the owner or claimant of the mining claim intended to hold the claim from 12 p.m. on September 1 of the year before the affidavit was made and recorded, until 11:59 a.m. on September 1 of the year that the affidavit was made and recorded.

[10:89:1897; C § 217; RL § 2431; NCL § 4129]—(NRS A 1960, 319; 1961, 422; 1969, 1003; 1971, 2202; 1985, 1502; 1993, 299)

NRS 517.280 Certificates of location need not be sworn to; no required form. Certificates of location need not be sworn to, and are not required to be in any specified form nor to state facts in any specific order, but must truly state the required facts.

[24:89:1897; added 1899, 93; C § 231; RL § 2445; NCL § 4143]—(NRS A 1961, 422)

NRS 517.290 Applicability of NRS 517.010 to 517.280, inclusive. The provisions of NRS 517.010 to 517.280, inclusive, shall be construed as equally applicable to all classes of locations, except where the requirement as to any one class is manifestly inapplicable to any other class or classes.

[23:89:1897; C § 230; RL § 2444; NCL § 4142]

NRS 517.300 Unlawful acts; penalties.

1. A person who willfully antedates or puts any false date or date other than the one on which the location is made upon any notice of location of any mining claim in this state is guilty of a category D felony and shall be punished as provided in NRS 193.130.

2. A person who willfully and knowingly makes a false material statement on the certificate of location or on any map required by this chapter is guilty of a category D felony and shall be punished as provided in NRS 193.130.

[1911 C&P § 410; RL § 6675; NCL § 10362]—(NRS A 1971, 2203; 1979, 1484; 1985, 1502; 1995, 1303)

EFFECT OF PREVIOUSLY RECORDED DOCUMENTS; CONVEYANCES

NRS 517.350 Written instruments recorded in office of county recorder before February 20, 1873, deemed to impart notice to subsequent purchasers and encumbrancers. All instruments of writing relating to mining claims copied into books of mining records or other records in the office of the county recorders of the several counties prior to February 20, 1873, shall, after February 20, 1873, be deemed to impart to subsequent purchasers and encumbrancers and all other persons whomsoever notice of the contents thereof. Nothing contained in this subsection shall be construed to affect any rights acquired or vested prior to February 20, 1873.

[1:20:1873; B § 320; BH § 2664; C § 2736; RL § 1635; NCL § 2136] + [2:20:1873; B § 321; BH § 2665; C § 2737; RL § 1636; NCL § 2137]—(NRS A 1971, 810)

NRS 517.360 Records of mining claims, mill sites or tunnel rights made by mining district recorder or county recorder before March 16, 1897, declared valid; evidentiary effect of record.

1. All records of lode or placer mining claims, mill sites or tunnel rights made by any mining district recorder or any county recorder prior to March 16, 1897, are hereby declared to be valid and to have the same force and effect as records made in pursuance of the provisions of NRS 517.010 to 517.280, inclusive.

2. Any such record, or a copy thereof duly verified by a mining district recorder or duly certified by a county recorder, shall be prima facie evidence of the facts therein stated.

[Part 3:89:1897; A 1907, 418; 1941, 92; 1931 NCL § 4122]

NRS 517.370 Conveyances of mining claims: Formalities; construction and proof of conveyances before December 12, 1862.

Assembly Bill No. 6—Committee of the Whole

CHAPTER.....

AN ACT relating to governmental financial administration; revising certain appropriations from the State General Fund for the support of the civil government of the State of Nevada; authorizing expenditures by certain agencies and entities of the State Government; providing for the transfer of certain appropriated money to the next fiscal year; requiring the Clean Water Coalition to transfer certain money to the State Controller for deposit in the State General Fund; increasing fees imposed for certain filings or registrations made with the Office of the Secretary of State; revising provisions relating to foreclosure of real property; revising provisions relating to the use of money in the Account for Common-Interest Communities and Condominium Hotels; increasing certain administrative assessments imposed against persons who commit certain crimes; authorizing the Department of Corrections to adopt regulations to allow the Department to deduct money credited to the Offenders' Store Fund for certain purposes and to impose a charge on purchases of electronic devices; providing for the temporary transfer of certain lobbyist registration fees; increasing certain fees charged by the State Registrar; authorizing the Department of Wildlife to use fees collected for processing applications for tags for certain additional purposes; imposing an additional fee for filing certain affidavits relating to mining claims; reducing the basic support guarantees of school districts for purposes of apportionments from the State Distributive School Account; requiring the Department of Taxation to allow for the payment of delinquent taxes, fees or assessments without a penalty for a limited period in certain circumstances; requiring the Division of Insurance of the Department of Business and Industry to carry out a desk audit program to audit insurance premium tax returns; providing for the use of money from an award from the Temporary Assistance for Needy Families Emergency Contingency funds; making appropriations; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

The Legislature appropriated various sums of money for the support of the government of the State of Nevada during the 2009 Legislative Session. Sections 1-7 of this bill reduce certain appropriations for Fiscal Years 2009-2010 and 2010-2011. Sections 8 and 9 of this bill authorize expenditures of money by certain



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3. *The issuance of ~~the~~ licenses, permits and tags.*

Sec. 47. Chapter 517 of NRS is hereby amended by adding thereto a new section to read as follows:

1. *An additional fee is hereby imposed upon each filing made pursuant to NRS 517.230 regarding a mining claim held by a person who holds 11 or more mining claims in this State on the date of that filing, in the amount determined in accordance with subsection 2. The person making that filing shall remit the fee to the county recorder in such a manner that, at the option of that person:*

(a) *The fee is paid in full at the time of the filing;*

(b) *One-half of the fee is paid at the time of the filing and the remainder of the fee is paid not later than June 1 of the calendar year immediately following the filing date; or*

(c) *The fee is paid in full not later than June 1 of the calendar year immediately following the filing date.*

2. *If the greatest number of mining claims held in this State by any of the persons who hold any of the mining claims to which a filing made pursuant to NRS 517.230 pertains is:*

(a) *Not less than 11 and not more than 199 on the date of that filing, the fee imposed by this section is \$70 for each mining claim to which the filing pertains.*

(b) *Not less than 200 and not more than 1,299 on the date of that filing, the fee imposed by this section is \$85 for each mining claim to which the filing pertains.*

(c) *Not less than 1,300 on the date of that filing, the fee imposed by this section is \$195 for each mining claim to which the filing pertains.*

3. *The county recorder shall:*

(a) *Obtain from each person who makes a filing pursuant to NRS 517.230 an affidavit declaring that the greatest number of mining claims held in this State on the date of that filing by any of the persons who hold any of the mining claims to which the filing pertains is:*

(1) *Less than 11;*

(2) *Not less than 11 and not more than 199;*

(3) *Not less than 200 and not more than 1,299; or*

(4) *Not less than 1,300; and*

(b) *Based upon the information set forth in that affidavit, collect any fee imposed on that filing pursuant to this section.*

4. *Any person who:*

(a) *Fails to pay the fee imposed pursuant to this section within the time required shall pay a penalty in the amount of 10 percent*



of the amount of the fee that is owed, in addition to the fee, plus interest at the rate of 1 percent per month, or fraction of a month, from the date on which the fee is due until the date of payment.

(b) Knowingly makes a false declaration in an affidavit provided to a county recorder pursuant to subsection 3 is guilty of a misdemeanor and shall pay the amount of any additional fee, penalty and interest required pursuant to this section on account of the falsification.

5. The county recorder shall, on or before the fifth working day of each month, deposit with the county treasurer all the fees, penalties and interest imposed pursuant to this section which are collected during the preceding month. The county treasurer shall quarterly remit all money so collected to the State Controller, who shall place the money in the State General Fund.

6. The State Controller shall take such action as may be necessary to ensure that the fees, penalties and interest imposed pursuant to this section are paid in full.

Secs. 48-52. [These sections were deleted.]

Sec. 53. Section 1 of chapter 389, Statutes of Nevada 2009, at page 2126, is hereby amended to read as follows:

Section 1. The basic support guarantee for school districts for operating purposes for the 2009-2010 Fiscal Year is an estimated weighted average of ~~[\$5,251]~~ **\$5,186** per pupil. For each respective school district, the basic support guarantee per pupil for the 2009-2010 Fiscal Year is:

Carson City	[\$6,228]	\$6,155
Churchill	[\$6,201]	\$6,122
Clark	[\$5,025]	\$4,962
Douglas	[\$5,333]	\$5,268
Elko	[\$6,815]	\$6,730
Esmeralda	[\$17,039]	\$16,835
Eureka		\$100
Humboldt	[\$6,402]	\$6,322
Lander	[\$6,261]	\$6,184
Lincoln	[\$9,866]	\$9,743
Lyon	[\$6,673]	\$6,594
Mineral	[\$8,656]	\$8,541
Nye	[\$6,582]	\$6,504
Pershing	[\$8,368]	\$8,263
Storey	[\$6,567]	\$6,486
Washoe	[\$5,350]	\$5,284
White Pine	[\$7,111]	\$7,025



Sec. 68. If any provision of this act, or the application thereof to any person, thing or circumstance, is held invalid, such invalidity shall not affect any provision or application of this act which can be given effect without the invalid provision or application, and to this end the Legislature declares that:

1. Each provision of this act is severable and independent;
2. The Legislature would have passed this act and each valid provision thereof, irrespective of the invalid provision or application; and
3. Each valid provision or application must be given effect to the fullest extent possible, irrespective of the invalid provision or application.

Sec. 69. 1. This section and sections 1 to 18, inclusive, 20 to 30, inclusive, 32, 34 to 37, inclusive, 39, 43, 44, 46 to 63, inclusive, and 65 to 68, inclusive, of this act become effective upon passage and approval.

2. Sections 19 and 31 of this act become effective on April 1, 2010.

3. Section 64 of this act becomes effective on May 1, 2010.

4. Sections 33, 38, 40, 41, 42 and 45 of this act become effective on July 1, 2010.

5. Sections 36 and 47 of this act expire by limitation on June 30, 2011.



**Refund of Mining Fees Paid Pursuant to NRS 517.187
As of July 3, 2013**

	<u>Fees Collected/ Refunds</u>	<u>Refund Adjustment</u>	<u>Applied to MBT Liability</u>	<u>Total Application Amount</u>	<u># of Refunds</u>	<u>Refund Adjustment</u>	<u># Applied to MBT Applications</u>	<u>Total Applications</u>
Mining Fees Collected FY 2010	\$17,150.00			\$17,150.00				
Mining Fees Collected FY 2011	\$18,135,081.50			\$18,135,081.50				
Mining Fees Collected FY 2012 (adjustment)	\$6,300.00			\$6,300.00				
Mining Fees Collected FY 2013	\$0.00			\$0.00				
Total Mining Fees Collected in BA 9999	\$18,158,531.50	\$0.00	\$0.00	\$18,158,531.50				
November 8, 2011 BOE - Request #1	\$8,184,269.50	(\$4,340.00)	\$538,050.00	\$8,717,979.50	335	(1)	14	348
December 13, 2011 BOE - Request #2	\$522,960.00		\$7,140.00	\$530,100.00	61		3	64
CR 060 00001003346 refund from Freeport- McMoran for overpayment of mining fee refund.	(\$700.00)			(\$700.00)				0
January 10, 2012 BOE - Request #3	\$5,767,114.00	(\$77,805.00)		\$5,689,309.00	175	(3)	0	172
February 14, 2012 BOE - Request #4	\$588,830.00		\$74,200.00	\$663,030.00	50		4	54
March 13, 2012 BOE - Request #5	\$1,210,220.00			\$1,210,220.00	48			48
April 3, 2012 BOE - Request #6	\$117,150.00			\$117,150.00	4			4
June 12, 2012 BOE - Request #7	\$19,210.00			\$19,210.00	6			6
August 14, 2012 BOE - Request #8	\$143,955.00			\$143,955.00	41			41
November 13, 2012 BOE - Request #9	\$193,135.00		\$56,100.00	\$249,235.00	16		5	21
December 3, 2012 BOE - Request #10	\$109,200.00			\$109,200.00	18			18
May 14, 2013 BOE - Request #11	\$173,195.00	(\$153,595.00)		\$19,600.00	10	(6)		4
June 11, 2013 BOE - Request #12	\$43,875.00			\$43,875.00	3			3
July 9, 2013 BOE - Request #13	\$78,390.00			\$78,390.00	4			4
August 13, 2013 BOE - Request #14	\$267,880.00			\$267,880.00	45	0	0	45
Total Refunds	\$17,418,683.50	(\$235,740.00)	\$675,490.00	\$17,858,433.50	816	(10)	26	832
Total Remaining	\$739,848.00	\$235,740.00	(\$675,490.00)	\$300,098.00				

***. SALARY ADJUSTMENTS**

A. Distribution of Salary Adjustments to Departments, Commissions and Agencies, pursuant to Senate Bill 505, Sections 7, and 8, of the 2011 Legislative Session.

The 2011 Legislative Session made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet certain salary deficiencies for fiscal year 2013 that might be created between the appropriated money of the respective departments, commissions, and agencies and the actual cost of the personnel of those departments, commissions, and agencies that are necessary to pay for salaries. Under this legislation, the following amounts from the General Fund and/or Highway Fund are recommended:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
3823	B&I – Real Estate Administration	\$3,249	
	Total	\$3,249	

STATE OF NEVADA

BRIAN SANDOVAL
Governor

BRUCE BRESLOW
Director



DEPARTMENT OF BUSINESS AND INDUSTRY
OFFICE OF THE DIRECTOR

MEMORANDUM

Date: July 10, 2013

To: Stacey Johnson, Budget Analyst IV
Department of Administration, Budget & Planning Division

From: Vicki Leigh, Administrative Services Officer I
Department of Business & Industry

Re: Request for FY13 General Fund Salary Adjustment
Real Estate Division Administration Budget Account 3823

The Real Estate Division Administration (RED), budget account 3823 has a projected shortfall in Category 01 Personnel Services in the amount of \$40,159. To offset the remaining shortfall, RED requests approval to obtain the Real Estate Administration's share of the available General Fund salary adjustment in the amount of \$3,249 for FY2013.

A work program transferring authority from other expenditure categories has been submitted to the Executive Budget Office in the amount of \$36,910 to offset the remaining shortfall.

Please contact me at 775-684-7037 if you need further information. Thank you for your consideration of this request.



DEPARTMENT OF ADMINISTRATION

209 E. Musser Street, Room 200
Carson City, Nevada 89701-4298
(775) 684-0222
Fax (775) 684-0260
<http://www.budget.state.nv.us/>

Date: July 17, 2013

To: Jeff Mohlenkamp, Director
Department of Administration

From: Mike Torvinen, Deputy Director
Department of Administration

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.

**DEPARTMENT OF ADMINISTRATION – DELEGATION OF CONTRACT APPROVAL
AUTHORITY TO THE CLERK OF THE BOARD OF EXAMINIERS**

Agenda Item Write-up:

Pursuant to the Governor's approval of AB 41 of the 2013 legislative session, the Clerk of the Board is requesting delegated authority to approve all contracts for amounts less than \$50,000.

Additional Information:

AB 41 increased the level of contracts the Board of Examiners could delegate approval authority to the Clerk from contracts for amounts less than \$10,000 to contracts for amounts less than \$50,000. The language of the bill is permissive and therefore the Board must take specific action to increase the delegated authority from the current amount of less than \$10,000 to contracts for amounts less than \$50,000.

Statutory Authority:

NRS 333.700 (2013 Session AB 41)

REVIEWED: _____

ACTION ITEM: _____

AB 41 – Summary of request and final legislative action which requires Board of Examiners action to increase the Clerk’s authority to approve contracts for less than \$50,000.

The Bill Draft Request that resulted in the passage of AB 41 targeted 5 issues related to contracts and purchasing. A sixth issue, item 1 below, was added during bill drafting. Those issues are:

- 1) Repeal NRS 284.1729 dealing with contracting with former state employees but replace it with a new language and move it to NRS Chapter 333, the State Purchasing chapter of NRS. The purpose was to clarify and simplify the approval process when Board of Examiners (BOE) approval is required. **(Sections 1 and 5 of the original draft of bill)**
- 2) Proposed change to NRS 333.165 to raise the limit that requires Request for Proposals (RFP) to be solicited by the Purchasing Division on behalf of using agencies from \$100,000 to \$250,000. That would have meant agencies would have administered their own RFPs up to \$250,000 in value. **(Section 2 of the original draft of the bill – Failed, deleted by amendment)**
- 3) Proposed change to NRS 333.300 to raise the threshold where a formal bid is required from \$25,000 to \$50,000. **(Section 3 of the original draft of the bill)**
- 4) Proposed change to NRS 333.390 to raise the direct purchase authorization for using agencies from \$5,000 to \$10,000. **(Section 4 of the original draft of the bill – Failed, deleted by amendment)**
- 5) Proposed change to NRS 333.700 to remove the minimum amount of a contract that requires submission to the BOE for approval being prescribed by statute and allow the BOE to establish the threshold. NRS 333.700 allowed all contracts less than \$10,000 to be approved by the Clerk. **(Section 5 of the original draft of the bill – section amended and threshold increased)**
- 6) Proposed change to NRS 333.810 to clarify that a purchase for services entered into contrary to the provisions of chapter 333 shall be void and the agency head and employee responsible for the violation of the statute shall be personally liable for the costs. Previously, this section did not enforce penalties on those improperly entering into contracts for services. **(Section 6 of the original draft of the bill)**

The intent of AB 41 was to allow for a more timely delivery of services to agencies and clients, without losing the oversight and transparency necessary to protect the public trust. The contracting process, where Board of Examiners approval is required, can be very time consuming and difficult when there are deadlines and significant lead times to get a contract listed on a BOE agenda. That process does not result in much added value when the amount of the contract is fairly small.

This was the third legislative session that the Department of Administration requested consideration of increasing the Board of Examiners’ authority to set policy delegating contract approval thresholds to the

Clerk rather than having those thresholds defined in statute. The 2013 Legislature understood and supported the goal to improve efficiency in government contracting, recognizing that in doing so procedural controls would be adopted ensuring accountability and responsibility in contracting.

The end result is:

- 1) Our request to increase Agencies' authority to conduct their own RFPs and direct purchases were denied, Sections 2 and 4 were deleted by amendment.
- 2) The provisions regarding contracting with former state employees were clarified and moved to the State Purchasing chapter of NRS, Sections 1 and 5 of the final bill.
- 3) The threshold where a formal bid is required was increased to \$50,000, Section 3 of the bill.
- 4) The request to remove contract approval thresholds from statute and allow the BOE to set the amount by policy failed but the amount was increased from \$10,000 to \$50,000, Section 5 of the bill. By amendment, Section 5 also includes a provision prohibiting the splitting of contracts to avoid competitive bidding requirements. Also, Section 5 eliminated the separate provision allowing the Clerk to approve contracts necessary to preserve life and property, for amounts less than \$25,000. Since overall authority was increased to "less than \$50,000," this provision was no longer necessary.
- 5) Penalties for improperly entering into contracts were extended to service contracts, Section 6 of the bill.

Required BOE Action

Section 5 of AB 41 amends subsection 7 of NRS 333.700 which now states: "...the Board of Examiners may authorize its Clerk or a designee to approve contracts which are: (a) for amounts less than \$50,000." Previous BOE action authorized the Clerk to approve contracts for amounts less than \$10,000.

Board action is required to increase the Clerk's authority to approve contracts which are less than \$50,000. The Board also has the option to increase the threshold to any amount less than \$50,000. It should be noted the bill deleted the Clerk's authority to approve contracts necessary to preserve life and property for amounts less than \$25,000. Until the Board takes further action the Clerk's authority, under all circumstances is limited to contracts for amounts less than \$10,000.

At the June 11, 2013 Board of Examiners meeting board members asked if there is an appeal process should the Clerk deny the approval of a contract. Provisions to appeal the decision of the Clerk are included in the proposed revisions to the State Administrative Manual should the Board increase the Clerk's authority.

An analysis of the number of contracts that have been included on the BOE agenda for the last 3 fiscal years shows there were 558 contracts for amounts greater than \$10,000 and less than \$50,000 during fiscal years 2011, 2012, and 2013.



DEPARTMENT OF ADMINISTRATION

209 E. Musser Street, Room 200
Carson City, Nevada 89701-4298
(775) 684-0222
Fax (775) 684-0260
<http://www.budget.state.nv.us/>

Date: July 17, 2013

To: Jeff Mohlenkamp, Director
Department of Administration

From: Mike Torvinen, Deputy Director
Department of Administration

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.

**DEPARTMENT OF ADMINISTRATION – CLERK OF THE BOARD OF EXAMINERS,
REQUESTED CHANGES TO THE STATE ADMINISTRATIVE MANUAL**

Agenda Item Write-up:

The Department of Administration requests modifications to the following sections of the State Administrative Manual (SAM) to increase the Clerks authority to approve contracts and agreements for less than \$50,000:

1. SAM Section 0310 Approval of Cooperative Agreements
2. SAM Section 0316 Approval of Interlocal Contracts
3. SAM Section 0322 Independent Contract Review

Additional Information:

This request is contingent upon the Board's delegation of authority for the Clerk to approve contracts less than \$50,000 pursuant to AB 41 passed during the 2013 Legislative Session.

Statutory Authority:

NRS 333.700 (2013 Session AB 41)

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

0310 Approval of Cooperative Agreements

1. Cooperative agreements become effective only upon:
 - a. Ratification by appropriate official action of the governing body of each party to the contract as a condition precedent to its entry into force. Cooperative agreements ranging in cost from zero to \$1,999 require approval of the agency head; cooperative agreements ranging in cost from \$2,000 to ~~\$9,999~~ **\$49,999** require the approval of the Clerk of the Board of Examiners, or designee, on behalf of the Board of Examiners; and cooperative agreements totaling ~~\$10,000~~ **\$50,000** or more require the approval of the Board of Examiners; and
 - b. Ratification by appropriate ordinance, resolution or otherwise by law on the part of the governing bodies of the participating public agencies.
2. Cooperative agreements shall be submitted to the Attorney General before becoming effective for determination of proper form and compatibility with the laws of this State. If the Attorney General does not disapprove an agreement within 30 days after its submission, the failure to disapprove constitutes approval.
3. Cooperative agreements must be recorded with the county recorder of each county in which a participating political subdivision of this State is located, and filed with the Secretary of State.
4. Cooperative agreements dealing in whole or in part with services or facilities over which an officer or agency of this State has control must be submitted to that State officer or agency for approval or disapproval as to all matters within his/her or its jurisdiction before the agreement's entry into force. This requirement is in addition to the requirement of submission and approval by the Attorney General.

A Contract Summary Form must accompany all cooperative agreements submitted for review and approval.

0316 Approval of Interlocal Contracts

If an agency of this State is a party to the interlocal contract, the interlocal contract must be approved by the Attorney General as to form and compliance with law.

Interlocal contracts must be ratified by appropriate official action of the governing body of each party to the contract as a condition precedent to its entry into force. Interlocal contracts ranging in cost from zero to \$1,999 require approval of the agency head; interlocal contracts ranging in cost from \$2,000 to ~~\$9,999~~ **\$49,999** require the approval of the Clerk of the Board of Examiners, or designee, on behalf of the Board of Examiners; interlocal contracts totaling ~~\$10,000~~ **\$50,000** or more require the approval of the Board of Examiners.

A Contract Summary Form must accompany all interlocal contracts submitted for review and approval.

0322 Independent Contract Review

1. Contracts must be ratified by appropriate official action of the governing body of each party to the contract as a condition precedent to its entry into force. Contracts **under \$2,000** require the approval of the agency head or designee; contracts ranging in cost from \$2,000 to ~~under \$10,000~~ **\$50,000** require the approval of the Clerk of the Board of Examiners (BOE), or designee, on behalf of the BOE; and contracts totaling ~~\$10,000~~ **\$50,000** or more require the approval of the Board of Examiners. All revenue-generating contracts require approval limits consistent with the dollar thresholds as set forth herein. All contracts and amendments with current or former employees require BOE approval regardless of the contract amount. A current employee is a person who is an employee of an agency of the State; and a former employee is an employee of any agency of the State at any time within 24 months preceding the commencement date of the proposed contract. See SAM 0323 for requirements related to contracts with current or former employees.

No department, division or agency of the State shall enter into any contract with a person to provide services without ensuring that the person is in active and good standing with the Secretary of State.

1. The Board of Examiners shall review each contract submitted for approval and consider whether sufficient authority exists to expend the money required by the contract and whether the services that are the subject of the contract could be provided by a State agency in a more cost effective manner.
2. State agencies shall identify an internal, professional level position to function as a contract monitor. This position would be responsible for facilitating the agency's RFPs, conducting complex agency solicitations or, in the event of decentralized agency purchasing procedures, the review and approval of agency solicitations and the resulting contracts for compliance with NRS Chapter 333, NAC Chapter 333, and SAM Chapter 0300. Agency contract managers must become certified through the State Purchasing Division's Contract Certification Class. Contract managers will be responsible for completing a comprehensive training course that will cover all aspects of the RFP process, informal solicitation process, law pertaining to the State Purchasing Act, contract negotiations, interlocal contracts and cooperative agreements and other topics relevant to State contracting and reducing the State's exposure to risk. Contract monitors will need to contact State Training for a schedule of classes and registration.
3. All contracts submitted to the Board of Examiners which are less than ~~\$10,000, those contracts necessary to preserve life and property in amounts less than \$25,000~~ **\$50,000** and those contracts entered into by the State Gaming Control Board for the purposes of investigating an applicant for or holder of a gaming license MAY be approved on behalf of the Board by the Clerk of the Board of Examiners or his designee, ~~which is appealable~~ *The Clerk's denial of a contract is appealable to the Board of Examiners. The appeal must be made in writing to the Clerk and include a full explanation and justification for the appeal. The appeal will be placed on the next Board of Examiner's Agenda subject to the same deadlines established for all other agenda items.* Such contracts are not effective until signed by the Clerk. ~~(NRS 284.173)~~

subsequent

4. All services provided to an agency by persons and/or firms falling under the definition of an independent contractor as enumerated in SAM 0320 must be supplied under a contract executed by the agency receiving the services. Examples of such services include, but are not limited to:

- a. Medical services (does not include employee physicals).
- b. Consultants.
- c. Training.
- d. Telephone answering services.
- e. Repair, replacement or installation of parts for automobiles and light trucks more than \$5,000 and heavy equipment more than \$15,000.
- f. Clipping services.
- g. Data Processing Services, including hardware maintenance (must be reviewed and approved by the Department of Information Technology before submittal to the Board of Examiners).
- h. Alarm System Monitoring (fire, burglar, etc.).

5. Whenever possible, agencies should anticipate and negotiate contracts for preventive services to eliminate the need for emergency services at some future date. Such contracts may include minor remodeling, repair or preventive maintenance work. The following rules must be considered in the preparation of such contracts.

- a. All such contracts are subject to the requirements of SAM.
- b. All such contracts must conform to the bidding requirements in SAM 0338 and the minor remodeling, repair and maintenance requirements in SAM 0338.
- c. Funding must be available for payments against the contract.

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director


Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 16, 2013

To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration

From: Julie Strandberg, Budget Analyst 

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.

**DEPARTMENT OF PUBLIC SAFETY– DIVISION OF EMERGENCY MANAGEMENT
Clark County Flood**

Agenda Item Write-up:

Pursuant to NRS 353.2755, the Division of Emergency Management on behalf of Clark County is requesting additional time to the original extension due to the time needed to identify all costs associated with the flood damage repairs and to identify potential insurance claim offsets to the various departments and agencies with damage to structures and facilities. Clark County respectfully requests an extension to the original request of September 11, 2013 to March 31, 2014.

Additional Information:

At the December 5, 2012 Board of Examiners meeting the Board approved an extension to September 11, 2013; however, additional time is being requested, due to the numerous public facilities and infrastructure that experienced damage. Several agencies and county departments were impacted, and there has been a significant expense for materials and staffing to repair damage or replace damaged facilities.

Statutory Authority:

Pursuant to NRS 353.2755 (2) the initial request for a grant or loan from the Disaster Relief Fund must be submitted within 60 days after the disaster and include specific information mentioned

in statute. Any additional information requested by the State Board of Examiners must be submitted within 6 months after the disaster, which was March 11, 2013, unless the State Board of Examiners and the Interim Finance Committee grant an extension.

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

Brian Sandoval
Governor



James M. Wright
Interim Director

Christopher B. Smith
Chief

**Division of Emergency Management
Homeland Security**

2478 Fairview Drive
Carson City, Nevada 89701

Telephone (775) 687-0300 • Fax (775) 687-0322 • <http://dem.state.nv.us/>

July 9, 2013

Ms. Julie Strandberg
Budget Analyst
Department Of Administration
209 E. Musser St.
Carson City, NV 89701

RECEIVED
JUL 09 2013
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Dear Ms. Strandberg:

Subject: Time extension for the submission of an application for the Nevada Disaster Relief Account Funding – Clark County severe storm and flooding event on September 11, 2012.

The Nevada Division of Emergency Management (NDEM), on behalf of Clark County, requests a time extension for the submission of the Nevada Disaster Relief Account Fund (DRA) application and supporting documentation. This request is for the reimbursement of expenditures incurred in responding to, and the repair of, damaged property as a result of the September 11, 2012, severe storm and flooding.

Because of the extensive cost incurred by Clark County and its various departments and agencies, Clark County is still in the process of collecting data on the cost of their response, and the damaged property. Please see the attached letter from Clark County requesting additional time to complete the DRA application.

At this time we are asking that an extension be granted for the completion and submittal of the final funding application, no later than March 31, 2014. This will allow Clark County, NDEM, Department of Administration, and Taxation the time and ability to complete their respective DRA application reviews.

Ms. Julie Strandberg
Page 2
July 9, 2013

NDEM is committed to working closely with all of the parties involved in refining the true costs, and respectfully request an extension of the DRA.

Thank you for your consideration of this request. If you have any questions, please contact Rick Martin at (775) 687-0306, or Ron Hood at (775)687-0319.

Best regards,

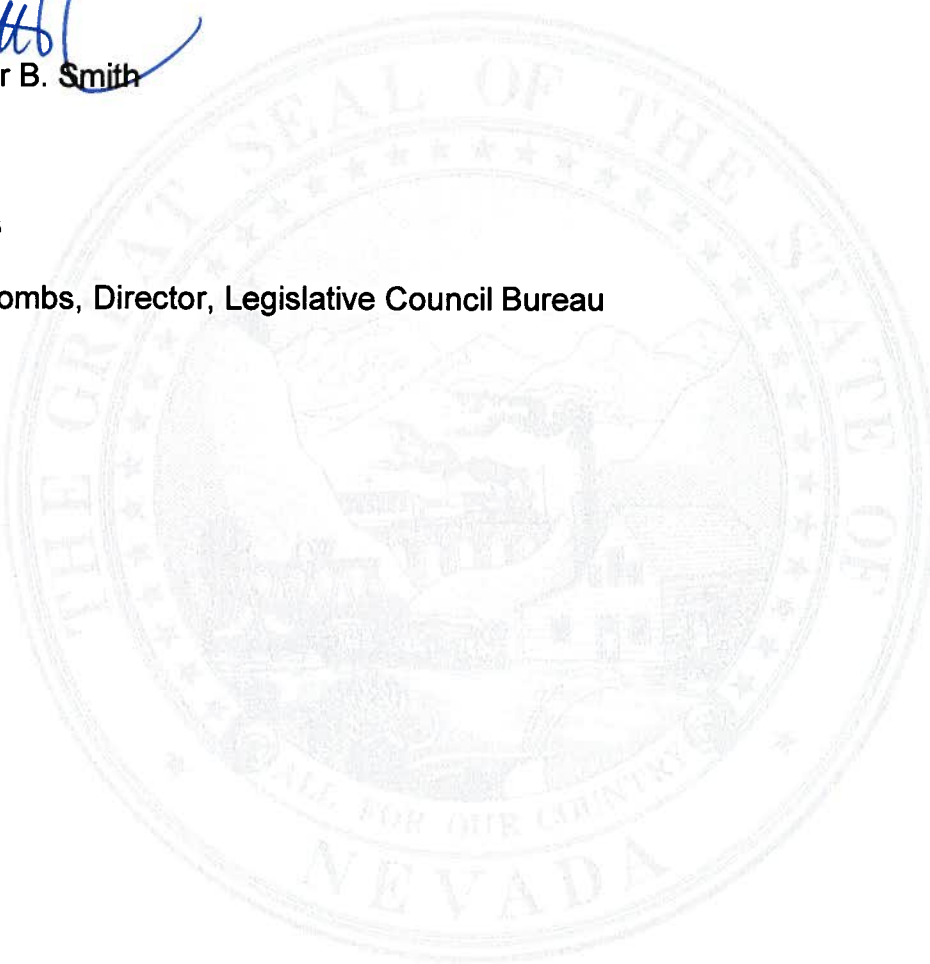


Christopher B. Smith

CBS/rh/cm

Enclosures

cc: Rick Combs, Director, Legislative Council Bureau





Clark County Fire Department Office of Emergency Management & Homeland Security

575 E. Flamingo Rd. Las Vegas NV 89119
(702) 455-5710 · Fax (702) 455-5718

Fernandez Leary, Deputy Fire Chief - Emergency Manager

July 8, 2013

Christopher Smith, Chief
Division of Emergency Management and
Homeland Security
State of Nevada
2478 Fairview Drive
Carson City, NV 89701

Re: Clark County Disaster Relief Account Application – Extension of Time

Dear Chief Smith:

This letter is to request an extension of time to file a formal application on behalf of Clark County and other agencies affected by the September 11, 2012 flooding in Las Vegas, Nevada. Clark County previously filed a Notice of Intent to Apply and we were granted until September 11, 2013 to file a formal application with our documented request for relief.

As you are aware, several areas within both urban and rural Clark County experienced flood damage, primarily focused in the area near the Desert Rose Golf Course and McCarran Airport, as well as Northeast Clark County in the Moapa Valley Area.

As a result of the floods, numerous public facilities and infrastructure experienced damage. Several agencies and county departments were impacted, and there has been a significant expenditure for materials and staffing to repair damage or replace damaged facilities. It has been a lengthy challenge to identify all costs associated with the flood damage repairs, and to identify potential insurance payment offsets to the various departments and agencies with damage to structures and facilities.

We respectfully request a six month extension, to March 31, 2014, to complete all of the documentation required to submit a full and complete application.

Thank you for consideration of this request. If you have any questions or require further documentation, please let me know.

Sincerely,


Fernandez Leary
Deputy Fire Chief/Emergency Manager

cc: Ron Hood, Recovery and Mitigation Officer

Bertral Washington, Fire Chief
Jon Klassen, Deputy Fire Chief · Fernandez Leary, Deputy Fire Chief
Erik Newman, Deputy Fire Chief · Kelly Blackmon, Deputy Fire Chief

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Budget Division

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Date: July 1, 2013

To: Jeff Mohlenkamp, Director
Department of Administration

From: Julie Strandberg, Budget Analyst
Budget Division

A handwritten signature in black ink, appearing to be "JS", written over the name Julie Strandberg.

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.

DEPARTMENT OF PUBLIC SAFETY– DIVISION OF EMERGENCY MANAGEMENT
Caughtlin Fire

Agenda Item Write-up:

Pursuant to NRS 353.274, the City of Reno, Sierra Fire Protection District, and the Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Caughtlin Fire, which occurred on November 18, 2011.

City of Reno	\$162,548.75
City of Reno-Non-FMAG	\$ 42,330.57
Sierra Fire Protection District	\$ 23,132.00
Truckee Meadows Fire	\$ 39,536.00
Total	\$267,547.32

Additional Information:

On November 18, 2011 a fire occurred in the Caughtlin area within the City of Reno. This event was eligible for the Fire Management Assistance Grant (FMAG) and each entity submitted their request and received 75 percent of the FMAG eligible costs incurred. Pursuant to NRS 353.2745(1) local governments are eligible to receive 50 percent of the gross expenses incurred from the DRF; however in this case each entity will only require 25 percent to be whole. The City of Reno is requesting \$162,548.75, Sierra Fire Protection District is requesting \$23,132, and Truckee Meadows Fire Protection District is requesting \$39,536. These amounts represent the remaining 25 percent. Upon financial review

by the Department of Taxation it has been determined that the amounts requested by each entity appear reasonable.

The City of Reno is requesting an additional \$42,330.57, as the costs are attributed to infrastructure, state mutual aid, and apparatus damages, which are not eligible for FMAG reimbursement.

City of Reno Total Cost	\$650,195.00
FEMA – 75%	\$487,646.25
DRF – 25%	\$162,548.75
Non-FMAG Eligible	\$42,330.57

The City of Reno is also requesting reimbursement on behalf of East Fork Fire in the amount of \$7,508.72 and REMSA in the amount of \$23,018.20. Based on FEMA guidelines (which are used to administrate FMAG) these two entities were not eligible for reimbursement through FMAG. The cost incurred by East Fork Fire was within the first 24 hours, which under FEMA guidelines is the initial period of unpaid assistance. In addition, the City of Reno did not follow the appropriate resource request protocol by-passing the Nevada Mutual Aid process. The cost incurred by REMSA was due to “self-deployment.” Neither the City of Reno nor DEM requested the assistance of REMSA, and in accordance to FEMA policy, cost incurred by entities that “self-deploy” is not reimbursable.

Statutory Authority:

Pursuant to **NRS 353.2745 Authorized grants to local governments.** Money in the Account may be distributed as a grant to a local government because of a disaster for:

1. The payment of not more than 50 percent of the expenses incurred by the local government for:
 - (a) The repair or replacement of public roads, public streets, bridges, water control facilities, public buildings, public utilities, recreational facilities and parks owned by the local government and damaged by the disaster; and

***(b) Any emergency measures undertaken to save lives, protect public health and safety or protect public property, including, without limitation, an emergency measure undertaken in response to a crisis involving violence on school property, at a school activity or on a school bus, in the jurisdiction in which the disaster occurred; and**

2. The payment of not more than 50 percent of any grant match the local government must provide to obtain a grant from a federal disaster assistance agency for an eligible project to repair damage caused by the disaster within the jurisdiction of the local government.

It appears the BOE has authority under NRS 353.274 (b) to determine if they want to approve any of the three requests before them, which were not eligible under the FMAG.

1)	City of Reno	\$11,803.65
2)	East Fork Fire	\$7,508.72
3)	REMSA	\$23,018.20
	Total	\$42,330.57

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



STATE OF NEVADA
DEPARTMENT OF TAXATION

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BRIAN SANDOVAL
Governor
ROBERT R. BARENGO
Chair, Nevada Tax Commission
CHRISTOPHER G. NIELSEN
Executive Director

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HENDERSON OFFICE
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Henderson, Nevada 89074
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Fax: (702) 486-3377

RECEIVED

JUN 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

June 5, 2013

Mr. Jeffrey Mohlenkamp, Director
Department of Administration
209 East Musser Street, Room 200
Carson City, NV 89701

Re: Disaster Relief Application from Sierra Fire Protection District

Dear Mr. Mohlenkamp:

The Department of Taxation has received Sierra Fire Protection District's (SFPD) application for financial relief from the State Disaster Relief Fund from your office. This application is for reimbursement of certain expenses that resulted in the Caughlin Fire of November 2011.

The SFPD grant request from the State Disaster Relief Fund is for \$23,132. This amount represents 25% of the total cost incurred by SFPD for the Caughlin Fire. Seventy five percent (75%) was reimbursed by a Federal Emergency Management Agency grant program. This amount was \$69,396.

In the Department's review of the application, several things stand out when determining the financial status of SFPD. The following bullet points touch on these factors.

- The decrease in assessed value beginning in FY09 has been substantial. The Department has confirmed the reported decrease of 33% as mentioned in Item 8 of the application. The property tax revenue loss alone, between FY10 and FY11, was 1.4 million.
- The decrease in fund balance over the last three audit years has been great. Between FY10 and FY11 the decrease was 31%. Between FY11 and FY12 the decrease was 44.6%. A large capital outlay amount contributed to the decrease in FY12; however this was due to deferred capital outlay the prior three years.

In addition the Department would like to point out that even though SFPD has room in its operating tax rate to increase its current rate of 54 cents, due to the abatement legislation the amount of revenue generated, by a tax rate increase, would be limited and would not increase its fund balance in any significant way.

The amount of the grant request appears to be minimal when looking at the yearly revenue and fund balances provided in the application. However SFPD has budgeted and managed its revenue/expenses efficiently through these hard economic times and the \$23,132 will help keep it on good financial ground. Therefore the Department recommends approval of the Sierra Fire Protection District's request from the State Disaster Relief fund for \$23,123.

If you have any questions regarding this matter, please call Tom Gransbery at 775-684-2073.

Sincerely,

Christopher G. Nielsen
Executive Director

CGN: tg



**STATE OF NEVADA
DEPARTMENT OF TAXATION**
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Chair, Nevada Tax Commission
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RECEIVED

JUN 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

June 5, 2013

Mr. Jeffrey Mohlenkamp, Director
Department of Administration
209 East Musser Street, Room 200
Carson City, NV 89701

Re: Disaster Relief Application from Truckee Meadows Fire Protection District

Dear Mr. Mohlenkamp:

The Department of Taxation has received Truckee Meadows Fire Protection District's (TMFPD) application for financial relief from the State Disaster Relief Fund from your office. This application is for reimbursement of certain expenses that resulted in the Caughlin Fire of November 2011.

The TMFPD grant request from the State Disaster Relief Fund is for \$39,536. This amount represents 25% of the total cost incurred by TMFPD for the Caughlin Fire. Seventy five percent (75%) was reimbursed by a Federal Emergency Management Agency grant program. This amount was \$118,605.

In the Department's review of the application, several things stand out when determining the financial status of TMFPD. The following bullet points touch on these factors.

- The decrease in assessed value beginning in FY09 has been substantial. The decrease in assessed value from FY09 to FY14 is greater than 37%. The property tax revenue loss, in the General Fund, between FY10 and FY11 was 1.8 million and between FY11 and FY12 the loss was 1.1 million.
- In FY12 the fund balance for TMFPD Emergency Fund took a big hit. The fund balance decreased by \$556,738. This resulted in the fund balance decreasing by 65.9%.

The amount of the grant request appears to be minimal when looking at the yearly revenue and fund balances provided in the application. However TMFPD has budgeted and managed its revenue/expenses efficiently through these hard economic times and the \$39,536 will help keep it on good financial ground. Therefore the Department recommends approval of the Truckee Meadows Fire Protection District's request from the State Disaster Relief fund for \$39,536.

If you have any questions regarding this matter, please call Tom Gransbery at 775-684-2073.

Sincerely,

Christopher G. Nielsen
Executive Director

CGN:tg



**STATE OF NEVADA
DEPARTMENT OF TAXATION**

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June 5, 2013

Mr. Jeffrey Mohlenkamp, Director
Department of Administration
209 East Musser Street, Room 200
Carson City, NV 89701

RECEIVED

JUN 14 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Re: Disaster Relief Application from City of Reno

Dear Mr. Mohlenkamp:

The Department of Taxation has received the City of Reno's (City) application for financial relief from the State Disaster Relief Fund from your office. This application is for reimbursement of certain expenses that resulted in the Caughlin Fire of November 2011.

The City's grant request from the State Disaster Relief Fund is for \$162,548.75. This amount represents 25% of the eligible total cost incurred by City for the Caughlin Fire. Seventy five percent (75%) was reimbursed by a Federal Emergency Management Agency grant program. This amount was \$487,646.25. The City is also requesting another \$42,330.57 of additional cost that was not covered by the Federal Emergency Management Agency (FEMA) grant program.

In the Department's review of the application, several things stand out when determining the financial status of the City. The following bullet points touch on these factors.

- The decrease in assessed value beginning in FY09 has been substantial. The decrease in assessed value from FY09 to FY14 is greater than 24%. The property tax revenue loss, in the General Fund, between FY10 and FY11 was 5.3 million and between FY11 and FY12 the loss was 1.8 million.
- Even though the City's FY12 General Fund ending fund balance gained back some of the loss it experienced in FY11, the fund balance of 6.5 million is still low compared to the 10 million in FY09 and the 14.9 million in FY08.
- In the application submitted by the City, item #19, General Fund current year information, the first four months were reporting revenues at 28% of budget and off 3.5 million from prior year. While the expenses were at 30% of budget and 0.7 million up from the prior year.

The hard economic times have been difficult on the City of Reno and even though some signs of recovery are present, full recovery for the City is still many months away. Therefore the Department recommends approval of the City of Reno's request from the State Disaster Relief fund for \$162,548.75.

With regard to the second request, the \$42,330.57 of ineligible costs as define by the FEMA grant program, the Department offers this. Other than the damage to City of Reno infrastructure (\$2,538.97) the other costs were

Mr. Mohlenkamp
June 5, 2013
Page 2

incurred by other firefighting districts and REMSA that came to the aid of the City of Reno. If the City of Reno, in an attempt to keep in good standing with other regional fire districts and REMSA eventually pay for these costs, the Department's analysis and recommendation would be the same for the \$42,330.57 as it was for the \$162,548.75.

If you have any questions regarding this matter, please call Tom Gransbery at 775-684-2073.

Sincerely,

A handwritten signature in blue ink, appearing to read "C. Nielsen", with a long horizontal flourish extending to the right.

Christopher G. Nielsen
Executive Director

CGN:tg

Brian Sandoval
Governor

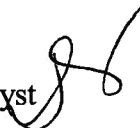


Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 1, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Julie Strandberg, Budget Analyst 
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.

DEPARTMENT OF PUBLIC SAFETY-- DIVISION OF EMERGENCY MANAGEMENT
Washoe Drive Fire

Agenda Item Write-up:

Pursuant to NRS 353.274, Sierra Fire Protection District and Truckee Meadows Fire Protection District are requesting reimbursement from the Disaster Relief Fund (DRF) due to the Washoe Drive Fire, which occurred on January 19, 2012.

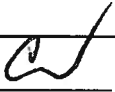
Additional Information:

On January 19, 2012 a fire occurred in the Washoe Valley area. This event was eligible for the Fire Management Assistance Grant (FMAG) and each entity submitted their request and received 75 percent of the FMAG eligible costs incurred. Pursuant to NRS 353.2745(1) local governments are eligible to receive 50 percent of the gross expenses incurred, however in this case each entity will only require 25 percent to be whole. The Sierra Fire Protection District is requesting \$18,429 and Truckee Meadows Fire Protection District is requesting \$97,735. These amounts represent the remaining 25 percent. Upon financial review by the Department of Taxation it has been determined that the amounts requested by each entity appear reasonable.

Statutory Authority:

Pursuant to NRS 353.2745 Authorized grants to local governments. Money in the Account may be distributed as a grant to a local government because of a disaster for:

1. The payment of not more than 50 percent of the expenses incurred by the local government for:
 - (a) The repair or replacement of public roads, public streets, bridges, water control facilities, public buildings, public utilities, recreational facilities and parks owned by the local government and damaged by the disaster; and
 - (b) Any emergency measures undertaken to save lives, protect public health and safety or protect public property, including, without limitation, an emergency measure undertaken in response to a crisis involving violence on school property, at a school activity or on a school bus, in the jurisdiction in which the disaster occurred; and
2. The payment of not more than 50 percent of any grant match the local government must provide to obtain a grant from a federal disaster assistance agency for an eligible project to repair damage caused by the disaster within the jurisdiction of the local government.

REVIEWED: 
ACTION ITEM: _____



**STATE OF NEVADA
DEPARTMENT OF TAXATION**

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BRIAN SANDOVAL
Governor
ROBERT R. BARENGO
Chair, Nevada Tax Commission
CHRISTOPHER G. NIELSEN
Executive Director

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June 19, 2013

Mr. Jeffrey Mohlenkamp, Director
Department of Administration
209 East Musser Street, Room 200
Carson City, NV 89701

RECEIVED
JUN 28 2013
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Re: Disaster Relief Application from Sierra Fire Protection District

Dear Mr. Mohlenkamp:

The Department of Taxation has received Sierra Fire Protection District's (SFPD) application for financial relief from the State Disaster Relief Fund from your office. This application is for reimbursement of certain expenses that resulted in the Washoe Fire of January 2012.

The SFPD grant request from the State Disaster Relief Fund is for \$18,429. This amount represents 25% of the total cost incurred by SFPD for the Washoe Fire. Seventy five percent (75%) was reimbursed by a Federal Emergency Management Agency grant program. This amount was \$55,288.

In the Department's review of the application, several things stand out when determining the financial status of SFPD. The following bullet points touch on these factors. It should be noted that this analysis is the same as the one for SFPD and the Caughlin Fire due to the fires were less than three months apart.

- The decrease in assessed value beginning in FY09 has been substantial. The Department has confirmed the reported decrease of 33% as mentioned in Item 8 of the application. The property tax revenue loss alone, between FY10 and FY11, was 1.4 million.
- The decrease in fund balance over the last three audit years has been great. Between FY10 and FY11 the decrease was 31%. Between FY11 and FY12 the decrease was 44.6%. A large capital outlay amount contributed to the decrease in FY12; however this was due to deferred capital outlay the prior three years.

In addition the Department would like to point out that even though SFPD has room in its operating tax rate to increase its current rate of 54 cents, due to the abatement legislation the amount of revenue generated, by a tax rate increase, would be limited and would not increase its fund balance in any significant way.

The amount of the grant request appears to be minimal when looking at the yearly revenue and fund balances provided in the application. However SFPD has budgeted and managed its revenue/expenses efficiently through these hard economic times and the \$18,429 will help keep it on good financial ground. Therefore the Department recommends approval of the Sierra Fire Protection District's request from the State Disaster Relief fund for \$18,429.

If you have any questions regarding this matter, please call Tom Gransbery at 775-684-2073.

Sincerely,

Christopher G. Nielsen
Executive Director

CGN: tg

Project Name: Washoe Fire
Date of the Disaster: 01/19/12 - 01/21/12
Sponsoring Agency: Sierra Fire Protection District

Expenditures:

Cost Share:	
Truckee Meadows Fire Protection District	\$ 35,895
SFPD:	
Overtime	\$ 20,099
Equipment Usage	\$ 15,582
Replacement of Damaged Equipment	\$ 2,141
<u>Total Cost Incurred by SFPD:</u>	<u>\$ 73,717</u>
75% FMAG Reimbursement:	\$ 55,284
25% State DEM Request:	\$ 18,429



**STATE OF NEVADA
DEPARTMENT OF TAXATION**

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Chair, Nevada Tax Commission
CHRISTOPHER G. NIELSEN
Executive Director

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June 19, 2013

Mr. Jeffrey Mohlenkamp, Director
Department of Administration
209 East Musser Street, Room 200
Carson City, NV 89701



Re: Disaster Relief Application from Truckee Meadows Fire Protection District

Dear Mr. Mohlenkamp:

The Department of Taxation has received Truckee Meadows Fire Protection District's (TMFPD) application for financial relief from the State Disaster Relief Fund from your office. This application is for reimbursement of certain expenses that resulted in the Washoe Fire of January 2012.

The TMFPD grant request from the State Disaster Relief Fund is for \$97,735. This amount represents 25% of the total cost incurred by TMFPD for the Washoe Fire. Seventy five percent (75%) was reimbursed by a Federal Emergency Management Agency grant program. This amount was \$293,207.

In the Department's review of the application, several things stand out when determining the financial status of TMFPD. The following bullet points touch on these factors. It should be noted that this analysis is the same as the one for TMFPD and the Caughlin Fire due to the fires were less than three months apart.

- The decrease in assessed value beginning in FY09 has been substantial. The decrease in assessed value from FY09 to FY14 is greater than 37%. The property tax revenue loss, in the General Fund, between FY10 and FY11 was 1.8 million and between FY11 and FY12 the loss was 1.1 million.
- In FY12 the fund balance for TMFPD Emergency Fund took a big hit. The fund balance decreased by \$556,738. This resulted in the fund balance decreasing by 65.9%.

The amount of the grant request appears to be minimal when looking at the yearly revenue and fund balances provided in the application. However TMFPD has budgeted and managed its revenue/expenses efficiently through these hard economic times and the \$97,735 will help keep it on good financial ground. Therefore the Department recommends approval of the Truckee Meadows Fire Protection District's request from the State Disaster Relief fund for \$97,735.

If you have any questions regarding this matter, please call Tom Gransbery at 775-684-2073.

Sincerely,


Christopher G. Nielsen
Executive Director

CGN:tg

Project Name: Washoe Fire
 Date of the Disaster: 01/19/12 - 01/21/12
 Sponsoring Agency: Truckee Meadows Fire Protection District

Expenditures:

Summary of Charges:

Rolling Stock - Engines/Tenders	\$ 336,217.44
Incident Support And Related Costs	\$ 116,190.22
Dozers	\$ 15,662.67
Grand Total	\$ 468,070.33

Per Cost Share:	Rolling Stock
SFPD = 1%	\$ 3,362.17
TMFPD = 99%	\$ 332,855.27
Grand Total	\$ 336,217.44

Per Cost Share:	Incident Support
RFD = 1%	\$ 1,161.90
SFPD = 28%	\$ 32,533.26
TMFPD = 35%	\$ 40,666.58
BLM = 20%	\$ 23,238.04
US Forest Service = 4%	\$ 4,647.61
NDF = 6%	\$ 6,971.41
Remaining Unallocated = 6%	\$ 6,971.42
Grand Total	\$ 116,190.22

Per Cost Share:	Dozers
BLM = 50%	\$ 7,831.34
US Forest Service = 50%	\$ 7,831.33
Grand Total	\$ 15,662.67

Total Cost	\$ 468,070.33
FMAG Audit Correction per Kathy Rubin, NDF	\$ 10,448.62
	\$ 478,518.95
Less Cost Reimbursements	
Per Cost Share Agreement:	
Reno Fire Dept.	\$ 1,161.90
Sierra Fire Protection Dist.	\$ 35,895.43
Bureau of Land Mgmt	\$ 31,069.38
US Forest Service	\$ 12,478.94
Nevada Div of Forestry	\$ 6,971.41
TMFPD Total Cost	\$ 390,941.89
75% FMAG REIMBURSEMENT	\$ 293,206.42
25% STATE DEM REQUEST	\$ 97,735.00

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director


Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Budget Division

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Date: July 17, 2013

To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration

From: Melanie Young, Budget Analyst 

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.

DEPARTMENT OF TAXATION

Agenda Item Write-up:

Department of Taxation - \$7,644,336

Pursuant to NRS 41.037, the department requests the approval of a settlement agreement with several companies regarding sales/use tax for complementary patron and employee meals. In this agreement the Department of Taxation requests the approval to pay cash a settlement in the amount of \$4,500,000 for taxpayers who are no longer in business and provide tax credits in the amount of \$3,144,336 for taxpayers who are still in business.

Additional Information:

The Department of Taxation, prior to a 2008 Nevada Supreme Court decision, was administering tax on complimentary meals to patrons and free employee meals as a use tax. The taxable measure to calculate the use tax on these types of meals was the cost of the components of the meal, including utensils.

The 2008 Nevada Supreme Court decision struck down use tax on both complementary food and employee meals, however if "consideration" could be demonstrated the Department of Taxation to collect sales tax on these meals.

On February 14, 2012 the Nevada Tax Commission issued a decision, which determined that “consideration” exists for the purpose of imposing sales tax, if you are providing meals to patrons through a program whereby the patron gambles and decisions to provide complementary meals to that patron are based on gaming activity, those transactions are taxable retail sales and sales tax should be collected from the patron on the retail price of those transactions as if they were cash transactions. Meals to employees are also taxable retail sales.

Due to ongoing litigation the Nevada Tax Commission and the Nevada Department of Taxation agree to settle the disputes per the attached settlement agreement.

In addition, during the 77th Legislative Session, Assembly Bill 506 was introduced and passed, to which complementary foods are no longer subject to sales or use tax. This bill was effective upon passage.

Statutory Authority:

NRS 41.037

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



STATE OF NEVADA
DEPARTMENT OF TAXATION

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MEMORANDUM

Date: July 9, 2013
To: Board of Examiners
From: Christopher Nielsen
Subject: Settlement Agreement – Refund on Sales Tax on complimentary food and employee meals

This is a payment to settle litigation between the Department of Taxation and several companies regarding sales/use tax refund requests and tax liabilities for complimentary patron and employee meals.

OVERVIEW

This memorandum outlines the history and resolution on the taxability of complimentary food and employee meals with respect to Sales & Use Tax.

BACKGROUND

Prior to a 2008 Nevada Supreme Court decision, the Department was administering the tax on complimentary meals to patrons and free employee meals as a use tax. The taxable measure to calculate the use tax on these types of meals was the cost of the components of the meal, including utensils.

In 2008, the Nevada Supreme Court struck down the use tax on both complimentary meals and employee meals. The Court, however, left open the door for the Department to collect sales tax on these meals if "consideration" could be demonstrated. Based on the Court's decision, the Department notified the public that the Department would provide additional guidance once the Tax Commission issued a decision on the issue of consideration with respect to sales tax on these types of meals.

On February 14, 2012 the Nevada Tax Commission issued a decision¹ that determined that "consideration" exists for the purposes of imposing sales tax on complimentary meals provided to

¹ In summary, the Tax Commission's was as follows:

If you are providing meals to patrons through a program whereby the patron gambles and decisions to provide complimentary meals to that patron are based on that gaming activity, those transactions are taxable retail sales and sales tax should be collected from the patron on the retail price of those transactions as if they were cash transactions. Meals which you provide to

casino patrons and meals provided to employees free of charge. That case, as well as subsequent cases where decisions were issued by the Nevada Tax Commission were appealed to the District Court and then appealed to the Nevada Supreme Court.

Due to on-going litigation regarding the question on the taxability of complimentary foods and employee meals and the potential liability to the state of over \$230 million, the Department of Taxation pursued a settlement agreement in which both the Nevada Department of Taxation and Nevada Tax Commission agreed to settle the disputes (Appendix A). Generally, the taxpayers agree to give up any entitled to use tax refunds while the State agreed to give up the right to assess sales tax. The settlement agreement also outlined a refund for certain taxpayers' no longer in business of \$4,500,000.00. In addition, credits will be provided to those taxpayers still in business for non gaming related comps of \$3,144,336.00 to use towards future tax liability.

Additionally, to clarify the taxability of complimentary foods and employee meals going forward, Assembly Bill 506 of the 77th Legislative Session was introduced and passed. This bill details that complimentary foods are no longer subject to sale or use tax.

Upon approval of the Board of Examiners, the Department of Taxation, in partnership with the Department of Administration, will scheduled the full refund of \$4,500,000 up front and will work closely with the taxpayers to issue the respective credits.

your employees are also taxable retail sales. Consequently, the taxable value of the meal is the total cost to supply the meals to the employees.

SETTLEMENT AGREEMENT

This Settlement Agreement (the "Agreement") is entered into by and between the companies identified in Exhibit A attached hereto (collectively, the "Taxpayers"), the Nevada Tax Commission (the "Commission"), Nevada Department of Taxation (the "Department"), and Douglas County and the City of Henderson (the "Intervenors"); (collectively, the "Parties") on this ____ day of May, 2013.

1. RECITALS

1.1 WHEREAS, the Department previously asserted that Nevada's Use Tax, NRS 372.185 *et seq.*, attached to the value of food that the Taxpayers used for complimentary patron and employee meals; and, accordingly, the Taxpayers paid use tax to the Department for complimentary patron and employee meals;

1.2 WHEREAS, in *Sparks Nugget, Inc. v. Department of Taxation*, 124 Nev. 159, 179 P.3d 570 (2008), the Nevada Supreme Court held that food used to prepare complimentary patron and employee meals is not properly subject to use tax but indicated that sales tax could apply to the subject transactions where it is shown that those meals were transferred for consideration;

1.3 WHEREAS, the Taxpayers specifically outlined on Exhibit A filed the claims (the "Refund Requests") seeking refunds of use taxes paid with respect to meals provided to employees and complimentary meals provided to patrons in connection with gaming activity;

1.4 WHEREAS, the Department opposes these Refund Requests, based on the rulings of various district courts, contending that regardless of *Sparks Nugget's* holding on use tax liability, these meals are subject to sales tax because they are transferred for consideration and that the Department may use the use taxes paid to offset the sales taxes which were due, thus defeating the Refund Requests;

1.5 WHEREAS, several Nevada district courts have ruled that the complimentary patron meals which are the subject of the Refund Requests were transferred for consideration because they were given in exchange for participation in a loyalty or rewards program and therefore subject to sales tax;

1.6 WHEREAS, several Nevada district courts have ruled that the complimentary employee meals which are the subject of the Refund Requests were not transferred for consideration because they were not part of a bargained for exchange and therefore not subject to sales tax;

1.7 WHEREAS, the court cases referenced in Sections 1.5 and 1.6 are on or will be on appeal to the Nevada Supreme Court;

1.8 WHEREAS, The City of Henderson and/or Douglas County are Intervenor in the above referenced litigation and have a financial interest in the outcome of, and are parties to, the litigation;

1.9 WHEREAS, the Parties recognize that both sides would benefit from a resolution of the dispute and such resolution would eliminate the need for additional costly litigation and potential liability for the State and the Taxpayers;

1.10 WHEREAS, the Parties recognize mutual interest in the Legislature providing clarification with respect to what constitutes being furnished, prepared or served for consideration with respect to the taxability of the employee meals and complimentary meals on a prospective basis; and

1.11 WHEREAS, the Parties desire to fully, finally and conclusively settle the Refund Requests on the terms set forth herein, each being fully advised by counsel in order to avoid the expense, inconvenience, and distraction of further administrative proceedings and litigation.

NOW THEREFORE, without admitting liability or fault to each other, and in a compromise of each of their positions and rights, the undersigned desire to enter into this Agreement in order to resolve the outstanding Refund Requests on the terms set forth.

2. TERMS

2.1 The Parties hereby agree to the following terms and conditions and further agree to perform any and all acts and to execute any and all additional documentation necessary or appropriate to implement this Agreement:

2.2 Upon execution of this Agreement by all the Parties and passage of the Prospective Legislation as provided in Section 2.7 herein, the Taxpayers shall forego and cause to be withdrawn pending use tax Refund Requests, including all claims that have been submitted to the Department and stipulate to the dismissal of all cases that are being litigated.

2.3 Upon execution of this Agreement by all the Parties and passage of the Prospective Legislation as provided in Section 2.7 herein, the Department shall forego and cause to be abated sales tax assessments related to the Refund Requests, including all assessments that have been made by the Department and stipulate to the dismissal of all cases that are being litigated.

2.4 The Department further agrees that with respect to the Taxpayers that are no longer in business, those Taxpayers shall, subject to approval by the Board of Examiners, be paid on their claims in the amount of \$4,500,000.00. The Taxpayers understand that this provision is contingent on the approval of the payment by the State of Nevada Board of Examiners. The specific properties and the amounts related thereto are attached hereto as Exhibit B.

2.5 The Department further agrees that with respect to properties that have submitted Refund Requests for non- gaming related complimentary meals, they will receive refunds of the tax and interest, in the form of credits applied against current or future sales and use tax liabilities. The credits will be verified by the Department and available for use to be applied to sales and use tax returns filed after September 1, 2013. The specific properties and the amounts related thereto are attached hereto as Exhibit C.

2.6 The Parties intend to seek legislation in the 2013 Legislative Session to provide that complimentary meals provided to patrons or employees by the Taxpayers are not subject to sales or use tax (the "Prospective Legislation"), effective as of the date of enactment of the Prospective Legislation. In consideration for the Taxpayers entering into this Agreement, the Department agrees to support the Prospective Legislation and abide by the intent of the Prospective Legislation as provided herein.

2.7 The Parties agree that this Settlement Agreement is contingent on the Legislature enacting Prospective Legislation that clarifies its intent that, with regard to the sales and use tax, the provision of meals on a complimentary basis to employees or patrons (1) does not constitute being furnished, prepared or served for a consideration, thereby excluding them from the definition of the term "sale" for the purposes of the tax; and (2) does not alter the tax-exempt status of the food for the purposes of the use tax. This entire Agreement shall be null and void if the Legislature fails to enact the Prospective Legislation.

2.8 The Parties further agree that if the Legislature enacts legislation repealing or amending the Prospective Legislation and determines that meals provided on a complimentary basis to employees or patrons are subject to taxation under NRS Chapters 372 and 374, prior to January 31, 2019, the Taxpayers will be entitled to damages for breach of contract ("Damages"). The Damages will be measured on a ratio of the tax portion, exclusive of interest, of their Refund Requests. This provision does not apply to either the Taxpayers identified in Sections 2.4 and 2.5 herein. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2013 – January 31, 2014, the Taxpayers shall be entitled to Damages equal to 6/6 of their Refund Requests. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2014 – January 31, 2015, the Taxpayers shall be entitled to Damages equal to 5/6 of their Refund Requests. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2015 – January 31, 2016, the Taxpayers shall be entitled to Damages equal to 4/6 of their Refund Requests. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2016 – January 31, 2017, the Taxpayers shall be entitled to Damages equal to 3/6 of their Refund Requests. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2017 – January 31, 2018, the Taxpayers shall be entitled to Damages equal to 2/6 of their Refund Requests. If the Legislature enacts legislation repealing or amending the Prospective Legislation from February 1, 2018 – January 31, 2019, the Taxpayers shall be entitled to Damages equal to 1/6 of their Refund Requests. Any Damages as provided herein shall

not include interest on the value of the original Refund Requests and will be paid in the form of credits applied against current or future sales and use tax liabilities.

2.9 The Parties further agree that Damages provision provided in Section 2.8 does not apply in the case of a third party claim challenging the enactment of the Prospective Legislation that results in a final decision by the Nevada Supreme Court striking down, enjoining its application or otherwise invalidating the Prospective Legislation.

2.10 The Parties further agree that this Settlement Agreement is contingent on the approval of the Nevada Tax Commission in an open, public meeting governed by the provisions of NRS Chapter 241. The Taxpayers further agree to waive the notice required pursuant to NRS 241.033(2)(b)(1) and (2) for consideration at the Nevada Tax Commission meeting.

2.11 The Department agrees that it will make no claim against the Taxpayers, related in any way to the complimentary meals the Taxpayers provide to their employees or patrons, including, but not limited to, claims of sales or use tax for any time period up to and including the effective date of the Prospective Legislation.

2.12 The Taxpayers agree that they will make no claim for use tax refunds against the Department related in any way to the complimentary meals the Taxpayers provide to their employees or patrons, up to and including the effective date of the Prospective Legislation.

2.13 Subject to and upon satisfaction of the obligations under this Agreement, the Taxpayers hereby release, waive, and discharge: (1) the State of Nevada, including the Department and the Nevada Tax Commission; and (2) the Intervenors from any and all claims, demands, obligations, causes of action, grievances, administrative claims, costs, expenses, attorneys' fees and liabilities relating to the Refund Requests up to the date of the Prospective Legislation.

2.14 Notwithstanding anything to the contrary, the Parties expressly agree that this Agreement does not affect any other transaction, tax or refund except those related to the Refund Requests.

2.15 Subject to and upon satisfaction of the obligations under this Agreement, the Department, on behalf of itself and the State of Nevada hereby releases, waives, and discharges: the Taxpayers, including their successors in interest, assigns, subsidiaries, affiliates, managers, members, directors, officers, attorneys, employees, shareholders and agents, from any and all claims, demands, obligations, causes of action, costs, expenses, attorneys' fees and liabilities relating to the Refund Requests, including for any tax liability asserted over complimentary meals provided to patrons or employees up to the date of the Prospective Legislation.

3. COSTS AND ATTORNEYS' FEES

If any legal action or other proceeding is brought by any of the Parties hereto relating to this Agreement or to recover damages or equitable relief for a breach or threatened breach thereof, the prevailing party shall recover its costs, expert witness fees, consulting fees, and reasonable attorneys' fees incurred in such action or proceeding, which amount shall be determined by a court and not a jury in the event of a disagreement between the Parties regarding amounts. On behalf of the Intervenors, the State will bear the burden of an award of costs and attorneys' fees.

4. ENTIRE AGREEMENT

All prior or contemporaneous understandings or agreements between the Parties as they relate to this Agreement or subject matter of this agreement are merged into this Agreement, and it alone expresses the understanding and agreement of the Parties. This Agreement may be modified only in writing, signed by all the Parties hereto, and no term or provision may be waived except in writing. There are no other agreements or representations, express or implied, either oral or in writing, between the Parties, concerning the subject matter of this Agreement, except as specifically set forth in this Agreement. The Parties have been represented by counsel of their choice in connection with the preparation of this Agreement.

5. APPLICABLE LAW

This Agreement was drafted through the joint efforts of the Parties and/or through counsel, and shall not be read for or against any Party to this Agreement on that account. This Agreement is a valid, enforceable contract and shall be enforced according to its written terms under the laws of the State of Nevada.. All Parties consent to jurisdiction and venue in Nevada.

6. BENEFIT

This Agreement shall be binding upon and inure to the benefit of the Parties, and each of them, their successors in interest, assigns, subsidiaries, affiliates, managers, members, directors, officers, attorneys, employees, shareholders, agents and servants.

7. COUNTERPARTS

This Agreement may be executed in any number of counterparts and each counterpart executed by any of the undersigned together with all other counterparts so executed shall constitute a single instrument and agreement of the Parties. Facsimile copies hereof and facsimile signatures hereon shall have the same force and effect as originals.

8. NO ASSIGNMENTS

Each party to this Agreement warrants and represents to the other that they have not assigned or transferred to any person or entity not a party hereto any claim or other released matter, or any part or portion thereof.

9. AUTHORITY

Each party to this Agreement warrants and represents that they have the authority to enter into this Agreement and that it is binding upon each of them. Each individual executing this Agreement on behalf of any entity or person specifically warrants that he or she has the authority to sign this Agreement. The Parties expressly agree and acknowledge that they would not enter into this Agreement absent the representation and warranty that it is valid, binding and fully enforceable under the laws of the State of Nevada and the laws of the United States of America.

READ AND SIGNED THIS _____ day of _____, 2013.

NEVADA TAX COMMISSION

By: _____

Its: _____

DEPARTMENT OF TAXATION

By: _____

Its: _____

DOUGLAS COUNTY

By: _____

Its: _____

CITY OF HENDERSON

By: _____

Its: _____

**TAXPAYER SIGNATURE PAGE: MAY ____, 2013, SETTLEMENT
AGREEMENT BY AND BETWEEN THE TAXPAYERS, THE COMMISSION,
THE DEPARTMENT AND THE INTERVENORS**

READ AND SIGNED THIS _____ day of _____, 2013.

By: _____ Print Name: _____
Signature

For: _____
COMPANY NAME

Its: _____
Title

Nevada Food Case Settlement
 Non-Gaming Comps
 Refund / Credit Claims

Settlement Agreement
 Exhibit C

Property	Tax Refund Claim Amount	Beginning of Refund Period	End of Refund Period	Refund Claim Filed Date	Non-Gaming Comps Refund	Non-Gaming Comps Refund w/ Interest
Winners (Cashell)	17,924	3/ 1/ 2002	12/ 31/ 2004	3/ 28/ 2005	8,220	11,919
Winners (Cashell)	16,069	7/ 1/ 2005	6/ 30/ 2008	8/ 13/ 2008	5,993	8,689
Cashell Total	33,993				14,213	20,608
GNLV Corp.	918,696	10/ 1/ 2001	9/ 30/ 2004	11/ 22/ 2004	186,654	270,649
GNLV Corp.	31,148	10/ 1/ 2004	10/ 30/ 2004	12/ 10/ 2004	6,632	9,616
GNLV Corp.	945,220	1/ 1/ 2005	2/ 28/ 2008	4/ 29/ 2005	143,062	207,440
GNLV Corp. Laughlin	327,498	1/ 1/ 2005	2/ 28/ 2008	12/ 27/ 2010	3,379	4,900
GNLV Total	2,222,563				339,728	492,605
Jerry's Nugget	37,124	8/1/2005	7/31/2008	9/23/2008	1,575	2,284
Lakeside Inn	44,124	1/ 1/ 2003	10/ 31/ 2005	12/ 19/ 2005	11,472	16,635
Lakeside Inn	48,889	11/ 1/ 2006	9/ 30/ 2009	12/ 8/ 2009	12,711	18,431
Lakeside Total	93,013				24,183	35,066
LV Hotel	1,072,007	4/1/2005	2/28/2008	5/13/2008	112,729	163,457
Colorado Belle LLC	120,952	6/ 30/ 2007	3/ 31/ 2008	5/ 19/ 2008	11,227	16,279
Edgewater Gaming LLC	154,401	6/ 30/ 2007	3/ 31/ 2008	5/ 19/ 2008	23,155	33,575
Marnell Total	275,353				34,382	49,854
B&BB Inc. (Virgin River)	239,071	11/ 1/ 2000	5/ 31/ 2003	12/ 15/ 2003	31,583	45,795
B&BB Inc. (Virgin River)	351,731	3/ 1/ 2005	2/ 28/ 2008	5/ 19/ 2008	47,503	68,880
B&BB Inc. (Virgin River)	26,450	3/ 1/ 2008	5/ 31/ 2008	7/ 25/ 2008	4,716	6,838
RBG Inc. (Casablanca)	331,343	7/ 1/ 2000	8/ 31/ 2003	11/ 14/ 2003	40,325	58,471
RBG Inc. (Casablanca)	355,356	6/ 1/ 2005	5/ 30/ 2008	7/ 28/ 2008	43,825	63,546
Mesquite Total	1,303,951				167,952	243,530

Peppermill c/o Rainbow	433,921	2/1/2002	1/31/2005	2/24/2005	154,736	224,368
Peppermill c/o Rainbow	442,525	2/1/2005	12/31/2007	4/8/2008	157,804	228,816
Peppermill c/o Rainbow	81,266	1/1/2008	6/30/2008	8/4/2008	28,979	42,020
Peppermill Casino Inc. Reno	946,078	11/1/2001	10/31/2004	12/27/2004	124,697	180,810
Peppermill Casino Inc. Reno	1,055,078	3/1/2005	1/31/2008	5/19/2008	163,757	237,447
Peppermill Casino Inc. Reno	121,022	2/1/2008	5/31/2008	9/8/2008	15,104	21,901
Peppermill Casino Inc. Wendover	307,030	2/1/2002	1/31/2005	2/24/2005	65,336	94,737
Peppermill Casino Inc. Wendover	275,413	2/1/2005	12/31/2007	4/8/2008	58,608	84,981
Peppermill Casino Inc. Wendover	51,455	1/1/2008	6/30/2008	8/4/2008	10,950	15,877
Wendover Casino Inc. dba Montego Bay	116,928	12/1/2002	1/31/2005	2/24/2005	37,463	54,322
Wendover Casino Inc. dba Montego Bay	315,210	2/1/2005	12/31/2007	4/8/2008	100,993	146,440
Wendover Casino Inc. dba Montego Bay	51,357	1/1/2008	5/31/2008	8/4/2008	16,454	23,859
Peppermill Total	4,197,283				934,883	1,355,580
Pioneer Hotel Inc.	60,173	3/1/2000	2/28/2003	4/4/2003	-	
Pioneer Hotel Inc.	392,441	3/1/2000	2/28/2003	4/4/2003		
Pioneer Hotel Inc.	242,355	2/1/2003	7/31/2004	9/23/2004		
Pioneer Hotel Inc.	395,095	3/1/2005	2/28/2008	3/29/2008	204,157	296,028
Pioneer Hotel Inc.	31,529	3/1/2008	5/31/2008	9/12/2008		
Pioneer Total	1,121,592				204,157	296,028
Riviera Hotel & Casino	502,929	5/1/2005	2/28/2008	6/23/2008	18,930	27,449
Circus & Eldorado Joint Venture	592,506	2/1/2000	12/31/2002	2/19/2003	35,634	51,669
Circus & Eldorado Joint Venture	207,352	1/1/2003	1/31/2004	3/1/2004	13,022	18,882
Circus & Eldorado Joint Venture	149,125	2/1/2004	11/30/2004	6/15/2005	8,535	12,376
Circus & Eldorado Joint Venture	572,300	2/1/2005	2/28/2008	4/11/2008	34,277	49,701
Silver Legacy Total	1,521,282				91,467	132,628
Sparks Nugget	333,155	2/1/2002	9/30/2003	7/26/2004	12,610	18,285
Sparks Nugget	262,715	10/1/2003	12/31/2004	2/24/2005	11,713	16,984
Sparks Nugget	603,051	2/1/2005	1/31/2008	3/10/2008	44,426	64,418
Sparks Nugget Total	1,198,921				68,749	99,686
CP Tahoe - Montblue (Trop)	97,246	7/1/2005	3/31/2008	8/27/2008	5,809	8,423

CP Tahoe - Montblue (Trop)	17,319	7/1/2005	3/31/2008	9/23/2008	1,186	1,720
Ramada Express (Trop)	556,219	7/1/2000	5/31/2003	8/18/2003	16,951	24,579
Ramada Express (Trop)	508,912	7/1/2005	3/31/2008	8/27/2008	16,994	24,641
Ramda Express	29,138	7/1/2005	3/31/2008	9/23/2008	1,349	1,956
Trop Entertainment Total	1,208,834				42,289	61,319
Hotel Ramada of NV dba LV Tropicano	562,220	3/1/2003	2/28/2006	4/25/2006	46,018	66,726
Hotel Ramada of NV dba LV Tropicano	256,142	3/1/2006	3/31/2008	8/27/2008	18,807	27,270
Tropicana Total	818,362				64,825	93,997
South Point Hotel & Casino	585,845	10/25/2006	4/30/2008	5/16/2008	46,586	62,425
South Point Hotel & Casino	72,194	5/1/2008	6/30/2008	8/16/2008	6,282	7,821
South Point Hotel & Casino Total	658,039				52,868	70,246
TOTAL					2,172,930	3,144,336

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 17, 2013

To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration

From: Melanie Young, Budget Analyst

A handwritten signature in blue ink, appearing to read "myjg".

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.

DEPARTMENT OF TAXATION

Agenda Item Write-up:

Pursuant to NRS 353.268, Department of Taxation, requests an allocation of \$529,226 from the Interim Finance Committee Contingency Fund to implement the excise tax imposed from SB374, Section 24.4 in the 77th Legislative Session, relating to the sale of marijuana, edible marijuana products and marijuana-infused products.

Additional Information:

The Department of Taxation requests an allocation from the Interim Finance Committee Contingency Fund to modify the Unified Tax System (UTS) by utilizing department staff and Master Service Agreement (MSA) contract personnel. In addition, the department is requesting one Tax Examiner II, to be effective January 1, 2014. The total anticipated cost to implement SB374 is \$691,634.

State Fiscal Year 2014 Cost - \$529,226

State Fiscal Year 2015 Cost - \$54,136

Future Biennia - \$108,272

Statutory Authority:

NRS 353.268

REVIEWED: SB

ACTION ITEM: _____



STATE OF NEVADA
DEPARTMENT OF TAXATION

Web Site: <http://tax.state.nv.us>

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Carson City, Nevada 89706-7937
Phone: (775) 684-2000 Fax: (775) 684-2020

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Phone: (775) 687-9999
Fax: (775) 688-1303

BRIAN SANDOVAL
Governor
ROBERT R. BARENGO
Chair, Nevada Tax Commission
CHRISTOPHER G. NIELSEN
Executive Director

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Grant Sawyer Office Building, Suite 1300
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Phone: (702) 486-2300 Fax: (702) 486-2373

HENDERSON OFFICE
2550 Paseo Verde Parkway, Suite 180
Henderson, Nevada 89074
Phone: (702) 486-2300
Fax: (702) 486-3377

MEMORANDUM

Date: June 28, 2013

To: Melanie Young, Budget Analyst

From: Christopher Nielsen, Executive Director

Subject: SB374 – Taxation of Medical Marijuana

CN

RECEIVED

JUL 16 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Summary:

SB374 provides, in skeleton form, for the taxation of the retail and wholesale sale of medical marijuana. Specifically, this legislation requires the imposition of an excise tax, at the rate of 2 percent of the sales price of marijuana sold by a marijuana cultivation facility to a medical marijuana establishment, a marijuana product manufacturing facility to a medical marijuana establishment, or on the retail sale by a medical marijuana dispensary.

The revenues collected from this excise tax will be distributed as 75 percent to the Distributive School Account and 25 percent to pay for the costs of the Health Division of the Department of Health and Human Services.

This legislation requires the creation new reporting forms and distributions which will necessitate certain modifications to the Unified Tax System (UTS).

This bill became effective upon passage and approval for the purpose of adopting regulations and conducting any preliminary activities necessary to ensure that the provisions of this act are carried out in an orderly fashion and on April 1, 2014 for all other purposes.

Expenses:

Modifications to the Unified Tax System (UTS) would be required to facilitate the necessary management and distribution of taxes required by the bill. Given the Department's current workload, this change would be completed by using a combination of Department staff and Master Service Agreement (MSA) contract personnel. The estimated cost to implement the required changes is \$496,377.00. Please see Appendix A, *Technology Waiver for Enhancements*, for detailed information.

Additionally, the Department would be required to hire one additional Tax Examiner II, effective January 1, 2014, to provide the necessary overview and management of this program.

The total cost to implement and administer this tax would be:

FY2014: \$529,226.00

FY2015: \$54,136.00

Future Biennia: \$108,272.00



**State of Nevada
Technology Waiver for Enhancements**

V3.0 1/25/2011

1. Project Identification	SB374 – Marijuana Excise Tax
1.1. Project Title:	Marijuana Excise Tax
1.2. Submittal Date:	
1.3. Department Name:	Taxation
1.4. Budget Number:	2361
1.5. Agency Name:	
1.6. Decision Unit:	
1.7. Total Cost to Implement Enhancements:	\$496,377
1.8. Anticipated Annual Support Cost:	\$0
1.9. General Fund (GF) % Implementation:	100%
1.10. General Fund (GF) % Ongoing:	100%
1.11. Project / implementation end date:	4/30/2014

2. Background

2.1. System / Application being enhanced. Identify most recent TIR:

The Unified Tax System was placed into operation at the Department of Taxation in a phased approach from May 2005 to June 2007. The implementation vendor, Accenture, was contracted for 2 years of support while the Department built its internal capacity to support UTS. The Department has operated UTS solely with State resources since October 2009. The Department continues to license the Premier Data Warehouse from Revenue Solutions, Inc. (RSI), which is the audit and compliance component of the UTS, to enable access to bug fixes, new versions and support of the licensed software.

The most recent TIR submitted is for the implementation of full support for the Streamlined Sales Tax and the Marketplace Fairness Act which is pending in the U.S. House of Representatives. The TIR is pending enactment of the federal legislation and no funding has been authorized.

The work to implement the provisions of SB374 which was enacted in the 77th legislative session is the subject of this TWE.

2.2. Vendor history & prior contract history:

The Department does not foresee the need to involve a vendor in this particular enhancement with the exception of minimal work by RSI to support the audit and data warehouse changes required for this new excise tax. RSI has an ongoing relationship with the Department and changes to their licensed software are minimal as outlined in the scope of work.

3. Scope

3.1. Business reason for changes/enhancements:

SB374 imposes a 2% excise tax on all transactions of cultivators, wholesalers and retail marijuana dispensaries. UTS will be modified to add support for the excise tax, the associated licenses, return processing, revenue distribution to the designated accounts and reporting. The tax becomes effective April 1, 2014 with the monthly April returns due May 31, 2014 and thereafter.

3.2. Primary objective [measurable w/timeframe]:

Modifications to the UTS will be designed, developed, tested and implemented in time to support returns processing in May, 2014.

3.3. Scope of changes / enhancements [attach requirements matrix]:

3 form definitions to support the application, tax return and In Lieu of Return for payment processing and the associated validation and posting routines.

COBOL module to support the Soft / Hard Close process for the tax type

PL-SQL packages to support the posting of returns and support of penalty and interest for the tax type.

Form for the license detail and support for status maintenance

2 Complex PL-SQL stored procedures to support Revenue Accounting and addition of new tax type

5 new and modified reports for Distribution, Balancing, Statistics

3.4. Future: Identify future enhancements expected beyond this Initiative:

N/A

4. Security

4.1. Describe how this data is classified:

This data is classified similarly to other tax data housed in the UTS.

4.2. Describe how enhancements impact data security (confidentiality, access & integrity) & how this will be managed:

Existing policy, rules and processing will be utilized to support the new Excise Tax. There is no explicit impact from adding this tax type.

5. Technology Impact

5.1. Describe how this will impact agency IT Infrastructure:

The existing IT infrastructure will be utilized to support the additional tax type. The additional data storage requirements can be accommodated within the existing capacity plans and needs.

5.2. Describe how this will impact DoIT infrastructure and services:

No impact is expected.

5.3. Describe any new interfaces with other systems:

There are no planned automated interfaces with outside systems.

6. Management

6.1. Describe how the project will be managed. Identify the project manager:

Taxation IT staff will be working diligently to implement recent legislatively mandated changes during July and August. The implementation effort for the Mariju-

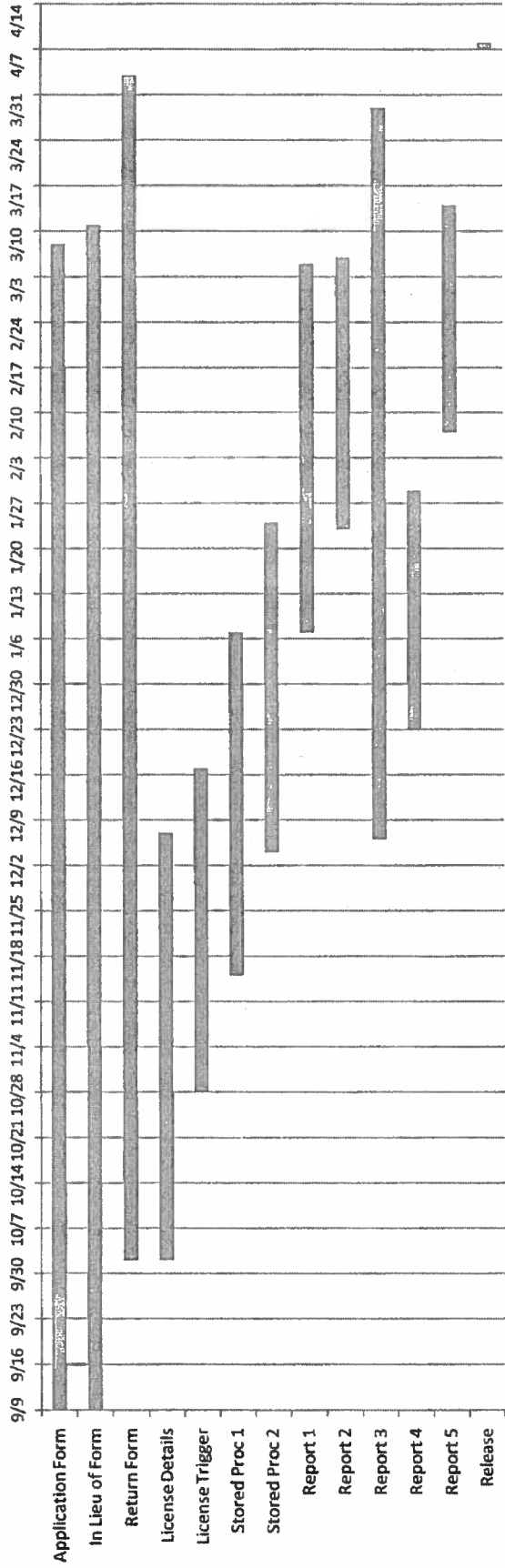
ana Excise Tax will begin in September and conclude with a release to production date of April 7, 2014. First returns of the new Excise Tax are due May 31, 2014.

The Deputy Director over IT will manage the implementation effort. Staffing the project will be 2 IT Professional 4 Team leads and 3 IT Professional 3 Developers within the existing Taxation IT division. These five individuals will be assigned full time to the effort and will be augmented by 4 MSA contract personnel; 3 Programmer Analysts and 1 Business Analyst. 1 MSA Programmer Analyst and 1 Business Analyst will be engaged approximately September 16, 2013. 2 more MSA Programmer Analysts will be engaged approximately October 14, 2013. All MSA personnel will complete their assignments by late March. The MSA personnel will be engaged in backfilling the daily work performed by the 5 Taxation IT Professionals, system integration testing, documentation and project related development as needed to maintain the implementation schedule. The 6 remaining Taxation IT professionals will support daily UTS production, critical fixes and the Nevada Tax website. They will also be completing remaining legislatively mandated changes.

6.2. Describe timeframe for primary deliverables and milestones [Gantt chart]:

The following Gantt chart illustrates the effort and schedule:

Marijuana Excise Tax UTS Implementation 9/9/2013 - 4/7/2014



7. Project Contacts / Authority

Sponsor

Vincent Cherpeski, Deputy Director

Vincent P. Cherpeski 7/16/13

[Name, Title]

Agency Administrator

Sumiko Maser, Deputy Director

[Signature] 7/16/13

[Name, Title]

Department Director

Christopher Nielsen

[Signature] 7/16/13

[Name, Title]

[Other Key Role]

_____ / /

[Name Title]

Note: TWEs should be submitted via email (a MSWord document is preferred). A PDF of the signature page is preferred.

7.1. External Contacts (for dependencies, linked projects, external partners, etc.)

N/A

Section A1: Line Item Detail by GL
 Budget Account: 2361 DEPARTMENT OF TAXATION

Item No	Description	Actual Work Program 2011-2012	Year 1 2013-2014	Year 2 2014-2015
M501	MANDATES			

SB374 provides, in skeleton form, for the taxation of the retail and wholesale sale of medical marijuana. Specifically, this legislation requires the imposition of an excise tax, at the rate of 2 percent of the sales price of marijuana sold by a marijuana cultivation facility to a medical marijuana establishment, a marijuana product manufacturing facility to a medical marijuana establishment, or on the retail sale by a medical marijuana dispensary.

The revenues collected from this excise tax will be distributed as 75 percent to the Distributive School Account and 25 percent to pay for the costs of the Health Division of the Department of Health and Human Services.

This legislation requires the creation new reporting forms and distributions which will necessitate certain modifications to the Unified Tax System (UTS).

This bill became effective upon passage and approval for the purpose of adopting regulations and conducting any preliminary activities necessary to ensure that the provisions of this act are carried out in an orderly fashion and on April 1, 2014 for all other purposes.

Modifications to the Unified Tax System (UTS) would be required to facilitate the necessary management and distribution of taxes required by the bill. Given the Department's current workload, this change would be completed by using a combination of Department staff and Master Service Agreement (MSA) contract personnel. The estimated cost to implement the required changes is \$496,141.00. Please see Appendix A, Technology Waiver for Enhancements, for detailed information.

Additionally, the Department would be required to hire one additional Tax Examiner II, effective January 1, 2014, to provide the necessary overview and management of this program.
 [See Attachment]

REVENUE	2501	APPROPRIATION CONTROL	0	0	529,226	54,136
		TOTAL REVENUES FOR DECISION UNIT M501	0	0	529,226	54,136
EXPENDITURE						
01 PERSONNEL SERVICES						
5100 SALARIES	0	0	0	17,580	36,334	
5200 WORKERS COMPENSATION	0	0	0	506	1,046	
5300 RETIREMENT	0	0	0	2,329	4,814	
5400 PERSONNEL ASSESSMENT	0	0	0	111	222	
5500 GROUP INSURANCE	0	0	0	4,130	8,344	
5700 PAYROLL ASSESSMENT	0	0	0	28	58	
5750 RETIRED EMPLOYEES GROUP INSURANCE	0	0	0	427	981	
5800 UNEMPLOYMENT COMPENSATION	0	0	0	19	44	
5840 MEDICARE	0	0	0	255	527	
		TOTAL FOR CATEGORY 01	0	0	25,385	52,370
04 OPERATING						
7020 OPERATING SUPPLIES	0	0	0	178	53	

FY12 \$17,553/329 FTE = \$53/FTE ANNUALLY
 \$53/12 MONTHS = \$4.44/MONTH

FY14 \$178
 6 MONTHS FOR 1 FTE = 6 x \$4.44 = \$27
 9 MONTHS FOR 2 MSA = (9x2=18) = 18 X \$4.44 = \$80
 8 MONTHS FOR 2 MSA = (8x2=16) = 16 X \$4.44 = \$71

Item No	Description	Actual 2011-2012	Work Program 2012-2013	W04 Year 1 2013-2014	W04 Year 2 2014-2015
7021	12 MONTHS FOR 1 FTE = 12 X \$4.44 = \$53 OPERATING SUPPLIES-A PAPER FY12 \$16,296/329 FTE = \$50/FTE ANNUALLY \$50/12 MONTHS = \$4.17/MONTH	0	0	167	50
	FY14 \$167 6 MONTHS FOR 1 FTE = 6 x \$4.17 = \$25 9 MONTHS FOR 2 MSA = (9x2=18) = 18 X \$4.17 = \$75 8 MONTHS FOR 2 MSA = (8x2=16) = 16 X \$4.17 = \$67				
	FY15 \$50 12 MONTHS FOR 1 FTE = 12 X \$4.17 = \$50				
7050	EMPLOYEE BOND INSURANCE	0	0	3	3
7054	AG TORT CLAIM ASSESSMENT	0	0	120	120
7110	NON-STATE OWNED OFFICE RENT FY14 6 MONTHS OF OFFICE SPACE (60 SQ FT) FOR 1 FTE 6 x 60 = 360 X 1.35 = \$486	0	0	486	972
	FY15 12 MONTHS OF OFFICE SPACE (60 SQ FT) FOR 1 FTE 12 x 60 = 720 X 1.35 = \$972 [See Attachment]				
7255	B & G LEASE ASSESSMENT	0	0	6	11
7292	EITS VOICE MAIL FY14 40 MONTHS 1 FTE X 6 MONTHS = 6 2 MSA X 9 MONTHS = 18 2 MSA X 8 MONTHS = 16	0	0	171	65
	FY15 12 MONTHS 1 FTE X 12 MONTHS = 12				
7295	EITS STATE PHONE LINE FY14 40 MONTHS 1 FTE X 6 MONTHS = 6 2 MSA X 9 MONTHS = 18 2 MSA X 8 MONTHS = 16	0	0	448	163
	FY15 12 MONTHS 1 FTE X 12 MONTHS = 12				
7299	TELEPHONE & DATA WIRING FOR 1 FTE & 4 MSA = 5 X \$450 = \$2,250	0	0	2,250	0
7460	EQUIPMENT PURCHASES < \$1,000 FY14 \$1,325 1 CALCULATOR FOR 1 FTE = \$75 5 TELEPHONE SETS FOR 1 FTE & 4 MSA = 5 X \$250 = \$1,250	0	0	1,325	0
7533	EITS EMAIL SERVICE FY14 40 MONTHS 1 FTE X 6 MONTHS = 6	0	0	249	68

Item No	Description	Actual 2011-2012	Work Program 2012-2013	W04 Year 1 2013-2014	W04 Year 2 2014-2015
	2 MSA X 9 MONTHS = 18				
	2 MSA X 8 MONTHS = 16				
	FY15 12 MONTHS				
	1 FTE X 12 MONTHS = 12				
	TOTAL FOR CATEGORY 04	0	0	5,403	1,505
05	EQUIPMENT				
8241	NEW FURNISHINGS <\$5,000 - A FY14	0	0	4,000	0
	OFFICE FURNITURE FOR 1 FTE				
	TOTAL FOR CATEGORY 05	0	0	4,000	0
26	INFORMATION SERVICES				
7020	OPERATING SUPPLIES TONER & COMPUTER SUPPLIES FY12 \$25,999/329 FTE = \$79/FTE ANNUALLY \$79/12 MONTHS = \$6.58/MONTH FY14 \$262 6 MONTHS FOR 1 FTE = 6 X \$6.58 = \$39 9 MONTHS FOR 2 MSA = (9x2=18) = 18 X \$6.58 = \$118 8 MONTHS FOR 2 MSA = (8x2=16) = 16 X \$6.58 = \$105	0	0	262	79
	FY15 \$79 12 MONTHS FOR 1 FTE = 12 X \$6.58 = \$79				
7060	CONTRACTS FY14 \$460,465 MSA BAN (BUSINESS ANALYST) STARTING SEPTEMBER 2013 1,093 HOURS X \$95/HOUR = \$103,835	0	0	460,465	0
	1 MSA SPA (SENIOR PROGRAM ANALYST) STARTING SEPTEMBER 2013 2 MSA SPA (SENIOR PROGRAM ANALYSTS) STARTING OCTOBER 2013 3,133 HOURS X \$110/HOUR = \$344,630				
	RSI 80 HOURS x \$150 = \$12,000 [See Attachment] EITS INFRASTRUCTURE ASSESSMENT EITS SECURITY ASSESSMENT COMPUTER SOFTWARE <\$5,000 - A FY14 \$26,891 5 SYSTEM SOFTWARE FOR 1 FTE & 4 MSA (MICROSOFT OFFICE SUITE, ANTIVIRUS & ADOBE ACROBAT) 5 X \$462 = \$2,310	0	0	129	104
7554		0	0	102	78
7556		0	0	26,891	0
7771					
	3 DEVELOPER PROGRAM SOFTWARE FOR 3 MSA (SPA) (ORACLE DEVELOPER, TOAD EXPERT, VISUAL STUDIO, & ARAXIS MERGE) 3 X \$8,015 = \$24,045				

Item No	Description	Actual 2011-2012	Work Program 2012-2013	W04 Year 1 2013-2014	W04 Year 2 2014-2015
	4 ULTRA EDIT SOFTWARE FOR 4 MSA				
	4 X \$100 = \$400				
	1 MS VISIO SOFTWARE FOR 1 MSA (BAN)				
	1 X \$136 = \$136				
8371	COMPUTER HARDWARE <\$5,000 - A	0	0	6,589	0
	FY14 \$6,589				
	2 COMPUTER SYSTEMS W/MONITOR FOR 1 FTE & 1 MSA (BAN)				
	2 X \$1,140 = \$2,280				
	3 COMPUTER SYSTEMS W/DUAL MONITORS FOR 3 MSA (SPA)				
	3 x \$1,403 = \$4,209				
	5 SURGE PROTECTORS FOR 1 FTE & 4 MSA				
	5 x \$20 = \$100				
	TOTAL FOR CATEGORY 26	0	0	494,438	261
	TOTAL EXPENDITURES FOR DECISION UNIT M501	0	0	529,226	54,136
	TOTAL REVENUES FOR BUDGET ACCOUNT 2361	0	0	529,226	54,136
	TOTAL EXPENDITURES FOR BUDGET ACCOUNT 2361	0	0	529,226	54,136

Date: 3/21/13 11:31 AM
 Budget Period: 2013-2015 Biennium (FY14-15)
 Budget Account: 2361 DEPARTMENT OF TAXATION

3 MSA SPA
 1 MSA BAN

1 SEPT/2 OCT
 SEPT

Catg	GL	Description	FY 2014	FY 2015	Schedule	FY 2014	FY 2015	Schedule
00	2501	APPROPRIATION CONTROL	32,849	54,136	- None -	496,377	0	- None -
01	5100	SALARIES	17,580	36,334	PAYROLL			
01	5200	WORKERS COMPENSATION	506	1,046	PAYROLL			
01	5300	RETIREMENT	2,329	4,814	PAYROLL			
01	5400	PERSONNEL ASSESSMENT	111	222	PAYROLL			
01	5500	GROUP INSURANCE	4,130	8,344	PAYROLL			
01	5700	PAYROLL ASSESSMENT	28	58	PAYROLL			
01	5750	RETIRED EMPLOYEES GROUP INSURANCE	427	981	PAYROLL			
01	5800	UNEMPLOYMENT COMPENSATION	19	44	PAYROLL			
01	5840	MEDICARE	255	527	PAYROLL			
			25,385	52,370				
04	7020	OPERATING SUPPLIES	27	53	- None -	151	0	- None -
04	7021	OPERATING SUPPLIES-PAPER	25	50	- None -	142	0	- None -
04	7050	EMPLOYEE BOND INSURANCE	3	3	PAYROLL			
04	7054	AG TORT CLAIM ASSESSMENT	120	120	PAYROLL			
04	7110	NON-STATE OWNED OFFICE RENT	486	972	BLDG RENT NON-BLDGS AND GRDS			
04	7255	B & G LEASE ASSESSMENT	6	11	BLDG RENT NON-BLDGS AND GRDS			
04	7292	EITS VOICE MAIL	26	65	EITS	145	0	EITS
04	7295	EITS STATE PHONE LINE	67	163	EITS	381	0	EITS
04	7299	TELEPHONE & DATA WIRING	450	0	- None -	1,800	0	- None -
04	7480	EQUIPMENT PURCHASES < \$1,000	325	0	EQUIPMENT	1,000	0	EQUIPMENT
04	7533	EITS EMAIL SERVICE	37	68	EITS	212	0	EITS
			1,572	1,505		3,831	0	
			4,000	0	EQUIPMENT			
05	8241	NEW FURNISHINGS <\$5,000 - A						
26	7020	OPERATING SUPPLIES	39	79	- None -	223	0	- None -
						448,465		
						12,000		
26	7554	EITS INFRASTRUCTURE ASSESSMENT	129	104	PAYROLL			
26	7556	EITS SECURITY ASSESSMENT	102	78	PAYROLL			
26	7771	COMPUTER SOFTWARE <\$5,000 - A	462	0	EQUIPMENT	28,429	0	EQUIPMENT
26	8371	COMPUTER HARDWARE <\$5,000 - A	1,160	0	EQUIPMENT	5,429	0	EQUIPMENT
			1,892	261		492,546		
			32,849	54,136		496,377	0	

=one-time costs
Future Biennia
108,272

Personnel and associated position costs for a 1.0 FTE Tax Examiner 2 in Carson City, effective 01/01/14.



BDR 15-1069
 Nevada Department of Taxation
 March 25, 2013

Budget Account: 2361 DEPARTMENT OF TAXATION
 Department: 13 DEPARTMENT OF TAXATION

Catg	Description	FY 2014 Est	FY 2015 Est	Future Biennia
01	Personnel Costs - Tax Examiner	\$ 25,385.00	\$ 52,370.00	\$ 104,740.00
04	Operating Costs - Tax Examiner	\$ 1,572.00	\$ 1,505.00	\$ 3,010.00
04	Operating Costs for Programming Changes	\$3,831.00	\$-	\$-
05	Equipment Costs - Tax Examiner	\$ 4,000.00	\$ -	\$ -
26	Information Services - Operating Costs	\$ 223.00	\$ -	\$ -
26	Information Services - Programming Changes	\$ 460,465.00	\$ -	\$ -
26	Information Services - Hardware & Software Costs	\$ 31,858.00	\$ -	\$ -
26	Information Services - Tax Examiner	\$ 1,892.00	\$ 261.00	\$ 522.00
Total		\$ 529,226.00	\$ 54,136.00	\$ 108,272.00

Tax Examiner	\$ 32,849.00
Programming Changes	<u>\$496,377.00</u>
	<u><u>\$ 529,226.00</u></u>

The estimate for the IT work to implement SB374 is based on the following assumptions:

- 1) Effective date is April 1, 2014 - system will be designed, built and implemented over 7-8 months
- 2) New application form with various license types (similar to LIQ Application)
- 3) Department rule making is sufficiently complete to start design in September
- 4) No OLT filing
- 5) No lockbox support
- 6) The estimated work to design, build and test 4 forms, 6 stored procedures, 1 COBOL module, 2 Oracle Packages, 1 License Detail form and associated Oracle Trigger, 2 complex stored procedures and 5 reports is reasonably accurate
- 7) Overtime for State staff will be minimized - MSA contractors will be utilized to backfill work normally done by the 5 IT staff, document, build and execute test scripts for System Integration Testing and build some modules as needed
- 8) Labor costs for UAT is not included as this is non-IT for the most part

			<u>RATE</u>	<u>QTY</u>	<u>NEBS</u>
MSA PA	3,133 @ \$110	\$344,630	3,133	110	344,630
MSA BA	1,093 @ \$95	\$103,835	1,093	95	103,835
RSI	80 @ \$150	\$12,000	80	150	12,000
	=====	=====			<u>460,465</u>
Total	4,306 hours	\$449,535			

Equipment and workspace for 4 MSA contractors – 1 PA and 1 BA September 16, 2013 through March 2014, 2 PA October 14, 2013 through March 2014.

		<u>RATE</u>	<u>QTY</u>	<u>NEBS</u>
3 Developer Workstations and software @ 2,200	\$6,600	1,885	3	5,655
3 Sets of Developer Software @ 7,494	\$22,482	8,115	3	24,345
1 Standard Workstation and software @ 2,200	\$2,200	1,622	1	1,622
1 Set MS Visio and Ultra Edit for BA		236	1	236
				<u>31,858</u>

34 months of email and miscellaneous operating supplies for MSA contract personnel

	<u>RATE</u>	<u>QTY</u>	<u>AMT</u>	<u>NEBS</u>
Email	6.22420	34	211.62	212
Voice Mail	4.27712	34	145.42	145
Phone Line	11.19824	34	380.74	381
Phone	250.00	4	1,000.00	1,000
Operating Supplies	4.44	34	150.96	151
Paper	4.17	34	141.78	142
Toner	6.58	34	223.72	223
Telephone & Data Wiring	450.00	4	1,800.00	1,800
				<u>4,054</u>
				<u>496,377</u>

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: August 5, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Melanie Young, Budget Analyst
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.

ATTORNEY GENERAL – CRIME PREVENTION

Agenda Item Write-up:

Pursuant to NRS 353.268, Office of the Attorney General – Crime Prevention, requests an allocation of \$3,008 from the Interim Finance Committee Contingency Fund to cover a revenue shortfall of License Plate Charges.

Additional Information:

The Office of the Attorney General requests an allocation from the Interim Finance Committee Contingency Fund in Budget Account 1036 Crime Prevention due to a revenue shortfall from License Plate Charges, this account is funded primarily with general fund appropriations.

Statutory Authority:

NRS 353.268

REVIEWED: SB

ACTION ITEM: _____



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL
100 North Carson Street
Carson City, Nevada 89701-4717

CATHERINE CORTEZ MASTO
Attorney General

KEITH G. MUNRO
Assistant Attorney General

GREGORY M. SMITH
Chief of Staff

MEMORANDUM

DATE: August 5, 2013
TO: Melanie B. Young, Budget Analyst IV, Budget Division
FROM: Debra Crowley, CFO, Office of the Attorney General
SUBJECT: Request for funds out of the Interim Finance Committee Contingency Fund

=====

The Office of the Attorney General would like to request \$3,008 out of the Interim Finance Committee Contingency Fund due to a revenue shortfall. This budget is funded with both General Fund and License Plate Fees. The Legislative authority for License Plate Fees was \$46,122 but the actual receipts were \$41,455.94 leaving a shortfall of \$4,666.04. The office of the Attorney General stayed within the legislative authority for expenditures without this revenue we will not be able to close our budget for SFY13. A copy of the closing fund map prior to these additional revenues is attached for reference.

[Main Menu](#) > [Budget Status Report Input](#) > Summary Budget Status Report

REPORT DATE AS OF: 08/02/2013

PROC ID: BSR_GEN_BBLs_REPORT

**STATE OF NEVADA
Office of the State Controller**

Summary Budget Status Report

Fiscal Year: 2013

Fund: 101 GENERAL FUND

Agency: 030 ATTORNEY GENERAL'S OFFICE

Budget Account: 1036 CRIME PREVENTION

Organization: 0000 ATTORNEY GENERAL'S OFFICE

	YTD Actual	Work Program	Difference
Total Receipts/Funding	257,363.94	271,335.00	-13,971.06
Total Expenditures	259,436.57		
Total Encumbrances	.00		
Total Pre-encumbrances	.00		
Total Obligations	259,436.57	271,335.00	11,898.43
Realized Funding Available	-2,072.63		

[Get Information About Receipts/Funding](#)

[Get Information About Obligations](#)

[Main Menu](#) > [Budget Status Report Input](#) > [Budget Account List](#) > [Summary Budget Status Report](#) > **Receipts/Funding**

REPORT DATE AS OF: 08/02/2013

PROC ID: BSR_REC_FUND_SUM

**STATE OF NEVADA
Office of the State Controller**

Budget Status Report - Receipts/Funding

Fiscal Year: 2013

Fund: 101 GENERAL FUND

Agency: 030 ATTORNEY GENERAL'S OFFICE

Budget Account: 1036 CRIME PREVENTION

Organization: 0000 ATTORNEY GENERAL'S OFFICE

	YTD Actual	Work Program	Difference
Total Receipts/Funding	257,363.94	271,335.00	-13,971.06

Code	Description	YTD Actual	Work Program	Difference
<u>42</u>	APPROPRIATIONS	214,973.00	214,973.00	.00
<u>47</u>	BEGINNING CASH	240.00	240.00	.00
<u>3893</u>	LICENSE PLATE CHARGE	41,455.94	46,122.00	-4,666.06
<u>4209</u>	CIVIL PENALTIES OLDER VICTIMS	695.00	10,000.00	-9,305.00

[Return to Selection Screen](#) [Download the Report](#)

Brian Sandoval
Governor




Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: August 7, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Nikki Hovden, Budget Analyst 
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.

DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH – SOUTHERN NEVADA ADULT MENTAL HEALTH SERVICES

Agenda Item Write-up:

Pursuant to NRS 353.268, the Division of Public and Behavioral Health, requests an allocation of \$3,093,226 from the Interim Finance Committee Contingency Fund to renovate all of building #3 at Southern Nevada Adult Mental Health Services as shown in the revised CIP 13-C08.

Additional Information:

CIP 13-C08 for \$2,070,798 was approved during 2013 Legislative Session to renovate the first floor of building #3 at Southern Nevada Adult Mental Health Services. Due to circumstances discussed at the August 6, 2013 Special Interim Finance Committee meeting, CIP-C08 has been revised to renovate of all building #3 (first and second floor) with a projected cost of \$5,164,024. This request is for the difference between what was originally approved and the revisions.

Statutory Authority:

NRS 353.268

REVIEWED: _____
ACTION ITEM: _____

STATE OF NEVADA

BRIAN SANDOVAL
Governor

MICHAEL J. WILLDEN
Director



RICHARD WHITLEY, MS
Administrator

TRACEY D. GREEN, MD
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH


4150 Technology Way, Suite 300


Carson City, Nevada 89706

Telephone: (775) 684-4200 · Fax: (775) 684-4211

August 7, 2013

To: Jeff Mohlenkamp, Director
Department of Administration

Through:  Mike Willden, Director
Department of Health and Human Services

From: Richard Whitley, Administrator 
Division of Public and Behavioral Health

Re: Board of Examiners Meeting

The Division of Public and Behavioral Health would like to request to be scheduled at the next Board of Examiners meeting to request \$3,093,226 from the contingency fund. Please see attached CIP 13-C08 (\$2,070,798) which was approved to renovate the first floor of building #3 at Southern Nevada Adult Mental Health Services (SNAMHS) and the revised CIP 13-C08 (\$5,164,024) which would renovate all of building #3 (first and second floor) at SNAMHS. Thank you for your consideration of this request.

State Public Works Board

Project Cost Estimate

May 20, 2013

Project No: 3081 13-C08 Initial	Funding Summary	
Title: Renovate First Floor Building # 3, SNAMHS	State:	1,035,399
Description: Design and construct renovations to a portion of the first floor of Building # 3 a psychiatric medical housing unit.	Agency:	0
	Federal:	0
Department: Department of Health & Human Services	Other:	1,035,399
Division: MH/DS	Total:	2,070,798
Agency: SNAMHS Project Mgr: DMD		

Project Group: Labs, Medical or Museums	Building Area:	37,806	gsf
Project Type: Rehab	Months of Inflation:	12	
Project Site: Local	Annual Inflation Rate:	3.00%	
Location: Las Vegas	Total Inflation:	3.00%	

Project No.	C08	2012	2014
Professional Services			
A/E Design & Supervision		166,850	171,925
Surveys		0	0
Soils Analysis		0	0
Materials Testing Services		2,500	2,576
Structural Plan Check		0	0
Mechanical Plan Check		3,319	3,369
Electrical Plan Check		2,374	2,410
Civil Plan Check		0	0
ADA Plan Check		0	0
Fire Marshal Plan Check		3,317	5,051
Code Compliance Plan Check		4,352	4,418
Constructability Plan Check		0	0
CMAR Pre-Construction Service		13,190	13,591
PWB Project Mgmt & Inspection		136,723	136,723
3rd Party Commissioning		0	0
FF&E Design Fee		0	0
State Health Fee		10,000	10,304
Scoping Existing Sewer Lines		15,000	15,456
Sub Total		367,626	366,823
Building Costs			
Construction		1,318,989	1,358,569
Construction Contingency		197,848	203,783
Green Building Equivalence		0	0
Utility/Off-Site Costs		0	0
Utility Connection Fees		0	0
Data/Telecom Wiring		0	0
Furnishings and Equipment		75,000	77,281
Roof Maint. Agreement		0	0
Local Government Requirements		0	0
Hazardous Material Abatement		56,000	57,703
Other		0	0
Sub Total		1,647,837	1,697,327
Miscellaneous			
Advertising		1,153	1,188
Printing		5,767	5,942
Bond Sale Costs		503	518
Agency Moving Costs		0	0
Land Purchase		0	0
Other		0	0
Sub Total		7,423	7,649
Total Project Cost		2,012,886	2,070,798

REMARKS

All line item costs are estimated with the best information available in 2012. It is expected that the actual costs incurred in the 2013 to 2014 time frame will be somewhat different than the 2012 estimate. Thus, during project implementation, funds must be shifted from one category to another within the project budget by the SPWB staff. However, the total project budget cannot be exceeded unless additional funds are provided.

Construction Cost Detail:

1. Architectural	610,439
2. Mechanical	178,000
3. Plumbing	393,600
4. Fire Alarm & Sprinklers	32,500
5. Electrical	104,459
Total	1,318,989

State Public Works Division		2013 CIP Project Cost Estimate		18:03 7/22/2013		
Project Index Number:	13-C08 - Revise	Title:	Renovation Building # 3 SNAMHS, First & Second Floor			
Agency:	SNAMHS	Description:	Design and construct renovations to Building # 3 a 70 room patient psychiatric medical housing unit			
Division:	MH/DS	Location:	Las Vegas			
Department:	DHHS					
Project Manager:	DMD					
Project Group:	Lebs, Medical or Museums	Professional Services	Plan Checking	Other Requirements		
Project Type:	Rehab	<input type="checkbox"/> Formal AE Selection	<input type="checkbox"/> Structural	<input checked="" type="checkbox"/> FF&E		
Location Type:	Local	<input checked="" type="checkbox"/> AE Contracting	<input checked="" type="checkbox"/> Mechanical	<input type="checkbox"/> Data/Telecom Wiring & Equip		
		<input checked="" type="checkbox"/> SD's	<input checked="" type="checkbox"/> Electrical	<input checked="" type="checkbox"/> 3rd Party Commissioning		
Building Area :	37,808 sqft	<input checked="" type="checkbox"/> DD's	<input type="checkbox"/> Civil	<input type="checkbox"/> Green Building Equivalence		
Months to Construction :	12	<input checked="" type="checkbox"/> CA and Inspection	<input checked="" type="checkbox"/> ADA	<input type="checkbox"/> Roofing Maintenance		
Annual Inflation Rate (Construction):	3.00 %	<input type="checkbox"/> Adjustments Made by PWA	<input checked="" type="checkbox"/> Fire	<input type="checkbox"/> Moving Costs		
Total Inflation (Construction):	3.00 %		<input checked="" type="checkbox"/> Code	<input checked="" type="checkbox"/> Bond Sale Costs		
Enter Estimated Costs Here	Amount		<input checked="" type="checkbox"/> Constructability	<input checked="" type="checkbox"/> Materials Testing		
Construction:	3,560,197		<input type="checkbox"/> Roofing	Delivery Method		
Survey:	0		<input type="checkbox"/> Funding Templates	<input type="checkbox"/> Design-Bid-Build		
Soils Analysis:	0		<input type="checkbox"/> Military 75-25	<input type="checkbox"/> Design-Build		
Utility/Off-Site:	0		<input type="checkbox"/> Military 50-50	<input type="checkbox"/> CMAR		
Utility Design/Connection Fees:	0		<input type="checkbox"/> Military 100%			
Local Government Requirements:	0		<input type="checkbox"/> Other 100%			
Hazardous Materials Abatement:	52,000		<input checked="" type="checkbox"/> State 100%			
Blue values are protected.						
Justify and request approval to edit them from the Chief of Planning if necessary.						
Red values are calculated. Override with caution.						
Professional Services	2012	2013	%State	%Const	REMARKS	
A/E Design & Supervision	395,773	407,811	100%	11.1%	All line item costs are estimated with the best information available in 2012. It is expected that the actual costs incurred in the 2013 to 2014 time frame will be somewhat different than the 2012 estimate. Thus, during project implementation, funds must be shifted from one category to another within the project budget by the SPWB staff. However, the total project budget cannot be exceeded unless additional funds are provided.	
A/E Contingency	0	0	100%	0.0%		
Surveys	0	0	100%	0.0%		
Soils Analysis	0	0	100%	0.0%		
Materials Testing Services	2,500	2,576	100%	0.1%		
Structural Plan Check	0	0	100%	0.0%		
Mechanical Plan Check	5,560	5,844	100%	0.2%		
Electrical Plan Check	4,138	4,198	100%	0.1%		
Civil Plan Check	0	0	100%	0.0%		
ADA Plan Check	3,384	3,435	100%	0.1%		
Fire Marshal Plan Check	7,015	10,682	100%	0.3%		
Code Compliance Plan Check	9,202	9,423	100%	0.3%		
Constructability Plan Check	0	0	100%	0.0%		
CMAR Pre-Construction Services	35,602	36,685	100%	1.0%		
Project Management & Inspection	268,002	268,002	100%	7.3%		
3rd Party Commissioning	30,000	30,812	100%	0.8%		
FF&E Design Fee	0	0	100%	0.0%		
Scoping existing sewer lines	15,000	15,456	100%	0.4%		
	0	0	100%	0.0%		
	0	0	100%	0.0%		
Total Professional Services	778,255	794,824				
Construction Costs						
Construction	3,560,197	3,687,003	100%	100.0%		
Construction Contingency	534,030	550,050	100%	15.0%		
Green Building Equivalence	0	0	100%	0.0%		
Utility/Off-Site Costs	0	0	100%	0.0%		
Utility Design/Connection Fees	0	0	100%	0.0%		
Data/Telecom Wiring & Equip	0	0	100%	0.0%		
Furnishings and Equipment	75,000	77,281	100%	2.1%		
Roof Maintenance Agreement	0	0	100%	0.0%		
Local Government Requirements	0	0	100%	0.0%		
Hazardous Materials Abatement	52,000	53,582	100%	1.5%		
	0	0	100%	0.0%		
	0	0	100%	0.0%		
Total Construction Costs	4,221,227	4,347,918				
Miscellaneous						
Advertising	1,567	1,615	100%	0.0%		
Printing	7,836	8,074	100%	0.2%		
Bond Sale Costs	1,252	1,290	100%	0.0%		
Agency Moving Costs	0	0	100%	0.0%		
Land Purchase	0	0	100%	0.0%		
Purchasing Assessment	0	0	100%	0.0%		
State Health Fee	10,000	10,304	100%	0.3%		
Total Miscellaneous	20,655	21,283		0.6%		
Total Project Cost	5,016,138	5,184,024				

Brian Sandoval
Governor




Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 2, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Julie Strandberg, Budget Analyst 
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.

DEPARTMENT OF PUBLIC SAFETY – INVESTIGATION DIVISION

Agenda Item Write-up:

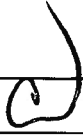
Pursuant to NRS 334.010 the Investigation Division is requesting the authority to purchase three replacement vehicles for a total of \$68,292

Additional Information:

The Legislatively approved budget authorized \$68,292 in decision unit E711 to replace fleet vehicles which have exceeded the 105,000 mile threshold for sedans and 125,000 for trucks and sports utility vehicles in fiscal year 2014.

Statutory Authority:

The 2013 Legislative Session approved decision unit E711 which authorized authority to replace fleet vehicles.

REVIEWED: 
ACTION ITEM: _____

Brian Sandoval
Governor



James M. Wright
Interim Director

Jackie Muth
Deputy Director

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

RECEIVED

JUL 02 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Memorandum

DATE: July 2, 2013

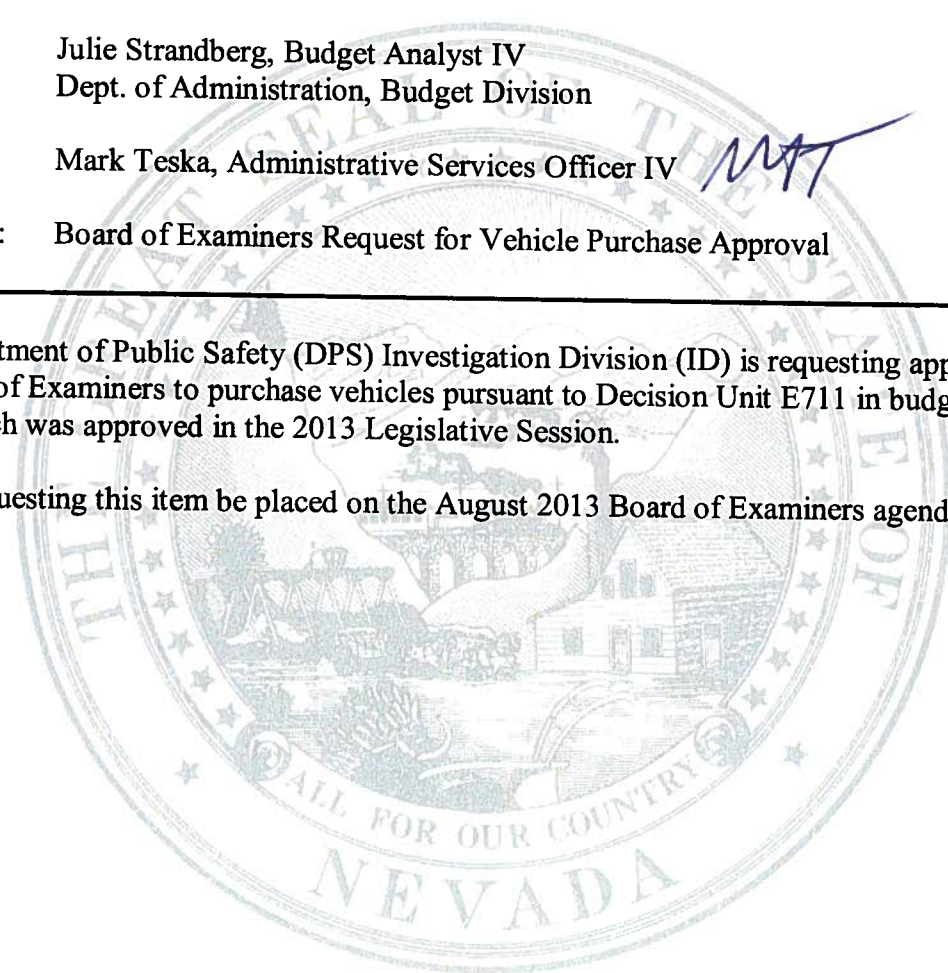
TO: Julie Strandberg, Budget Analyst IV
Dept. of Administration, Budget Division

FROM: Mark Teska, Administrative Services Officer IV *MT*

SUBJECT: Board of Examiners Request for Vehicle Purchase Approval

The Department of Public Safety (DPS) Investigation Division (ID) is requesting approval from the Board of Examiners to purchase vehicles pursuant to Decision Unit E711 in budget account 3743, which was approved in the 2013 Legislative Session.

DPS is requesting this item be placed on the August 2013 Board of Examiners agenda.



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

Agency Name: DPS-ID	Budget Account #: 3743
Contact Name: Ginny Clementi	Telephone Number: (775) 684-7405
<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: <u>3</u> Amount of the request: <u>\$68,292</u></p> <p>Is the requested vehicle(s) new or used: <u>New 2013</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: 3 AWD Station Wagons. (Subaru Outbacks)</p> <p>Mission of the requested vehicle(s): The mission of the 3 Subaru Outback is to equip our Narcotics Enforcement officers with safe, all terrain undercover vehicles.</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</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"/> <u>3</u> 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>No, law enforcement vehicles are exempt.</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:</p> <p>Vehicle #1 Model Year: Dodge Caravan 2001 Odometer Reading: 101,110 Type of Vehicle: Van</p> <hr/> <p>Vehicle #2 Model Year: Jeep Grand Cherokee 2004 Odometer Reading: 101,539 Type of Vehicle: SUV</p> <p><i>Please attach an additional sheet if necessary</i></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.</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p> <p>The vehicles being excessed are high mileage and require expensive repairs. The new vehicles are AWD which is needed for our rural offices.</p>
<p>APPOINTING AUTHORITY APPROVAL:</p> <p align="center"><i>Pete J. Conroy</i> <u>Chief</u> <u>6-26-13</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>_____ Board of Examiners Date</p>	

Vehicle #3 Model Year: Chevrolet Trailblazer 2006
Odometer Reading: 102,583
Type of Vehicle: SUV

Section A1: Line Item Detail by GL
Budget Account: 3743 DPS - DIVISION OF INVESTIGATIONS

Item No	Description	Actual 2011-2012	Work Program 2012-2013	L01 Year 1 2013-2014	L01 Year 2 2014-2015
E711	EQUIPMENT REPLACEMENT [See Attachment]				
REVENUE					
2501	APPROPRIATION CONTROL	0	0	57,969	59,506
2507	HIGHWAY FUND AUTHORIZATION	0	0	19,323	19,835
	TOTAL REVENUES FOR DECISION UNIT E711	0	0	77,292	79,341
EXPENDITURE					
05	EQUIPMENT				
8270	SPECIAL EQUIPMENT >\$5,000	0	0	9,000	9,000
8360	AUTOMOBILES - NEW	0	0	68,292	70,341
	TOTAL FOR CATEGORY 05	0	0	77,292	79,341
	TOTAL EXPENDITURES FOR DECISION UNIT E711	0	0	77,292	79,341
	TOTAL REVENUES FOR BUDGET ACCOUNT 3743	0	0	77,292	79,341
	TOTAL EXPENDITURES FOR BUDGET ACCOUNT 3743	0	0	77,292	79,341

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 10, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Jim Rodriguez, Budget Analyst IV
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

Department of Conservation and Natural Resources – Division of State Parks

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Division of State Parks, requests approval to purchase six new vehicles in FY 2014 as approved in the agency's 2013-15 legislatively approved budget and through S.B 468 as one-shot funding.

Additional Information:

The following two vehicles were approved by the legislature in the agency's 2013-15 budget and one is being requested at this time for the Reno/Carson City location:

DU	Catg	GL	Equipment Type	Yr 1 Count	Authorized	Actual Purchase Amt	Balance Remaining
2013-15 Leg Approved Budget							
E710	05	8310	VEHICLE-FLEET-LV-2.9 TRUCK 4WD 1/2 TON;EXT CAB; S BED	1	\$ 23,419		\$ 23,419
E710	05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	1	\$ 27,657	\$ 24,846	\$ 2,811
Total Funding Budgeted					\$ 51,076	\$ 24,846	\$ 26,230

The following six vehicles were approved for purchase by the division through 2013 S.B. 468 as one-shot funding. All are being requested at this time except for the one designated for the Valley of Fire State Park (for a total of five).

2013 SB 467 One-Shot Authorized Vehicles				
Northern Region	VEHICLE-FLEET-RNO/CC-2 1 TRUCK 2WD STD CAB, SHORT BED	1	\$ 14,966	\$ 16,777 \$ (1,811)
Berlin	VEHICLE-FLEET-RNO/CC-2 10 TRUCK 4WD 1/2T, EXT CB, L BD	1	\$ 27,657	\$ 26,544 \$ 1,113
Wild Horse	VEHICLE-FLEET-RNO/CC-2 13 4WD TRUCK 3/4 T, CRW CAB, S BD	1	\$ 25,194	\$ 25,150 \$ 44
Cave Lake	VEHICLE-FLEET-RNO/CC-2 18 4WD TRUCK 1T, STD CAB, L BED, SRW	1	\$ 26,301	\$ 25,150 \$ 1,151
Northern Region	VEHICLE-FLEET-RNO/CC-2 22 4WD TRUCK 1T, STD CAB, L BED, DRW	1	\$ 23,366	\$ 26,544 \$ (3,178)
Valley of Fire	VEHICLE-FLEET-RNO/CC-2 6 TRUCK 2WD 1/2 T STD CAB, L BD	1	\$ 18,033	\$ 18,033
Total One-Shot Funding			\$ 135,517	\$ 120,166 \$ 15,351

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

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

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
DCNR - Division of State Parks	6	\$145,013
Total:	6	\$145,013

RECEIVED

JUL 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

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

Agency Name: Nevada State Parks	Budget Account #: 4162
Contact Name: Robert Mergell	Telephone Number: (775)867-3001

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:

Number of vehicles requested: 1 **Amount of the request:** \$16,777.25

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

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:

Pick up

Mission of the requested vehicle(s):

Routine services and maintenance of State Park facilities *Northern Region*

Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: one shot - SB-467 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):

1 Addition(s) Replacement(s)

Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.
the agency need is for a pick up and there are no pick up options that comply with the "Smart way" or Smart way Elite" requirements.

Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <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. <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
---	---

APPOINTING AUTHORITY APPROVAL:

David K. Mann Admin 7/10/13
 Agency Appointing Authority Title Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

Board of Examiners _____ Date _____

RECEIVED

JUL 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

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

Agency Name: Nevada State Parks		Budget Account #: 4162	
Contact Name: Robert Mergell		Telephone Number: (775)867-3001	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:			
Number of vehicles requested: 2		Amount of the request: \$50,300.50	
Is the requested vehicle(s) new or used: New			
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Pick up (2) F-350 @ 25,150.25 each			
Mission of the requested vehicle(s): Routine services and maintenance of State Park facilities Wild Horse & Cave Lake			
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the decision unit number: one shot - SB-467 If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 2 Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. the agency need is for a pick up and there are no pick up options that comply with the "Smart way" or Smart way Elite" requirements.			
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)		Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced.	
Current Vehicle Information: Vehicle #1 Model Year: 1997 Odometer Reading: 95,000 Type of Vehicle: Ford pick up		yes	
Vehicle #2 Model Year: 1997 Odometer Reading: 180,000 Type of Vehicle: Ford pick up		If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. N/A	
<i>Please attach an additional sheet if necessary</i>			
APPOINTING AUTHORITY APPROVAL:			
<i>David K. Mon</i> Agency Appointing Authority		<i>Admin.</i> Title	<i>7/10/13</i> Date
BOARD OF EXAMINERS' APPROVAL:			
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase			
Board of Examiners		Date	

RECEIVED

JUL 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

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

Agency Name: Nevada State Parks Budget Account #: 4162

Contact Name: Robert Mergell Telephone Number: (775)867-3001

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:

Number of vehicles requested: 2 Amount of the request: \$53,088.50

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

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:

Pick up F-250 26,544.25 each.
F-250

Mission of the requested vehicle(s):

Routine services and maintenance of State Park facilities Labonton & Berlin Ichlgasser

Were funds legislatively approved for the request? If yes, please provide the decision unit number:

Yes No

one shot - SB-467
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):

Addition(s) 2 Replacement(s)

Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.

the agency need is for a pick up and there are no pick up options that comply with the "Smart way" or Smart way Elite" requirements.

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: 1992
Odometer Reading: 140,000
Type of Vehicle: Ford pick up

Vehicle #2 Model Year: 1996
Odometer Reading: 126,000
Type of Vehicle: GMC pick up

Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced.

yes

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

N/A

Please attach an additional sheet if necessary

APPOINTING AUTHORITY APPROVAL:

David K. Moore Admin 7/10/13
Agency Appointing Authority Title Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

Board of Examiners Date

RECEIVED

JUL 10 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

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

Agency Name: Nevada State Parks		Budget Account #: 4162	
Contact Name: Robert Mergell		Telephone Number: (775)867-3001	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:			
Number of vehicles requested: 1		Amount of the request: \$24,846.25	
Is the requested vehicle(s) new or used: New			
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Pick up			
Mission of the requested vehicle(s): Routine services and maintenance of State Park facilities Northern Region			
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the decision unit number: Cat 05 - E710 2013-15 Leg Approved Budget If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. the agency need is for a pick up and there are no pick up options that comply with the "Smart way" or Smart way Elite" requirements.			
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: 1998 Odometer Reading: 160,000 Type of Vehicle: GMC pick up Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:		Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. yes If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade. N/A	
<i>Please attach an additional sheet if necessary</i>			
APPOINTING AUTHORITY APPROVAL: David K. Morn Admin. 7/10/13 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



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 11, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Sherri Barkdull, Budget Analyst IV *SKB*
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.

DEPARTMENT OF WILDLIFE – OPERATIONS

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Department of Wildlife-Operations is requesting the authority to purchase three (3) replacement vehicles for a total of \$97,468.

Additional Information:

The NDOW-Operations seeks approval to purchase three replacement vehicles. These vehicle purchases were approved during the 2013 Legislative Session in decision unit E711.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: <i>SKB</i>
ACTION ITEM: _____

State of Nevada
Equipment Schedule

7/8/13 11:25 AM

Budget Period: 2013-2015 Biennium (FY14-15)
Budget Account: 4461 WILDLIFE - OPERATIONS
Version: L01 LEGISLATIVELY APPROVED
Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type	Priority	Yr 1 Count	Yr 1 Rate	Yr 1 Total	Yr 2 Count	Yr 2 Rate	Yr 2 Total
E711	05	8310	VEHICLE-FLEET-LV-5.2 SPORT UTILITY VEHICLE:4X4;4 DOOR;4-6 PASS	5	0	24,766.00	0	1	25,509.00	25,509
E711	05	8310	VEHICLE-FLEET-RNO/CC-5.3 SPORT UTILITY VEH:1/2 TON;4X4;6 DOOR; 5-6 PASS	3	1	27,748.00	27,748	0	28,581.00	0
E711	05	8310	VEHICLE-FLEET-RNO/CC-5.2 SPORT UTILITY VEHICLE:4X4;4 DOOR;4-6 PASS	1	1	24,448.00	24,448	0	25,182.00	0
E712	26	8371	HARDWARE - DESKTOP PC W/ MONITOR, 5YR WAR MED COST	35	27	1,013.00	27,351	25	1,013.00	25,325
E712	26	8371	HARDWARE-LAPTOP PC WITH OPERATING SYSTEM	40	20	1,593.00	31,860	26	1,593.00	41,418
E712	26	8371	HARDWARE-LAPTOP DOCKING STATION	45	16	352.00	5,632	25	352.00	8,800
E712	26	8370	HARDWARE-SERVER SITE FILE PRINT / MEDIUM AGENCY	50	3	8,970.00	26,910	3	8,970.00	26,910
E712	26	8370	HARDWARE-CISCO 2911 ROUTER 15-65 WORKSTATIONS	55	0	6,555.00	0	1	6,555.00	6,555
E712	26	8371	HARDWARE-SURGE PROTECTOR W/ BATTERY BACKUP	70	6	60.00	360	6	60.00	360
E712	26	8371	HARDWARE MAINTENANCE-PER YR CISCO ETHERN 24 PRT SW	60	5	190.00	950	5	190.00	950
E712	26	8371	HARDWARE-CISCO ETHERNET 24 PORT SWITCH 10/100/1000	65	5	3,675.00	18,375	5	3,675.00	18,375
B000	07	7460	EQUIPMENT PURCHASES < \$1,000	6	1	540.00	540	1	540.00	540
B000	10	7460	EQUIPMENT PURCHASES < \$1,000	11	1	5,763.00	5,763	1	5,763.00	5,763
B000	10	7465	EQUIP > \$1,000 LESS THAN \$5,000	26	1	374.00	374	1	374.00	374
B000	13	7460	EQUIPMENT PURCHASES < \$1,000	80	1	3,428.00	3,428	1	3,428.00	3,428
B000	13	7465	EQUIP > \$1,000 LESS THAN \$5,000	85	1	5,125.00	5,125	1	5,125.00	5,125
B000	14	7460	EQUIPMENT PURCHASES < \$1,000	16	1	1,200.00	1,200	1	1,200.00	1,200
B000	14	7465	EQUIP > \$1,000 LESS THAN \$5,000	100	1	1,135.00	1,135	1	1,135.00	1,135
B000	15	7465	EQUIP > \$1,000 LESS THAN \$5,000	31	1	829.00	829	1	829.00	829
B000	15	7460	EQUIPMENT PURCHASES < \$1,000	21	1	994.00	994	1	994.00	994
B000	26	7460	EQUIPMENT PURCHASES < \$1,000	90	1	1,870.00	1,870	1	1,870.00	1,870
B000	26	7465	EQUIP > \$1,000 LESS THAN \$5,000	95	1	646.00	646	1	646.00	646
E711	05	8310	VEHICLE 3.6C CAB, CHASSIS, OPTIONS & FLATBED	4	1	45,272.00	45,272	0	0.00	0
E712	26	7460	NETWORKING HARDWARE, CABLING, RACKING, CONNECTORS	76	1	3,317.00	3,317	1	2,827.00	2,827
E713	05	8291	RENO VALLEY RD TELEPHONE REPLACEMENT	7	1	63,402.00	63,402	0	0.00	0
E713	05	8291	RENO KIETZEK RD TELEPHONE SYSTEM REPLACEMENT	12	1	38,221.00	38,221	0	0.00	0
E720	05	8270	TRUCK BODY UTILITY BOX AND ROOF RACK	105	1	12,253.00	12,253	0	0.00	0

2

State of Nevada
BAV Line Items

7/8/13 11:33 AM

Budget Period: 2013-2015 Biennium (FY14-15)
Budget Account: 4461 WILDLIFE - OPERATIONS
Version: L01 LEGISLATIVELY APPROVED
Department: 72 DEPARTMENT OF WILDLIFE
Division: 702 DEPARTMENT OF WILDLIFE
Function: 055 INFRASTRUCTURE
Sub-Function: 030 DEPARTMENT OF WILDLIFE
Fund: 101 GENERAL FUND
Assigned Analyst: kolbe

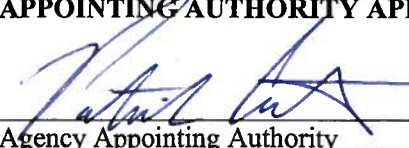
DU	Grp	Catg	GL	Description	Actual	Work Pgm	Year 1	Year 2 Schedule
E711	000	00	4230	COST ALLOCATION INDIRECT	0	0	52,196	25,509 - None -
E711	000	00	4760	TRANS UNRESTRICTED REVENUE	0	0	45,272	0 - None -
E711	000	05	8310	PICK-UPS, VANS - NEW	0	0	97,468	25,509 EQUIPMENT

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

RECEIVED

JUL 09 2013

**DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION**


Agency Name: Department of Wildlife	Budget Account #: 4461	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: 1 Amount of the request: \$24,448		
Is the requested vehicle(s) new or used: New		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: SUV		
Mission of the requested vehicle(s): This vehicle will be located in Elko and used for Department operations and administrative purposes.		
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 type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. No, this vehicle will be used in remote locations and is not required to comply with Smart Way or Smart Way Elite Requirements.		
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: 2000 Odometer Reading: 52,251 Type of Vehicle: Ford Crown Victoria Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
Please attach an additional sheet if necessary		
APPOINTING AUTHORITY APPROVAL:		
 Agency Appointing Authority	Deputy Director Title	7/8/13 Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
Board of Examiners	Date	

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

RECEIVED

JUL 09 2013



DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4461
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$27,748</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.: SUV Mission of the requested vehicle(s): This vehicle will be located in Reno and used for Department operations and administrative purposes.	
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 type="checkbox"/> 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. No, this vehicle will be used in remote locations and is not required to comply with Smart Way or Smart Way Elite Requirements.	
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: 2000 Odometer Reading: 146,213 Type of Vehicle: Chevrolet Tahoe Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:  Agency Appointing Authority Deputy Director 7/8/13 Title Date	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase _____ Board of Examiners Date	

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

RECEIVED

JUL 09 2013

Agency Name: Department of Wildlife		Budget Account #: 4461	
Contact Name: J. Dale Hansen		Telephone Number: 775-688-1526	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:			
Number of vehicles requested: 1		Amount of the request: \$45,272	
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.: Jet Fuel Truck			
Mission of the requested vehicle(s): To carry jet fuel to fuel up aircraft in remote areas when conducting aerial surveys for wildlife management.			
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 type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. No, this vehicle is a jet fuel truck and is not required to comply with Smart Way or Smart Way Elite Requirements.			
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: 1999 Odometer Reading: 155,718 Type of Vehicle: Chevrolet Crew Cab Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:		Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>			
APPOINTING AUTHORITY APPROVAL:			
 Agency Appointing Authority		 Deputy Director Title	7/8/13 Date
BOARD OF EXAMINERS' APPROVAL:			
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase			
_____ Board of Examiners		_____ Date	

STANDARD PAGE/COST MATRIX ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge
Chrysler Jeep

Specify State's Vehicle Item Number: 3.6C Dodge Ram 5500 Crew Cab Chassis Cab 4x2-4x4		
<small>(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)</small>		
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
Ram 5500 Crew Cab Chassis, 2012, DP5L43	\$38,345.00	\$38,345.00
State vehicle miles per gallon (MPG): Diesel N/R		
State manufactures warranty: 3/36,000 COMP AND 5/100,000 DIESEL ENGINE; UREA		
Specify engine size and emission rating: 6.7 LITER CUMMINS 6 CYL; 50 STATE		
Includes Minimum Standard Equipment Listed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:		
Exterior Color: List available colors:		
Black (\$340.00), Bright Red (\$340.00), Silver, White, Brilliant Black, Dark Brown (\$340.00), Deep Forrest		
Green, Deep Water Blue (\$191.00), Detonator Yellow (\$340.00), Flame Red, Light Cream (\$340.00), Light Green (\$340.00), <u>Mineral Gray</u> , Omaha Orange (\$340.00), Rugged Brown, School Bus Yellow (\$340.00)		
Timberline Green (\$340.00), White Gold, Yellow (\$340.00)		
Seats, Cloth: List available colors:		
Med Slate Gray		
GVW: 18,750-19,500 #	WHEELBASE: 173.4-197.4	
<small>(When Applicable)</small>	<small>(When Applicable)</small>	

TRUCK w/ options \$41,027⁰⁰ { \$38,345 (see above)
 \$2,682 (page 3)
\$41,027

Plus Flatbed (see attached) 4,245⁰⁰ (page 4)

\$45,272⁰⁰ Budget request

now
AIR OPERATIONS Jet fuel truck - For FY 14/15 Budget

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

**DEALER NAME: Carson Dodge
Chrysler Jeep**

Specify State's Vehicle Item Number: 3.6C Dodge Ram 5500 Crew Cab Chassis 4x2-4x4

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

Option Package Name/Code: SLT Package (2GG) \$3,350.00

List Equipment Features Below:

**Bright Front Bumper, Bright Grille, Bright Wheel Skins, Overhead Console, Power Locks, Power Folding
Trailer Tow Mirrors, Power Windows, Keyless Entry, SLT Badge, Sentry Key Theft Deterrent System
Front Floor Mats, Leather Wrap Steering Wheel, Audio Ctrls Steering Wheel, 6 Speakers**

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge
Chrysler Jeep

		DEDUCT AMOUNT
ABS Brake System	STD	\$-
Air Conditioning	STD	\$-
Cruise Control	STD	\$-
Diesel Engine	STD	\$-
* Engine Block Heater	\$77.00	\$- 77 ⁰⁰
* Four Wheel Drive (4x4)	\$1,995.00	\$- 1995 ⁰⁰
* Heavy Duty Alternator	\$128.00 220 Amp	\$- 128 ⁰⁰
Hitch Receiver	N/A	\$-
Integrated Trailer Brake	\$196.00	\$-
Keyless Entry w/Fob (must have power door locks)	\$162.00	\$-
Limited Slip Differential	STD	\$-
Paint, Metallic	SEE PAINTS	\$-
Power Mirrors	STD	\$-
Power Locks	STD	\$-
Power Seats	\$765 SLT ONLY	\$-
Power Windows	STD	\$-
Radio; AM/FM Stereo, Cassette Player	CD STD	\$-
Radio; AM/FM Stereo, Cassette Player, CD	CD STD	\$-
Rear Window Wiper	N/A	\$-
* Seats, Vinyl	<\$242.00>	(242)
Vinyl Colors: Med. Slate Gray		
* Skid Plate	\$43.00	\$- 43 ⁰⁰
Tilt Steering	STD	\$-
* Tire, Spare, Full Size	\$298.00	\$- 298 ⁰⁰
Trailer Tow Mirrors	STD	\$-
Trailer Tow Package	N/A	\$-
Daytime Running Lamps	\$43.00	
Cargo Lamp	\$64.00	
Fog Lamps (SLT Only)	\$119.00	
Snowplow Prep	\$123.00	
84" Cab to Axle	\$138.00	
Rear Sliding Window	\$119.00	
Power Take Off Prep	STD	
Ambulance Prep Group	\$825.00	
Max Trailer Tow Package	\$298.00	
Tube Steps	\$383.00 (Black) \$557.00 (Chrome)	
* Engine Shutdown Timer	\$213.00	213 ⁰⁰
Voltage Mont. System Idle	\$128.00	
* 225/70R19.5F All Trac Tires	\$170.00	\$- 170 ⁰⁰

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$300.00 per unit.

Total \$2,682

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 11, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Sherri Barkdull, Budget Analyst IV *Sub*
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.

DEPARTMENT OF WILDLIFE – FISHERIES MANAGEMENT

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Department of Wildlife-Fisheries Management is requesting the authority to purchase six (6) vehicles for a total of \$207,549.

Additional Information:

The NDOW-Fisheries Management seeks approval to purchase three new and three replacement vehicles. These vehicle purchases were approved during the 2013 Legislative Session in decision unit E711.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.



REVIEWED: <u><i>[Signature]</i></u>
ACTION ITEM: _____

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

RECEIVED

JUL 09 2013

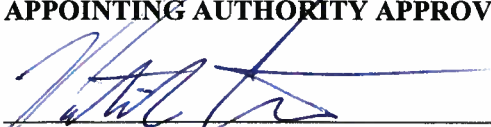
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife		Budget Account #: 4465	
Contact Name: J. Dale Hansen		Telephone Number: 775-688-1526	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:			
Number of vehicles requested: 1		Amount of the request: \$26,234	
Is the requested vehicle(s) new or used: New			
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: 3/4 ton extra cab 4x4 pick up truck			
Mission of the requested vehicle(s): The vehicle will be located in Winnemucca and used for reservoir and stream management, the fish stocking program, urban fishery development, and angler information.			
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 type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. No, this vehicle is a pick-up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.			
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: 2002 Odometer Reading: 156,524 Type of Vehicle: Ford 3/4 ton pick-up		Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
Please attach an additional sheet if necessary			
APPOINTING AUTHORITY APPROVAL:			
			
Agency Appointing Authority		Title	Date
			7/8/13
BOARD OF EXAMINERS' APPROVAL:			
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase			
Board of Examiners		Date	

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

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DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4465
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
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>\$26,234</u> Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>3/4 ton extra cab 4x4 pick up truck</u> Mission of the requested vehicle(s): <u>The vehicle will be located in Boulder City and used for reservoir and stream management, the fish stocking program, urban fishery development, and angler information.</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>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. <u>No, this vehicle is a pick-up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.</u>	
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: <u>1998</u> Odometer Reading: <u>123,206</u> Type of Vehicle: <u>Ford 1/2 ton pick-up</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. <u>Yes.</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
 _____ Agency Appointing Authority	<u>Deputy Director</u> _____ Title
<u>7/8/13</u> _____ Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

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

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JUL 09 2013

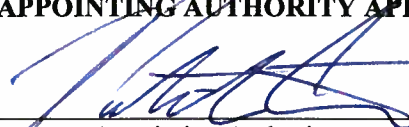
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4465
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
<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: <u>1</u> Amount of the request: <u>\$75,513</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>5 ton freightliner</u></p> <p>Mission of the requested vehicle(s): The vehicle will be located at the Gallagher Hatchery. It will be used for transporting live fish for the fish stocking program. Fish hauls can be as large as 2,000 pounds of fish and transported up to 450 miles from the hatchery.</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</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"/> <u>1</u> 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>No, this vehicle is a transport truck and is not required to comply with Smart Way or 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: 1988 Odometer Reading: 184,154 Type of Vehicle: International 5 ton flat bed</p> <p>Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:</p> <p><i>Please attach an additional sheet if necessary</i></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.</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
<p>APPOINTING AUTHORITY APPROVAL:</p> <p> <u>Deputy Director</u> <u>7/8/13</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>_____ Board of Examiners Date</p>	

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

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JUL 08 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND FINANCE DIVISION


Agency Name: Department of Wildlife	Budget Account #: 4465
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$23,726</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.: 3/4 ton standard cab 4x4 pick up truck	
Mission of the requested vehicle(s): The vehicle will be located in Reno and used in the AIS program for public outreach, education, and coordination with western states and inter local agencies.	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: E249 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)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. No, this vehicle is a pick-up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <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. N/A <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"></div> <div style="width: 30%; text-align: center;"><u>Deputy Director</u></div> <div style="width: 30%; text-align: right;"><u>7/8/13</u></div> </div> <hr/> Agency Appointing Authority Title Date	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <hr/> Board of Examiners Date	

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

RECEIVED

JUL 09 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife		Budget Account #: 4465	
Contact Name: J. Dale Hansen		Telephone Number: 775-688-1526	
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>\$27,921</u>	
Is the requested vehicle(s) new or used: <u>New</u>			
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>3/4 ton crew cab 4x4 pick up truck</u>			
Mission of the requested vehicle(s): <u>The vehicle will be located in Northern Nevada and used in the AIS program for transporting inspection and decontamination stations to various bodies of water.</u>			
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the decision unit number: <u>E249</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input checked="" type="checkbox"/> <u>1</u> Addition(s) <input type="checkbox"/> Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>No, this vehicle is a pick-up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.</u>			
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:		Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. <u>N/A</u> <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>			
APPOINTING AUTHORITY APPROVAL:			
		<u>Deputy Director</u>	
Agency Appointing Authority		Title	<u>7/8/13</u> Date
BOARD OF EXAMINERS' APPROVAL:			
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase			
Board of Examiners		Date	

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

RECEIVED
JUL 09 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4465
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:

Number of vehicles requested: 1 **Amount of the request:** \$27,921

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

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:
3/4 ton crew cab 4x4 pick up truck

Mission of the requested vehicle(s):
The vehicle will be located in Southern Nevada and used in the AIS program for transporting inspection and decontamination stations to various bodies of water.

<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: E249</p> <p>If no, please explain how the vehicles will be funded?</p>
--	--


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

1 Addition(s) Replacement(s)

Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.
No, this vehicle is a pick-up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.

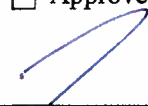
<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____</p> <hr/> <p>Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____</p> <p><i>Please attach an additional sheet if necessary</i></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>N/A</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
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APPOINTING AUTHORITY APPROVAL:

	Deputy Director	7/8/13
Agency Appointing Authority	Title	Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase



Board of Examiners Date

Budget Account: 4465 WILDLIFE - FISHERIES MANAGEMENT

Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt
05	8270	SMITH ROOT LR-20B BACKPACK ELECTROFISHER COMBO This Smith Root LR-20B Backpack Electrofisher Combo will replace the existing 1995 Dirigo 700 backpack electrofisher in Winnemucca. Electrofishers are used during stream surveys for counting fish populations. Electricity temporarily stuns fish which are then netted, measured, counted, and released. The current Electrofisher is outdated and continually malfunctions. Electrofishers are delicate and extensive field work will eventually cause them to fall into disrepair. This equipment help to accomplish the tasks set forth in the Sportfish, Section 6 and SWG grants. [See Attachment]	35	1	0	7,527.00	0.00	7,527	0
05	8270	SMITH ROOT LR-20B BACKPACK ELECTROFISHER COMBO This Smith Root LR-20B Backpack Electrofisher Combo will replace the existing 1995 Dirigo 700 backpack electrofisher in Elko. Electrofishers are used during stream surveys for counting fish populations. Electricity temporarily stuns fish which are then netted, measured, counted, and released. The current Electrofisher is outdated and continually malfunctions. Electrofishers are delicate and extensive field work will eventually cause them to fall into disrepair. This equipment helps accomplish the tasks set forth in the Sportfish, Section 6 and SWG grants. [See Attachment]	10	1	0	7,527.00	0.00	7,527	0
Total for Decision Unit: E710				11	3			224,556	13,599
E711	EQUIPMENT REPLACEMENT								
05	8310	VEHICLE-FLEET-RNO/CC-2.15 4WD TRUCK 3/4T;EXT CAB;S BD	3	0	1	25,969.00	26,748.00	0	26,748
05	8310	VEHICLE-FLEET-RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	1	0	26,234.00	27,021.00	26,234	0
05	8310	VEHICLE-FLEET-RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	2	1	0	26,234.00	27,021.00	26,234	0
05	7460	POWER WINDOWS	300	1	0	880.00	0.00	880	0
05		PRIORITY VEHICLE # 02 [See Attachment]		1	0	83.00	0.00	83	0
05		PRIORITY VEHICLE # 02 [See Attachment]		1	0	208.00	0.00	208	0
05		PRIORITY VEHICLE # 02 [See Attachment]		1	0	77.00	0.00	77	0
05		PRIORITY VEHICLE # 02 [See Attachment]		1	0	196.00	0.00	196	0
05		PRIORITY VEHICLE # 01 [See Attachment]		1	0	276.00	0.00	276	0
05		PRIORITY VEHICLE 1 [See Attachment]		1	0	85.00	0.00	85	0
05		PRIORITY VEHICLE 2 [See Attachment]		2	0	4,148.00	0.00	8,296	0
05		PRIORITY VEHICLE #01 & 02 [See Attachment]		2	0	1,500.00	0.00	3,000	0
05		PRIORITY VEHICLE #01 & 02 [See Attachment]		3	2	350.00	350.00	1,050	700
05		PRIORITY VEHICLES 01, 02, 03, FREIGHTLINER, and 3.5 1 Ton [See Attachment]		0	1	0.00	46,916.00	0	46,916
05	8280	3.5 1 TON TRUCK This one ton Ford 3.5C F450 will replace the 1997 GMC at the Mason Valley Fish Hatchery. The current vehicle has logged over 113,000 miles. The diesel engine is unreliable and the chassis is becoming unsafe. This new vehicle will be fitted with a 1500 gallon tank for transporting live fish. The 4x4 capability and the smaller transport tank will allow department staff to reach remote locations to meet the goals of the fish stocking program. [See Attachment]	205	0	0	0.00	0.00	0	0
05	8280	5 TON FREIGHTLINER This Freightliner M2 106 heavy duty transport vehicle will replace the 1979 six ton International at the Gallagher Fish Hatchery. The current vehicle has approached the end of its useful life and is becoming unsafe and unreliable. The new vehicle will be fitted with the 2500 gallon fish haul tank for transporting 2,000 pound loads of live fish. Fish are often transported up to 450 miles from the Gallagher Hatchery. The ability to haul large loads increases efficiency. [See Attachment]	200	1	0	75,513.00	0.00	75,513	0

Budget Account:		4465 WILDLIFE - FISHERIES MANAGEMENT									
Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt	Year1 Amt	Year2 Amt
Total for Decision Unit: E711											
E720		NEW EQUIPMENT									
05	8270	SMITH ROOT LR-24 BACKPACK ELECTROFISHER COMBO	65	1	0	9,527.00	0.00	9,527	0	142,132	74,364
This Smith Root (LR24) Backpack Electrofisher will be used for sampling fish populations in streams and small water bodies surveys in the southern region which is centered around the Las Vegas/Boulder area. The timing of stream surveys is critical for accurately assessing and studying various fish populations. If an electrofisher unit malfunctions or stream surveys occur simultaneously, this added unit will help insure data integrity. Often equipment is shared across areas extending hundreds of miles. Adding this to the inventory will decrease the need for sharing and transporting the equipment while increasing efficiencies. [See Attachment]											
Total for Decision Unit: E720				1	0			9,527	0		
Total for Budget Account: 4465				59	23			575,024	244,787		

Budget Account: 4465 WILDLIFE - FISHERIES MANAGEMENT

Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt
Equipment \$1,000.00 - \$5,000.00 purchased in the base year such as camper shells, generators, small utility trailers, water and barometer meters, fish locators, etc. that are used to replace existing equipment on an on-going basis for employees in the Fisheries Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
Total for Decision Unit: B000				11	11			60,243	60,243
E249		EFFICIENT AND RESPONSIVE STATE GOVERNMENT							
05	8310	VEHICLE-FLEET-RNO/CC-2.12 TRUCK 4WD 3/4T;STD CAB;L BD	1	1	0	23,726.00	24,438.00	23,726	0
05	8310	VEHICLE-FLEET-RNO/CC-2.14 4WD TRUCK 3/4T;CRW CAB;L BD	20	1	0	27,921.00	28,759.00	27,921	0
05	8310	VEHICLE-FLEET-RNO/CC-2.14 4WD TRUCK 3/4T;CRW CAB;L BD	25	1	0	27,921.00	28,759.00	27,921	0
05	8310	VEHICLE-FLEET-RNO/CC-2.14 4WD TRUCK 3/4T;CRW CAB;L BD	40	0	1	27,921.00	28,759.00	0	28,759
05	7460	RADIO	2	1	0	350.00	0.00	350	0
05	7460	TOW PACKAGE	3	1	0	387.00	0.00	387	0
05	7465	CARAVAN CAMPER	30	2	1	3,585.00	3,585.00	7,170	3,585
Vehicles Priority 20 and 25 [See Attachment]									
05	7465	HIGH CAPACITY RADIOS	35	2	1	3,500.00	3,500.00	7,000	3,500
05	8270	HIGH PRESSURE DECONTAMINATION UNIT	10	0	1	0.00	40,895.00	0	40,895
[See Attachment]									
05	8270	ZEBRA/QUAGGA DECONTAMINATION SYSTEM	15	2	1	19,842.00	19,842.00	39,684	19,842
[See Attachment]									
Total for Decision Unit: E249				11	5			134,159	96,581

E250		EFFICIENT AND RESPONSIVE STATE GOVERNMENT							
16	8241	OFFICE FURNITURE-SECRETARIAL *** ENTIRE UNIT ***	160	1	0	2,090.00	2,290.00	2,090	0
26	7771	SOFTWARE MAINTENANCE-ANTI VIRUS SUBSEQUENT YEAR	180	1	0	0.00	0.00	0	0
26	7771	SOFTWARE-ANTI VIRUS	170	1	0	0.00	0.00	0	0
26	7771	SOFTWARE-MICROSOFT OFFICE SUITE PRO	185	1	0	332.00	332.00	332	0
26	7771	SOFTWARE-WINDOWS CLIENT ACCESS LICENSE (CAL)	190	1	0	20.00	20.00	20	0
26	8371	HARDWARE-LAPTOP DOCKING STATION	175	1	0	352.00	352.00	352	0
26	8371	HARDWARE-LAPTOP PC WITH OPERATING SYSTEM	165	1	0	1,593.00	1,593.00	1,593	0
26	8371	HARDWARE-SURGE PROTECTOR STRIPS	195	1	0	20.00	20.00	20	0
Total for Decision Unit: E250				8	0			4,407	0

E710		EQUIPMENT REPLACEMENT							
05	8220	26' SPRINGDALE TRAVEL TRAILER	25	1	0	21,366.00	0.00	21,366	0
This 26' Springdale Travel Trailer will replace the existing 1987 26' travel trailer used in the Elko region. This trailer has exceeded its useful life. This replacement trailer will be used to house fisheries seasonal staff (up to 5 people) during the summer creel census and stream survey field seasons. [See Attachment]									
05	8220	26' SPRINGDALE TRAVEL TRAILER	40	1	0	21,366.00	0.00	21,366	0
This 26' Springdale Travel Trailer will replace the existing 1988 26' travel trailer used in the Winnemucca region. This trailer has exceeded its useful life. This replacement trailer will be used to house fisheries seasonal staff (up to 5 people) during the summer creel census and stream survey field seasons. [See Attachment]									
05	8250	MERCURY 115 HP EXLPT 4-STROKE ENGINE	140	1	0	7,432.00	0.00	7,432	0

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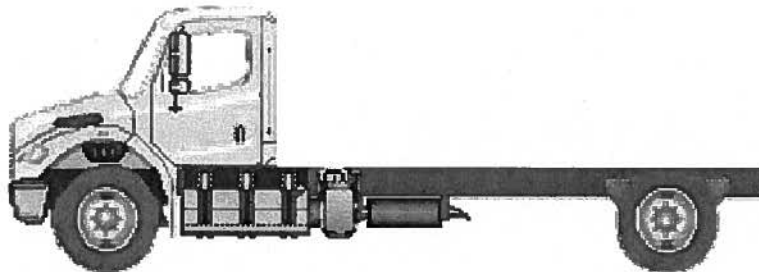
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A proposal for
State of Nevada

Prepared by
LAS VEGAS FREIGHTLINER, LLC
John Dambro

Jul 25, 2012

Freightliner M2 106



Components shown may not reflect all spec'd options and are not to scale



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S P E C I F I C A T I O N P R O P O S A L

Data Code	Description	Weight Front	Weight Rear	Retail Price
Price Level				
PRL-03M	M2 PRL-03M (EFF:01/25/12)			STD
Data Version				
DRL-025	SPECPRO21 DATA RELEASE VER 025			N/C
Vehicle Configuration				
001-172	M2 106 CONVENTIONAL CHASSIS	5,205	3,055	\$86,600.00
004-213	2013 MODEL YEAR SPECIFIED			STD
002-004	SET BACK AXLE - TRUCK			STD
019-001	TRAILER TOWING PROVISION AT END OF FRAME FOR TRUCK	10	10	\$974.00
003-001	LH PRIMARY STEERING LOCATION			STD
General Service				
AA1-003	TRUCK/TRAILER CONFIGURATION			N/C
AA6-001	DOMICILED, USA 50 STATES (INCLUDING CALIFORNIA AND CARB OPT-IN STATES)			N/C
A85-002	PICKUP AND DELIVERY/SHORT HAUL SERVICE			STD
A84-1GM	GOVERNMENT BUSINESS SEGMENT			N/C
AA4-007	LIVESTOCK/AGRICULTURE PRODUCTS COMMODITY			N/C
AA5-002	TERRAIN/DUTY: 100% (ALL) OF THE TIME, IN TRANSIT, IS SPENT ON PAVED ROADS			STD
AB1-008	MAXIMUM 8% EXPECTED GRADE			STD
AB5-001	SMOOTH CONCRETE OR ASPHALT PAVEMENT - MOST SEVERE IN-TRANSIT (BETWEEN SITES) ROAD SURFACE			STD
995-091	MEDIUM TRUCK WARRANTY			STD
A66-99D	EXPECTED FRONT AXLE(S) LOAD : 14000.0 lbs			
A68-99D	EXPECTED REAR DRIVE AXLE(S) LOAD : 21000.0 lbs			
A63-99D	EXPECTED GROSS VEHICLE WEIGHT CAPACITY : 35000.0 lbs			



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Data Code	Description	Weight Front	Weight Rear	Retail Price
A70-99D	EXPECTED GROSS COMBINATION WEIGHT : 60000.0 lbs			
GVWR	RATED MAXIMUM VEHICLE CAPACITY - GVWR : 35600.0 lbs			N/C
Truck Service				
AA3-005	FLATBED/PLATFORM/STAKE BODY			N/C
AF7-99D	EXPECTED BODY/PAYLOAD CG HEIGHT ABOVE FRAME "XX" INCHES : 32.0 in			
Tractor Service				
AA2-005	FLATBED TRAILER			N/C
AH6-001	SINGLE (1) TRAILER			N/C
Engine				
101-2NV	CUM ISC-350 350 HP @ 2000 RPM; 2200 GOV, 1000 LB/FT @ 1400 RPM	510	-10	\$13,792.00
Electronic Parameters				
79A-075	75 MPH ROAD SPEED LIMIT			STD
79B-000	CRUISE CONTROL SPEED LIMIT SAME AS ROAD SPEED LIMIT			N/C
79K-007	PTO MODE ENGINE RPM LIMIT - 1100 RPM			N/C
79M-001	PTO MODE BRAKE OVERRIDE - SERVICE BRAKE ONLY ENABLED			N/C
79P-002	PTO RPM WITH CRUISE SET SWITCH - 700 RPM			N/C
79Q-003	PTO RPM WITH CRUISE RESUME SWITCH - 800 RPM			N/C
79S-001	PTO MODE CANCEL VEHICLE SPEED - 5 MPH			N/C
79U-007	PTO GOVERNOR RAMP RATE - 250 RPM PER SECOND			N/C
80G-002	PTO MINIMUM RPM - 700			N/C
80J-002	REGEN INHIBITIT SPEED THRESHOLD - 5 MPH			N/C
Engine Equipment				
99C-010	2010 EPA/CARB EMISSION CERTIFICATION			STD
99D-011	2008 CARB EMISSION CERTIFICATION - CLEAN IDLE (INCLUDES 6X4 INCH LABEL ON LOWER FORWARD CORNER OF DRIVER DOOR)			\$106.00
105-001	ENGINE MOUNTED OIL CHECK AND FILL			STD
133-004	ONE PIECE VALVE COVER			STD
014-099	SIDE OF HOOD AIR INTAKE WITH FIREWALL MOUNTED DONALDSON AIR CLEANER			STD



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124-1E7	DR 12V 275 AMP 40-SI QUADRAMOUNT PAD ALTERNATOR WITH REMOTE BATTERY VOLTAGE SENSE	10		\$1,011.00
292-058	(3) ALLIANCE MODEL 1031, GROUP 31, 12 VOLT MAINTENANCE FREE 2280 CCA THREADED STUD BATTERIES	40	20	\$383.00
290-1CD	BATTERY BOX WITH ALUMINUM COVER MOUNTED SHORT SIDE TO RAIL			\$327.00
282-003	SINGLE BATTERY BOX FRAME MOUNTED LH SIDE BACK OF CAB			N/C
291-017	WIRE GROUND RETURN FOR BATTERY CABLES WITH ADDITIONAL FRAME GROUND RETURN			STD
289-001	NON-POLISHED BATTERY BOX COVER			STD
107-032	CUMMINS 18.7 CFM AIR COMPRESSOR WITH INTERNAL SAFETY VALVE			N/C
108-002	STANDARD AIR COMPRESSOR GOVERNOR			N/C
131-013	AIR COMPRESSOR DISCHARGE LINE			N/C
152-041	ELECTRONIC ENGINE INTEGRAL SHUTDOWN PROTECTION SYSTEM			STD
128-032	C-BRAKE BY JACOBS WITH LOW/OFF/HIGH BRAKING DASH SWITCH	80		\$2,717.00
016-1E0	RH INBOARD FRAME MOUNTED HORIZONTAL DPF AND SCR 500MM FORWARD WITH HORIZONTAL TAILPIPE	-120	60	(\$1,214.00)
28F-002	ENGINE AFTERTREATMENT DEVICE, AUTOMATIC OVER THE ROAD REGENERATION AND DASH MOUNTED REGENERATION REQUEST SWITCH			STD
239-001	STANDARD EXHAUST SYSTEM LENGTH			STD
237-052	RH STANDARD HORIZONTAL TAILPIPE			STD
23U-002	13 GALLON DIESEL EXHAUST FLUID TANK	40	20	\$105.00
30N-003	100 PERCENT DIESEL EXHAUST FLUID FILL			\$40.00
23Y-001	STANDARD DIESEL EXHAUST FLUID PUMP MOUNTING			STD
43X-002	LH MEDIUM DUTY STANDARD DIESEL EXHAUST FLUID TANK LOCATION			STD
43Y-001	STANDARD DIESEL EXHAUST FLUID TANK CAP			STD
273-018	HORTON DRIVEMASTER ON/OFF FAN DRIVE			N/C
276-001	AUTOMATIC FAN CONTROL WITHOUT DASH SWITCH, NON ENGINE MOUNTED			N/C
110-003	CUMMINS SPIN ON FUEL FILTER			STD
118-008	COMBINATION FULL FLOW/BYPASS OIL FILTER			N/C
266-013	1100 SQUARE INCH ALUMINUM RADIATOR	20		N/C



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Data Code	Description	Weight Front	Weight Rear	Retail Price
103-004	ANTIFREEZE TO -34F, NOAT EXTENDED LIFE COOLANT			STD
171-007	GATES BLUE STRIPE COOLANT HOSES OR EQUIVALENT			STD
172-001	CONSTANT TENSION HOSE CLAMPS FOR COOLANT HOSES			STD
270-016	RADIATOR DRAIN VALVE			STD
168-002	LOWER RADIATOR GUARD			STD
360-998	NO FRONT ENGINE PTO			STD
134-001	ALUMINUM FLYWHEEL HOUSING			STD
132-004	ELECTRIC GRID AIR INTAKE WARMER			STD
155-058	DELCO 12V 38MT HD STARTER WITH INTEGRATED MAGNETIC SWITCH	10		N/C

Transmission

342-580	ALLISON 3000 HS AUTOMATIC TRANSMISSION, NO PTO PROVISION	170	50	\$6,630.00
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Transmission Equipment

352-998	NO AUXILIARY TRANSMISSION			STD
343-144	WTEC CALIBRATION - 6 SPEED HS (PACKAGE 200)			N/C
341-018	MAGNETIC PLUGS, ENGINE DRAIN, TRANSMISSION DRAIN, AXLE(S) FILL AND DRAIN			STD
345-003	PUSH BUTTON ELECTRONIC SHIFT CONTROL, DASH MOUNTED			N/C
97G-002	TRANSMISSION PROGNOSTICS - DISABLED(N/A)			STD
370-015	WATER TO OIL TRANSMISSION COOLER, IN RADIATOR END TANK			STD
346-003	TRANSMISSION OIL CHECK AND FILL WITH ELECTRONIC OIL LEVEL CHECK			N/C
35T-001	SYNTHETIC TRANSMISSION FLUID (TES-295 COMPLIANT)			STD

Front Axle and Equipment

400-1A8	DETROIT DA-F-14.7-3 14,700# FF1 71.5 KPI/3.74 DROP SINGLE FRONT AXLE	60		\$934.00
402-049	MERITOR 16.5X5 Q+ CAST SPIDER CAM FRONT BRAKES, DOUBLE ANCHOR, FABRICATED SHOES	60		\$228.00
403-002	NON-ASBESTOS FRONT BRAKE LINING			STD
419-023	CONMET CAST IRON FRONT BRAKE DRUMS			N/C
427-001	FRONT BRAKE DUST SHIELDS	5		\$109.00



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Data Code	Description	Weight Front	Weight Rear	Retail Price
409-021	SKF SCOTSEAL PLUS XL FRONT OIL SEALS			N/C
408-001	VENTED FRONT HUB CAPS WITH WINDOW, CENTER AND SIDE PLUGS - OIL			STD
416-022	STANDARD SPINDLE NUTS FOR ALL AXLES			STD
405-002	MERITOR AUTOMATIC FRONT SLACK ADJUSTERS			N/C
536-012	TRW TAS-85 POWER STEERING	50		N/C
539-003	POWER STEERING PUMP			STD
534-015	2 QUART SEE THROUGH POWER STEERING RESERVOIR			STD
40T-003	SYNTHETIC 50W FRONT AXLE LUBE			\$20.00
Front Suspension				
620-010	14,600# TAPERLEAF FRONT SUSPENSION	160		\$502.00
619-005	MAINTENANCE FREE RUBBER BUSHINGS - FRONT SUSPENSION			STD
410-001	FRONT SHOCK ABSORBERS			STD
Rear Axle and Equipment				
420-009	RS-21-160 21,000# R-SERIES SINGLE REAR AXLE		340	\$1,499.00
421-489	4.89 REAR AXLE RATIO			N/C
424-001	IRON REAR AXLE CARRIER WITH STANDARD AXLE HOUSING			STD
386-076	MXL 17N MERITOR EXTENDED LUBE MAIN DRIVELINE WITH FULL ROUND YOKES	85	85	\$340.00
423-020	MERITOR 16.5X7 Q+ CAST SPIDER CAM REAR BRAKES, DOUBLE ANCHOR, FABRICATED SHOES			(\$93.00)
433-002	NON-ASBESTOS REAR BRAKE LINING			STD
434-012	BRAKE CAMS AND CHAMBERS ON REAR SIDE OF DRIVE AXLE(S)			N/C
451-023	CONMET CAST IRON REAR BRAKE DRUMS			N/C
425-002	REAR BRAKE DUST SHIELDS		5	\$58.00
440-021	SKF SCOTSEAL PLUS XL REAR OIL SEALS			N/C
426-074	HALDEX GOLDSEAL LONGSTROKE 1-DRIVE AXLE SPRING PARKING CHAMBERS			N/C
428-002	MERITOR AUTOMATIC REAR SLACK ADJUSTERS			N/C
41T-002	SYNTHETIC 75W-90 REAR AXLE LUBE			\$107.00
Rear Suspension				
622-001	23,000# FLAT LEAF SPRING REAR SUSPENSION WITH RADIUS ROD		110	\$600.00



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Data Code	Description	Weight Front	Weight Rear	Retail Price
621-001	SPRING SUSPENSION - NO AXLE SPACERS			STD
431-001	STANDARD U-BOLT PAD			STD
623-005	FORE/AFT CONTROL RODS			N/C
Brake System				
018-002	AIR BRAKE PACKAGE	80	140	\$1,162.00
490-100	WABCO 4S/4M ABS WITHOUT TRACTION CONTROL			N/C
871-001	REINFORCED NYLON, FABRIC BRAID AND WIRE BRAID CHASSIS AIR LINES			N/C
904-001	FIBER BRAID PARKING BRAKE HOSE			N/C
412-001	STANDARD BRAKE SYSTEM VALVES			N/C
46D-002	STANDARD AIR SYSTEM PRESSURE PROTECTION SYSTEM			N/C
413-002	STD U.S. FRONT BRAKE VALVE			N/C
432-003	RELAY VALVE WITH 5-8 PSI CRACK PRESSURE, NO REAR PROPORTIONING VALVE			N/C
480-009	BW AD-9 BRAKE LINE AIR DRYER WITH HEATER	40		\$288.00
479-015	AIR DRYER FRAME MOUNTED			N/C
460-001	STEEL AIR BRAKE RESERVOIRS			N/C
477-001	PULL CABLE ON WET TANK, PETCOCK DRAIN VALVES ON ALL OTHER AIR TANKS			N/C
485-003	QUICK DISCONNECT FITTING WITH TIRE INFLATION KIT	2		\$161.00
Trailer Connections				
914-001	AIR CONNECTIONS TO END OF FRAME WITH GLAD HANDS FOR TRUCK AND NO DUST COVERS			N/C
296-010	PRIMARY CONNECTOR/RECEPTACLE WIRED FOR SEPARATE STOP/TURN, CENTER PIN POWERED THROUGH IGNITION			N/C
297-001	SAE J560 7-WAY PRIMARY TRAILER CABLE RECEPTACLE MOUNTED END OF FRAME			N/C
335-004	UPGRADED CHASSIS MULTIPLEXING UNIT			N/C
32A-002	UPGRADED BULKHEAD MULTIPLEXING UNIT			STD
Wheelbase & Frame				
545-560	5600MM (220 INCH) WHEELBASE			N/C
546-100	11/32X3-1/2X10-3/16 INCH STEEL FRAME (8.73MMX258.8MM/0.344X10.19 INCH) 120KSI	460	90	\$710.00
552-032	1650MM (65 INCH) REAR FRAME OVERHANG			N/C
55W-006	FRAME OVERHANG RANGE: 61 INCH TO 70 INCH	-10	40	N/C



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Data Code	Description	Weight Front	Weight Rear	Retail Price
AC8-99D	CALC'D BACK OF CAB TO REAR SUSP C/L (CA) : 154.45 in			
AE8-99D	CALCULATED EFFECTIVE BACK OF CAB TO REAR SUSPENSION C/L (CA) : 151.45 in			
AE4-99D	CALC'D FRAME LENGTH - OVERALL : 314.39			
AM6-99D	CALC'D SPACE AVAILABLE FOR DECKPLATE : 154.45 in			
FSS-0LH	FRAME SPACE LH SIDE : 67.05 in			N/C
FSS-0RH	FRAME SPACE RH SIDE : 106.42 in			N/C
553-001	SQUARE END OF FRAME			STD
550-001	FRONT CLOSING CROSSMEMBER			STD
559-001	STANDARD WEIGHT ENGINE CROSSMEMBER			STD
562-001	STANDARD MIDSHIP #1 CROSSMEMBER(S)			STD
572-001	STANDARD REARMOST CROSSMEMBER			STD
565-001	STANDARD SUSPENSION CROSSMEMBER			STD
Chassis Equipment				
556-1AP	THREE-PIECE 14 INCH PAINTED STEEL BUMPER WITH COLLAPSIBLE ENDS	20		\$76.00
558-001	FRONT TOW HOOKS - FRAME MOUNTED	15		\$89.00
574-001	BUMPER MOUNTING FOR SINGLE LICENSE PLATE			STD
585-998	NO MUDFLAP BRACKETS			STD
590-998	NO REAR MUDFLAPS			STD
586-024	FENDER AND FRONT OF HOOD MOUNTED FRONT MUDFLAPS			STD
551-007	GRADE 8 THREADED HEX HEADED FRAME FASTENERS			STD
794-001	12 TON JACK WITH HANDLE AND WHEEL WRENCH	12		\$199.00
Fuel Tanks				
206-195	60 GALLON/227 LITER RECTANGULAR ALUMINUM FUEL TANK - RH	90	20	\$1,043.00
204-195	60 GALLON/227 LITER RECTANGULAR ALUMINUM FUEL TANK - LH	30		\$233.00
218-005	RECTANGULAR FUEL TANK(S)			STD
215-005	PLAIN ALUMINUM/PAINTED STEEL FUEL/HYDRAULIC TANK(S) WITH PAINTED BANDS			STD
212-007	FUEL TANK(S) FORWARD			STD
664-001	PLAIN STEP FINISH			STD
205-003	LOCKING FUEL TANK CAP(S)			\$98.00



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Data Code	Description	Weight Front	Weight Rear	Retail Price
122-075	ALLIANCE FUEL FILTER/WATER SEPARATOR	15		N/C
216-020	EQUIFLO INBOARD FUEL SYSTEM			STD
202-016	HIGH TEMPERATURE REINFORCED NYLON FUEL LINE			STD
Tires				
093-2AX	GOODYEAR G661 HSA 12R22.5 16 PLY RADIAL FRONT TIRES (MATCH MARKED)	-98		\$1,150.00
094-0VM	GOODYEAR G288 12R22.5 16 PLY RADIAL REAR TIRES		128	\$2,020.00
510-2AA	GOODYEAR G399 LHS FUEL MAX 295/75R22.5 14 PLY RADIAL SPARE TIRE (MATCH MARKED)		115	\$587.00
Hubs				
418-045	CONMET PRE-SET BEARING IRON FRONT HUBS			N/C
450-045	CONMET PRE-SET BEARING IRON REAR HUBS			N/C
Wheels				
502-433	ACCURIDE 29039 22.5X9.00 10-HUB PILOT 5.25 INSET 5-HAND STEEL DISC FRONT WHEELS	50		\$314.00
505-445	ACCURIDE 29300 22.5X9.00 10-HUB PILOT 5-HAND STEEL DISC REAR WHEELS		120	\$624.00
511-433	ACCURIDE 29039 22.5X9.00 10-HUB PILOT 5.25 INSET 5-HAND STEEL DISC SPARE WHEEL		103	\$331.00
496-011	FRONT WHEEL MOUNTING NUTS			STD
497-011	REAR WHEEL MOUNTING NUTS			STD
Cab Exterior				
829-071	106 INCH BBC FLAT ROOF ALUMINUM CONVENTIONAL CAB			STD
650-008	AIR CAB MOUNTS			\$154.00
678-001	LH AND RH GRAB HANDLES			\$61.00
646-009	PAINTED PLASTIC GRILLE			STD
65X-001	ARGENT SILVER HOOD MOUNTED AIR INTAKE GRILLE			STD
644-004	FIBERGLASS HOOD			STD
727-1AH	SINGLE 14 INCH ROUND POLISHED AIR HORN ROOF MOUNTED	4		\$185.00
726-001	SINGLE ELECTRIC HORN			STD
728-001	SINGLE HORN SHIELD			N/C
657-001	DOOR LOCKS AND IGNITION SWITCH KEYED THE SAME			STD
575-001	REAR LICENSE PLATE MOUNT END OF FRAME			STD
312-043	INTEGRAL HEADLIGHT/MARKER ASSEMBLY			STD



Prepared for:
 Kurt Frye
 State of Nevada
 209 E Musser St Room 304
 Carson City, NV 89701-4299
 Phone: 702-942-6209

Prepared by:
 John Dambro
 LAS VEGAS FREIGHTLINER,
 LLC
 3701 FREIGHTLINER DRIVE
 NORTH LAS VEGAS, NV 89031
 Phone: 7029426209

Data Code	Description	Weight Front	Weight Rear	Retail Price
302-047	LED AERODYNAMIC MARKER LIGHTS			\$43.00
311-001	DAYTIME RUNNING LIGHTS			\$23.00
294-042	FREIGHTLINER LED FLANGE MOUNTED STOP/TAIL/TURN LIGHTS WITH SEPARATE INCANDESCENT BACKUP LIGHTS		5	\$126.00
300-015	STANDARD FRONT TURN SIGNAL LAMPS			STD
744-1BG	DUAL WEST COAST MOLDED-IN COLOR HEATED MIRRORS			\$162.00
797-001	DOOR MOUNTED MIRRORS			STD
796-001	102 INCH EQUIPMENT WIDTH			STD
743-1AP	LH AND RH 8" MOLDED-IN COLOR CONVEX MIRRORS MOUNTED UNDER PRIMARY MIRRORS			N/C
74B-005	RH VELVAC 8 INCH BRIGHT FINISH HOOD MOUNTED CONVEX MIRROR WITH SWING ARM BRACKET, DUAL VIEW	4		\$139.00
729-001	STANDARD SIDE/REAR REFLECTORS			STD
677-998	NO CAB MOUNTED STEPS			STD
768-043	63X14 INCH TINTED REAR WINDOW			STD
661-003	TINTED DOOR GLASS LH AND RH WITH TINTED NON-OPERATING WING WINDOWS			STD
654-003	MANUAL DOOR WINDOW REGULATORS			STD
663-013	TINTED WINDSHIELD			STD
659-019	2 GALLON WINDSHIELD WASHER RESERVOIR WITHOUT FLUID LEVEL INDICATOR, FRAME MOUNTED			STD

Cab Interior

707-1AM	OPAL GRAY CLOTH INTERIOR			STD
706-013	MOLDED PLASTIC DOOR PANEL			STD
708-013	MOLDED PLASTIC DOOR PANEL			STD
772-006	BLACK MATS WITH SINGLE INSULATION			STD
785-004	DASH MOUNTED ASH TRAY(S) WITHOUT LIGHTER			\$3.00
691-008	FORWARD ROOF MOUNTED CONSOLE WITH UPPER STORAGE COMPARTMENTS WITHOUT NETTING			STD
694-010	IN DASH STORAGE BIN			STD
742-007	(2) CUP HOLDERS LH AND RH DASH			STD
680-006	GRAY/CHARCOAL FLAT DASH			STD
720-002	2-1/2 LB. FIRE EXTINGUISHER	5		\$55.00
700-002	HEATER, DEFROSTER AND AIR CONDITIONER	70		\$1,050.00



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Data Code	Description	Weight Front	Weight Rear	Retail Price
701-001	STANDARD HVAC DUCTING			STD
703-005	MAIN HVAC CONTROLS WITH RECIRCULATION SWITCH			N/C
170-015	STANDARD HEATER PLUMBING			STD
130-033	DENSO HEAVY DUTY AIR CONDITIONER COMPRESSOR			N/C
702-002	BINARY CONTROL, R-134A			N/C
739-001	CAB INSULATION			STD
285-013	SOLID-STATE CIRCUIT PROTECTION AND FUSES			STD
280-007	12V NEGATIVE GROUND ELECTRICAL SYSTEM			STD
324-014	DOME LIGHT WITH 3-WAY SWITCH ACTIVATED BY LH AND RH DOORS			STD
655-001	CAB DOOR LATCHES WITH MANUAL DOOR LOCKS			STD
284-045	(2) 12 VOLT POWER RECEPTACLES MOUNTED IN DASH			\$60.00
722-002	TRIANGULAR REFLECTORS WITHOUT FLARES	10		\$25.00
756-243	BOSTROM T910 HIGH BACK AIR SUSPENSION DRIVER SEAT WITH AIR LUMBAR	40		\$349.00
760-243	BOSTROM T910 HIGH BACK AIR SUSPENSION PASSENGER SEAT WITH AIR LUMBAR	30	10	\$349.00
759-005	DUAL DRIVER AND PASSENGER SEAT ARMRESTS	8		\$126.00
711-004	LH AND RH INTEGRAL DOOR PANEL ARMRESTS			STD
758-022	BLACK MORDURA CLOTH DRIVER SEAT COVER			\$57.00
761-023	BLACK MORDURA CLOTH PASSENGER SEAT COVER			\$57.00
763-032	3 POINT FIXED D-RING RETRACTOR DRIVER AND PASSENGER SEAT BELTS			STD
532-002	ADJUSTABLE TILT AND TELESCOPING STEERING COLUMN	10		\$478.00
540-015	4-SPOKE 18 INCH (450MM) STEERING WHEEL			STD
765-002	DRIVER AND PASSENGER INTERIOR SUN VISORS			STD

Instruments & Controls

732-004	GRAY DRIVER INSTRUMENT PANEL			STD
734-004	GRAY CENTER INSTRUMENT PANEL			STD
870-001	BLACK GAUGE BEZELS			STD
486-001	LOW AIR PRESSURE LIGHT AND BUZZER			N/C
840-002	2 INCH PRIMARY AND SECONDARY AIR PRESSURE GAUGES			N/C



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Data Code	Description	Weight Front	Weight Rear	Retail Price
198-025	INTAKE MOUNTED AIR RESTRICTION INDICATOR WITHOUT GRADUATIONS			STD
721-001	97 DB BACKUP ALARM		2	\$78.00
149-013	ELECTRONIC CRUISE CONTROL WITH SWITCHES IN LH SWITCH PANEL			STD
156-007	KEY OPERATED IGNITION SWITCH AND INTEGRAL START POSITION; 4 POSITION OFF/RUN/START/ACCESSORY			STD
811-011	ODOMETER/TRIP/HOUR/DIAGNOSTIC/VOLTAGE DISPLAY: 1X7 CHARACTER, 26 WARNING LAMPS, DATA LINKED, ICU3			STD
160-025	DIAGNOSTIC INTERFACE CONNECTOR, 9 PIN, SAE J1939, LOCATED BELOW DASH			STD
844-001	2 INCH ELECTRIC FUEL GAUGE			STD
148-003	PROGRAMMABLE RPM CONTROL - ELECTRONIC ENGINE			STD
856-001	ELECTRICAL ENGINE COOLANT TEMPERATURE GAUGE			STD
864-001	2 INCH TRANSMISSION OIL TEMPERATURE GAUGE			\$11.00
830-017	ENGINE AND TRIP HOUR METERS INTEGRAL WITHIN DRIVER DISPLAY			STD
852-002	ELECTRIC ENGINE OIL PRESSURE GAUGE			STD
746-1A2	AM/FM/WB RADIO WITH FRONT AUXILIARY INPUT	10		\$320.00
747-001	DASH MOUNTED RADIO			N/C
750-002	(2) RADIO SPEAKERS IN CAB			N/C
753-001	AM/FM ANTENNA MOUNTED ON FORWARD LH ROOF	2		N/C
810-027	ELECTRONIC MPH SPEEDOMETER WITH SECONDARY KPH SCALE, WITHOUT ODOMETER			STD
817-001	STANDARD VEHICLE SPEED SENSOR			STD
812-001	ELECTRONIC 3000 RPM TACHOMETER			STD
162-011	IDLE LIMITER, ELECTRONIC ENGINE			STD
329-091	(6) IGN CONTROLLED EXTRA SWITCHES WITH IND LIGHTS WIRED TO POWER DIST BOX WITH RELAYS PROVIDING 20 AMPS PER CIRCUIT TO JUNCTION BLOCK AND 1 CIRCUIT AT 30 AMPS			\$474.00
482-001	BW TRACTOR PROTECTION VALVE			N/C
883-001	TRAILER HAND CONTROL BRAKE VALVE			N/C
836-015	DIGITAL VOLTAGE DISPLAY INTEGRAL WITH DRIVER DISPLAY			STD



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Data Code	Description	Weight Front	Weight Rear	Retail Price
660-008	SINGLE ELECTRIC WINDSHIELD WIPER MOTOR WITH DELAY			STD
304-001	MARKER LIGHT SWITCH INTEGRAL WITH HEADLIGHT SWITCH			STD
882-004	TWO VALVE PARKING BRAKE SYSTEM WITH WARNING INDICATOR			N/C
299-013	SELF CANCELING TURN SIGNAL SWITCH WITH DIMMER, WASHER/WIPER AND HAZARD IN HANDLE			STD
298-039	INTEGRAL ELECTRONIC TURN SIGNAL FLASHER WITH HAZARD LAMPS OVERRIDING STOP LAMPS			STD

Design

065-000	PAINT: ONE SOLID COLOR			STD
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Color

980-3F6	CAB COLOR A: N0006EA WHITE ELITE SS			N/C
986-020	BLACK, HIGH SOLIDS POLYURETHANE CHASSIS PAINT			STD
962-970	VENDOR WHITE FRONT WHEELS/RIMS (PW, TKWHT21, W, TW)			STD
966-970	VENDOR WHITE REAR WHEELS/RIMS (PW, TKWHT21, W, TW)			STD
964-6Z7	BUMPER PAINT: FP24812 ARGENT SILVER DUPONT FLEX			STD

Certification / Compliance

996-001	U.S. FMVSS CERTIFICATION			STD
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Sales Programs

NO SALES PROGRAMS HAVE BEEN SELECTED

TOTAL VEHICLE SUMMARY

Adjusted List Price

Adjusted List Price ** \$129,245.00

Weight Summary

Weight	Weight	Total
--------	--------	-------



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LLC
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	Front	Rear	Weight
Factory Weight ⁺	7294 LBS	4518 LBS	11812 LBS
<hr/>			
Total Weight ⁺	7294 LBS	4518 LBS	11812 LBS

ITEMS NOT INCLUDED IN ADJUSTED LIST PRICE

Other Factory Charges

DELIVERY & ORDER PROCESSING CHARGE \$1,950.00

(+) Weights shown are estimates only.

If weight is critical, contact Customer Application Engineering.

(**) Prices shown do not include taxes, fees, etc... "Net Equipment Selling Price" is located on the Quotation Details Proposal Report.



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Q U O T A T I O N

M2 106 CONVENTIONAL CHASSIS

SET BACK AXLE - TRUCK	DETROIT DA-F-14.7-3 14,700# FF1 71.5 KPI/3.74 DROP
CUM ISC-350 350 HP @ 2000 RPM; 2200 GOV, 1000 LB/FT @ 1400 RPM	SINGLE FRONT AXLE
ALLISON 3000 HS AUTOMATIC TRANSMISSION, NO PTO PROVISION	14,600# TAPERLEAF FRONT SUSPENSION
RS-21-160 21,000# R-SERIES SINGLE REAR AXLE	106 INCH BBC FLAT ROOF ALUMINUM CONVENTIONAL CAB
23,000# FLAT LEAF SPRING REAR SUSPENSION WITH RADIUS ROD	5600MM (220 INCH) WHEELBASE
	11/32X3-1/2X10-3/16 INCH STEEL FRAME (8.73MMX258.8MM/0.344X10.19 INCH) 120KSI
	1650MM (65 INCH) REAR FRAME OVERHANG

			PER UNIT		TOTAL
VEHICLE PRICE	TOTAL # OF UNITS (1)	\$	75,513	\$	75,513
EXTENDED WARRANTY		\$	0	\$	0
DEALER INSTALLED OPTIONS		\$	0	\$	0
CUSTOMER PRICE BEFORE TAX		\$	75,513	\$	75,513

TAXES AND FEES

TAXES AND FEES	\$	0	\$	0
OTHER CHARGES	\$	0	\$	0

TRADE-IN

TRADE-IN ALLOWANCE	\$	(0)	\$	(0)
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BALANCE DUE	(LOCAL CURRENCY)	\$	75,513	\$	75,513
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COMMENTS: Projected delivery on ___ / ___ / ___ provided the order is received before ___ / ___ / ___.

APPROVAL: Please indicate your acceptance of this quotation by signing below: Customer:

X_____ Date: ___ / ___ / ___.



Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 11, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Sherri Barkdull, Budget Analyst IV *SKB*
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.

DEPARTMENT OF WILDLIFE – GAME MANAGEMENT

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Department of Wildlife-Game Management is requesting the authority to purchase four (4) replacement vehicles for a total of \$110,402.

Additional Information:

The NDOW-Game Management seeks approval to purchase four replacement vehicles. These vehicle purchases were approved during the 2013 Legislative Session in decision unit E711.


Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: _____

ACTION ITEM: _____

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

Agency Name: Department of Wildlife	Budget Account #: 4464
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
<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: <u>1</u> Amount of the request: <u>\$27,657</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Pick up truck</p> <p>Mission of the requested vehicle(s): Transportation for field activities of a Game division biologist in the Western region.</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</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"/> <u>1</u> 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>No, pick up trucks are not sedans, so they are not subject to SAM 1308 (see SAM 1308(5)).</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: 2004 Odometer Reading: 135,074 Type of Vehicle: Chevrolet 3/4 Ton Extcab Pick up</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.</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>Deputy Director</u> <u>7/8/13</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>_____ Board of Examiners Date</p>	

Budget Account: 4464 WILDLIFE - GAME MANAGEMENT

Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt	
24	7771	ENVIRONMENTAL SYSTEMS RESEARCH INSTITUTE	14	1	1	300.00	300.00	300	300	
Environmental Systems Research Institute (ESRI) annual ArcView, Arcinfo and ArcGIS concurrent use of maintenance. The amount of the attached maintenance license cost is split between other divisional budget accounts. [See Attachment]										
Total for Decision Unit: B000				13	13			33,889	33,889	
E711		EQUIPMENT REPLACEMENT								
05	8310	VEHICLE-FLEET-RNO/CC-2.13 2WD TRUCK 3/4T;CRW CAB;S BD	5	0	1	24,804.00	25,549.00	0	25,549	
05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	7	0	1	27,657.00	28,486.00	0	28,486	
05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	8	0	1	27,657.00	28,486.00	0	28,486	
05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	2	1	0	27,657.00	28,486.00	27,657	0	
05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	3	1	0	27,657.00	28,486.00	27,657	0	
05	8310	VEHICLE-FLEET-RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD	4	1	0	27,657.00	28,486.00	27,657	0	
05	8310	VEHICLE-FLEET-RNO/CC-2.15 4WD TRUCK 3/4T;EXT CAB;S BD	6	0	1	25,969.00	26,748.00	0	26,748	
05	8310	VEHICLE-FLEET-RNO/CC-2.7TRUCK 4WD 1/2 T;CRW CAB;S BED	1	1	0	27,431.00	28,254.00	27,431	0	
05	7460	BLUETOOTH FOR PHONE	28	1	0	591.00	0.00	591	0	
PRIORITY VEHICLE 1 [See Attachment]										
05	7460	DAYTIME RUNNING LIGHTS	61	1	0	37.00	0.00	37	0	
PRIORITY VEHICLE 02 [See Attachment]										
05	7460	ELECTRONIC SHIFT	63	1	0	154.00	0.00	154	0	
PRIORITY VEHICLE 02 [See Attachment]										
05	7460	ENGINE BLOCK HEATER	64	1	0	66.00	0.00	66	0	
PRIORITY VEHICLE 06 [See Attachment]										
05	7460	ENGINE BLOCK HEATER	55	1	0	62.00	0.00	62	0	
PRIORITY VEHICLE 02 [See Attachment]										
05	7460	EXTRA SPARE TIRE	34	6	5	199.00	199.00	1,194	995	
PRIORITY VEHICLES 01 THROUGH 08 [See Attachment]										
05	7460	HEAVY DUTY ALTERNATOR	65	1	0	66.00	0.00	66	0	
PRIORITY VEHICLE 06 [See Attachment]										
05	7460	HEAVY DUTY ALTERNATOR	43	0	0	64.00	0.00	0	0	
VEHICLE PRIORITY 05 [See Attachment]										
05	7460	HEAVY DUTY ALTERNATOR	56	1	0	62.00	0.00	62	0	
PRIORITY VEHICLE 02 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	71	0	1	0.00	277.00	0	277	
PRIORITY VEHICLE 07 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	77	0	1	0.00	277.00	0	277	
PRIORITY VEHICLE 08 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	36	1	0	277.00	0.00	277	0	
PRIORITY VEHICLE 03 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	40	1	0	277.00	0.00	277	0	
PRIORITY VEHICLE 06 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	44	0	0	277.00	0.00	0	0	
VEHICLE PRIORITY 05 [See Attachment]										
05	7460	LIMITED SLIP DIFFERENTIAL	50	1	0	277.00	0.00	277	0	
PRIORITY VEHICLE 01 [See Attachment]										

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 11, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Sherri Barkdull, Budget Analyst IV *SKB*
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.

DEPARTMENT OF WILDLIFE – HABITAT

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Department of Wildlife-Habitat is requesting the authority to purchase three (3) vehicles for a total of \$78,836.

Additional Information:

The NDOW-Habitat seeks approval to purchase three replacement vehicles. These vehicle purchases were approved during the 2013 Legislative Session in decision unit E711.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: *SKB*

ACTION ITEM: _____

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

REC'D
JUL 6

Agency Name: Department of Wildlife	Budget Account #: 4467
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526

RECEIVED
JUL 09 2013
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:

Number of vehicles requested: 1 **Amount of the request:** 24,044.00

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

Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:

Pick up truck

Mission of the requested vehicle(s):

This vehicle will be located in Las Vegas and used for biological technical guidance work in Southern Nevada.

Were funds legislatively approved for the request?

Yes 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):

Addition(s) 1 Replacement(s)

Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.

No, this vehicle is a pick up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.

Please Complete for Replacement Vehicles Only:
(For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)

Current Vehicle Information:

Vehicle #1 Model Year: 2002
Odometer Reading: 86,007
Type of Vehicle: Ford pick up

Vehicle #2 Model Year:
Odometer Reading:
Type of Vehicle:

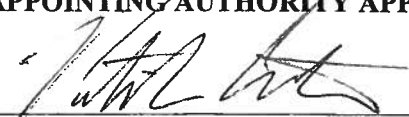
Please attach an additional sheet if necessary

Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced.

Yes.

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

APPOINTING AUTHORITY APPROVAL:



Deputy Director
Title

7/8/13
Date

BOARD OF EXAMINERS' APPROVAL:

Approved for Purchase Not Approved for Purchase

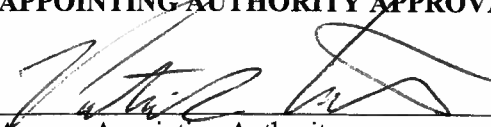

Board of Examiners _____ Date _____

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

RECEIVED

JUL 09 2013

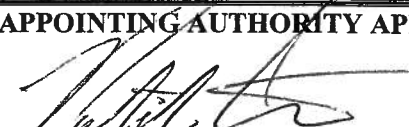

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BY: [Signature] DATE: 7/8/13

Agency Name: Department of Wildlife	Budget Account #: 4467	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
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>28,240.00</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 truck Mission of the requested vehicle(s): This vehicle will be located in Las Vegas and used for water development maintenance work in Southern Nevada.		
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 type="checkbox"/> 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. No, this vehicle is a pick up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.		
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: 2006 Odometer Reading: 208,493 Type of Vehicle: Ford pick up crew cab Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 Agency Appointing Authority	 Title	<u>7/8/13</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
Board of Examiners	Date	

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

RECEIVED
JUL 09 2013



DEPARTMENT OF ADMINISTRATION
OFFICE OF THE COMPTROLLER AND BUDGET
AND FINANCIAL SERVICES DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4467	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
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>26,552.00</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.: <u>Pick up truck</u>		
Mission of the requested vehicle(s): <u>This vehicle will be located in Overton Nevada and used at a wildlife management area in Southern Nevada.</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> 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. <u>No, this vehicle is a pick up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.</u>		
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: <u>2002</u> Odometer Reading: <u>117,991</u> Type of Vehicle: <u>Dodge pick up</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. <u>Yes.</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 _____ Agency Appointing Authority	 _____ Deputy Director Title	<u>7/8/13</u> _____ Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

State of Nevada - Budget Division
 Statewide View of BAV Schedules
 2013-2015 Biennium (FY14-15)
 L01 LEGISLATIVELY APPROVED

Budget Account:		4467 WILDLIFE - HABITAT									
Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt	Year1 Amt	Year2 Amt
		This John Deere 425 disc harrow will replace the existing 1984 John Deere disc harrow at Key Pittman Wildlife Management Area. The current John Deere disc harrow is 28 years old and has surpassed its useful life. Parts are becoming very hard to find for this unit and it experiences frequent breakdowns. The new piece of equipment will be used to cultivate soil in fields and food plots, as well as maintain firebreaks to aid in controlling prescribed burns. [See Attachment]									
05	8340	JOHN DEERE 670 SINGLE OFFSET DISC	15	0	1	0.00	27,383.00	0	27,383	0	27,383
		This John Deere 670 disc harrow will replace the existing John Deere disc harrow at Kirch Wildlife Management Area. The current John Deere disc harrow is 45 years old. It continually breaks down in the field and causes project delays, as well as delays due to locating parts for such an old equipment item. The new equipment item will be used to cultivate soil in fields and food plots, as well as maintain firebreaks to aid in controlling prescribed burns. [See Attachment]									
05	8340	JOHN DEERE 770G MOTOR GRADER	20	1	0	100,000.00	0.00	100,000	0	100,000	0
		This John Deere 770G motor grader will replace the existing John Deere 570A motor grader at Overton Wildlife Management Area. The current John Deere 570A motor grader is in excess of 30 years old, though it was purchased used by the Department in 2001. It has become very unreliable, expensive to repair and in some cases, it is very difficult to find repair parts. This new equipment item is used primarily to grade and maintain the extensive network of dirt roads that serve the area staff as well as the general public that use the area. The grader is also used to clear vegetation from the edges of roadways and to excavate shallow drainage ditches. It should be noted that we have determined that we can purchase a good quality used grader for about \$100,000 but we kept the original quote for a new grader as back-up. [See Attachment]									
				2	4			119,600	103,663		
Total for Decision Unit: E710											
E711		EQUIPMENT REPLACEMENT									
05	8310	VEHICLE-FLEET-LV-2.12 TRUCK 4WD 3/4 T;STD CAB;LNG BD	205	1	0	24,044.00	24,766.00	24,044	0	24,044	0
05	8310	VEHICLE-FLEET-LV-2.14 4WD TRUCK 3/4 T;CREW CAB;LONG BED	200	1	0	28,240.00	29,087.00	28,240	0	28,240	0
05	8310	VEHICLE-FLEET-LV-2.16 4WD TRUCK 3/4T;EXT CAB;LONG BED	210	1	0	26,552.00	27,349.00	26,552	0	26,552	0
05	8310	VEHICLE-FLEET-RNO/CC-2.10 TRUCK 4WD 1/2T;EXT CB;L BD	215	0	1	23,366.00	24,067.00	0	24,067	0	24,067
05	8310	VEHICLE-FLEET-RNO/CC-2.6 TRUCK 4WD 1/2T STD CAB;L BED	225	0	1	22,448.00	23,121.00	0	23,121	0	23,121
05	8310	VEHICLE-FLEET-RNO/CC-2.8 TRUCK 4WD 1/2 T;CREW CAB;L BED	220	0	1	27,697.00	28,528.00	0	28,528	0	28,528
05	7460	ALL TERRAIN TIRES	395	0	1	0.00	208.00	0	208	0	208
		PRIORITY VEHICLE #04 [See Attachment]									
05	7460	BLUETOOTH FOR PHONE(INCLUDES ONSTAR & CD PLAYER	430	0	1	0.00	591.00	0	591	0	591
		PRIORITY VEHICLE #06Annual dues for Child Care program. [See Attachment]									
05	7460	DUAL ALTERNATORS	325	1	0	315.00	0.00	315	0	315	0
		Vendor providing eligibility determination services in order to calculate and provide child care subsidies for low income parents. Functions were assumed by Clark County Urban League 7/1/10.PRIORITY VEHICLE #01 [See Attachment]									
05	7460	HEAVY DUTY ALTERNATOR	365	1	0	230.00	0.00	230	0	230	0
		PRIORITY VEHICLE #03 [See Attachment]									
05	7460	HEAVY DUTY ALTERNATOR	315	1	0	71.00	0.00	71	0	71	0
		Shredding services at 2500 West Washington officePRIORITY VEHICLE #01 [See Attachment]									
05	7460	INTEGRATED TRAILER BRAKE CONTROLLER	440	0	1	0.00	170.00	0	170	0	170
		Leased multi-function machines (copier/fax/printer) allocated to Quality activities at 2500 West Washington office. Office closed 6/30/10. Costs for leased copiers moved from Cat 20, 21 and 23 to Cat 04, since copiers were moved to DWSS district offices for staff relocated from West Washington.PRIORITY VEHICLE #06 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	445	0	1	0.00	277.00	0	277	0	277
		Annual fire extinguisher inspectionsPRIORITY VEHICLE #06 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	370	1	0	277.00	0.00	277	0	277	0
		PRIORITY VEHICLE #03 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	385	0	1	0.00	291.00	0	291	0	291
		PRIORITY VEHICLE #04 [See Attachment]									

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

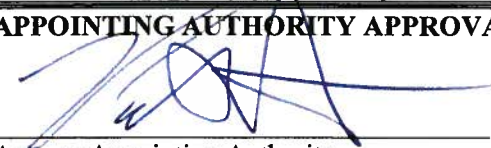

Agency Name: Department of Wildlife	Budget Account #: 4463
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: <u>1</u> Amount of the request: <u>\$26,288</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Pick up truck</p> <p>Mission of the requested vehicle(s): Transportation for job-related activities of a game warden in the Law Enforcement Division in Southern Nevada.</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</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"/> <u>1</u> 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>No, law enforcement vehicles are exempt (SAM 1308(6)).</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: 2003 Odometer Reading: 119,629 Type of Vehicle: Ford 3/4 Ton Extcab Pickup</p> <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <p><i>Please attach an additional sheet if necessary</i></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.</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
<p>APPOINTING AUTHORITY APPROVAL:</p> <p>   </p> <p> Agency Appointing Authority Title Date <u>7/8/13</u> </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>	

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

RECEIVED

JUL 09 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4463	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
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>\$28,066</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.: SUV		
Mission of the requested vehicle(s): Transportation for job-related activities of a game warden in the Law Enforcement Division in Southern Nevada.		
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 type="checkbox"/> 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. No, law enforcement vehicles are exempt (SAM 1308(6)).		
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: 2001 Odometer Reading: 122,209 Type of Vehicle: Ford Expedition	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 _____ Agency Appointing Authority	 _____ Deputy Director Title	<u>7/8/13</u> _____ Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

State of Nevada - Budget Division
 Statewide View of BAV Schedules
 2013-2015 Biennium (FY14-15)
 L01 LEGISLATIVELY APPROVED


Budget Account: 4463 WILDLIFE - LAW ENFORCEMENT

Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt
05	8270	MOUNTAIN TOP COMMUNICATIONS SHELTERS This outboard motor boat engine will replace the existing Honda Outboard Boat Engine (vintage 2000). Because it uses old technology resulting in heavy weight relative to horsepower, the current engine is causing unsafe operating conditions. Also, repair parts are getting difficult to obtain, making repairs more expensive. The Law Enforcement division uses this engine on the Navigational Aids vessel. This vessel is used to mark the channel, post signs (speed limit, hazard, swim area) and place buoys. [See Attachment]	141	4	3	8,226.00	8,226.00	32,904	24,678
05	8270	REPEATERS These mountain top shelters will replace existing shelters that are at least 25 years old. The old shelters are deteriorating, so that they cannot adequately protect the mountain top repeaters from weather, theft and vandalism. [See Attachment]	136	4	4	14,460.00	14,460.00	57,840	57,840
05	8270	SAFEBOAT COLLAR These repeaters replace existing repeaters at the following locations: Angel's Pk., Mt. Wilson, Mt. Perkins, Elko Mtn, Maggie Pk, Fox Mtn, Highland Pk., and Jack's Peak. Reliable communications are critical to the safety and efficiency of NDOW personnel. Department of Wildlife law enforcement personnel and biologists often work in remote locations. With the passage of time, various environmental factors (vibration, heat/cold, lighting, etc.) combine to make repeaters less reliable. Based on experience, the useful life is about ten years. Not replacing these repeaters will create a danger to and reduce the efficiency and effectiveness of our personnel. [See Attachment]	96	1	1	15,899.16	15,899.16	15,899.16	15,899.16
05	8340	2012 CAN AM OUTLANDER 650XT ATVS These boat collars will replace the existing boat collars on vessels NV3443EX and NV3431EX. The current boat collars are deteriorating due to weathering, creating a hazardous condition for NDOW's patrols. Boat collars are used for stability of the vessel and preventing spray inside the vessel. The boats are used by NDOW's Law Enforcement Division in boating safety enforcement. [See Attachment]	86	3	2	10,484.00	10,484.00	31,452	20,968
<p>Total for Decision Unit: E710</p> <p>19 12 262,498.16 145,797.16</p>									
E711	EQUIPMENT REPLACEMENT								
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	15	1	0	26,288.00	27,076.00	26,288	0
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	20	1	0	26,288.00	27,076.00	26,288	0
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	25	1	0	26,288.00	27,076.00	26,288	0
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	30	1	0	26,288.00	27,076.00	26,288	0
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	35	1	0	26,288.00	27,076.00	26,288	0
05	8310	VEHICLE-FLEET-LV-2.15 4WD TRUCK 3/4T;EXT CAB; SHORT BED	75	0	1	26,288.00	27,076.00	0	27,076
05	8310	VEHICLE-FLEET-LV-5.3 SPORT UTILITY VEH:1/2 TON;4X4;6 DOOR;5-6 PASS	5	1	0	28,066.00	28,908.00	28,066	0
05	8310	VEHICLE-FLEET-LV-5.3 SPORT UTILITY VEH:1/2 TON;4X4;6 DOOR;5-6 PASS	65	0	1	28,066.00	28,908.00	0	28,908
05	8310	VEHICLE-FLEET-RNO/CC-2.10 TRUCK 4WD 1/2T;EXT CB:L BD	10	1	0	23,366.00	24,067.00	23,366	0
05	8310	VEHICLE-FLEET-RNO/CC-2.15 4WD TRUCK 3/4T;EXT CAB;S BD	45	0	1	25,969.00	26,748.00	0	26,748
05	8310	VEHICLE-FLEET-RNO/CC-2.15 4WD TRUCK 3/4T;EXT CAB;S BD	50	0	1	25,969.00	26,748.00	0	26,748
05	8310	VEHICLE-FLEET-RNO/CC-2.15 4WD TRUCK 3/4T;EXT CAB;S BD	55	0	1	25,969.00	26,748.00	0	26,748
05	8310	VEHICLE-FLEET-RNO/CC-5.3 SPORT UTILITY VEH:1/2 TON;4X4;6 DOOR; 5-6 PASS	70	0	1	27,748.00	28,581.00	0	28,581
05	7460	BLUETOOTH FOR PHONE	95	5	4	591.00	591.00	2,955	2,364
<p>PRIORITY VEHICLES 15, 20, 25, 30, 35, 45, 50, 55, 75 [See Attachment]</p>									
05	7460	DEEP TINT GLASS	100	5	4	128.00	128.00	640	512
<p>PRIORITY VEHICLES 15, 20, 25, 30, 35, 45, 50, 55, 75 [See Attachment]</p>									
05	7460	GALLS SIREN SPEAKER FOR LAW ENFORCEMENT VEHICLE	90	7	5	164.00	164.00	1,148	820
<p>PRIORITY VEHICLES 5, 10, 15, 20, 25, 30, 35, 50, 55, 65, 70, 75 [See Attachment]</p>									
05	7460	KEYLESS ENTRY	120	5	4	379.00	379.00	1,895	1,516



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

RECEIVED
JUL 09 2013
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4462	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
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>\$28,015</u>		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>1/2 ton pick up truck</u>		
Mission of the requested vehicle(s): <u>Conservation Education is responsible for public affairs and marketing, hunter/angler and wildlife education, the volunteer program, publications, and website administration.</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>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. <u>No, this vehicle is a transport truck and is not required to comply with Smart Way or Smart Way Elite Requirements.</u>		
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: <u>1993</u> Odometer Reading: <u>120,553</u> Type of Vehicle: <u>Jeep sport utility</u> <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. <u>Yes.</u> <hr/> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
APPOINTING AUTHORITY APPROVAL:		
 _____ Agency Appointing Authority	<u>Deputy Director</u> _____ Title	<u>7/8/13</u> _____ Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
 _____ Board of Examiners	 _____ Date	

State of Nevada - Budget Division
 Statewide View of BAV Schedules
 2013-2015 Biennium (FY14-15)
 L01 LEGISLATIVELY APPROVED

Budget Account:		4462 WILDLIFE - CONSERVATION EDUCATION									
Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt	Year1 Amt	Year2 Amt
		Small equipment under \$1,000.00 purchased in the base year such as audio-visual, GPS units, cameras, binoculars, spotting scopes, calculators, chairs, bookshelves, file cabinets, credenza, desks etc. that are used to replace existing equipment items on a regular as needed basis for employees in the Conservation Education Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
Total for Decision Unit: B000				11	11			54,486	54,486		54,486
E711		EQUIPMENT REPLACEMENT									
05	8310	VEHICLE-FLEET-LV-2.8 TRUCK 4WD 1/2 TON;CREW CAB;LONG BED	11	1	0	28,015.00	28,855.00	28,015	0		0
05	8310	VEHICLE-FLEET-RNO/CC-2.13 2WD TRUCK 3/4T;CRW CAB;S BD	13	0	1	24,804.00	25,549.00	0	25,549		25,549
05	7460	CAB STEPS BACK	65	0	1	0.00	307.00	0	307		307
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	EXTRA KEY & FOB	55	1	0	160.00	0.00	160	0		0
		PRIORITY VEHICLE 11 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	75	0	1	0.00	291.00	0	291		291
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	35	1	0	390.00	0.00	390	0		0
		PRIORITY VEHICLE 11 [See Attachment]									
05	7460	MAX. TRAILER TOW PKG	40	1	0	780.00	0.00	780	0		0
		PRIORITY VEHICLE 11 [See Attachment]									
05	7460	REAR STABILIZER BAR	60	0	1	0.00	120.00	0	120		120
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	SPRAY-IN BEDLINER	50	1	0	400.00	0.00	400	0		0
		PRIORITY VEHICLE 11 [See Attachment]									
05	7460	SYNCH (HANDS FREE PHONE)	85	0	1	0.00	386.00	0	386		386
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	TAILGATE ASSIST AND STEP	80	0	1	0.00	311.00	0	311		311
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	UPLIFTER SWITCHES	70	0	1	0.00	104.00	0	104		104
		PRIORITY VEHICLE 13 [See Attachment]									
05	7460	V8 5.0L FFV GAS	45	1	0	830.00	0.00	830	0		0
		PRIORITY VEHICLE 11 [See Attachment]									
Total for Decision Unit: E711				6	7			30,575	27,068		27,068
Total for Budget Account: 4462				17	18			85,061	81,554		81,554

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 11, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Sherri Barkdull, Budget Analyst IV *SKB*
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.

DEPARTMENT OF WILDLIFE – DIVERSITY

Agenda Item Write-up:

New Vehicle Request: Pursuant to NRS 334.010 the Department of Wildlife-Diversity is requesting the authority to purchase two (2) vehicles for a total of \$47,050.

Additional Information:

The NDOW-Diversity seeks approval to purchase two replacement vehicles. These vehicle purchases were approved during the 2013 Legislative Session in decision unit E711.

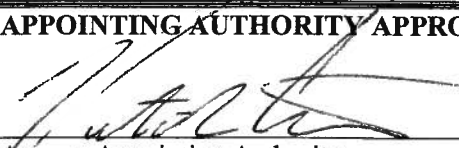
Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: _____ ACTION ITEM: _____

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

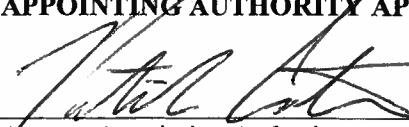
RECEIVED
JUL 09 2013

Agency Name: Department of Wildlife	Budget Account #: 4466	
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526	
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>23,366.00</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 truck		
Mission of the requested vehicle(s): This vehicle will be located in Carson City and used for biological survey work in the Tahoe and Carson City areas.		
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 type="checkbox"/> 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. No, this vehicle is a pick up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.		
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: 2000 Odometer Reading: 112,463 Type of Vehicle: Chevrolet pick up Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. Yes. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 _____ Agency Appointing Authority	Deputy Director _____ Title	7/8/13 _____ Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

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

RECEIVED
JUL 09 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND FINANCIAL PLANNING DIVISION

Agency Name: Department of Wildlife	Budget Account #: 4466
Contact Name: J. Dale Hansen	Telephone Number: 775-688-1526
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>23,684.00</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.: <u>Pick up truck</u>	
Mission of the requested vehicle(s): <u>This vehicle will be located in Las Vegas and used for biological diversity survey work in the Clark County.</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> 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. <u>No, this vehicle is a pick up truck and is not required to comply with Smart Way or Smart Way Elite Requirements.</u>	
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: <u>2002</u> Odometer Reading: <u>129,514</u> Type of Vehicle: <u>Ford pick up</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced. <u>Yes.</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
 Agency Appointing Authority	<u>Deputy Director</u> Title
	<u>7/8/13</u> Date
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
 Board of Examiners	 Date

State of Nevada - Budget Division
 Statewide View of BAV Schedules
 2013-2015 Biennium (FY14-15)
 L01 LEGISLATIVELY APPROVED

Schedule Selection G: Equipment Schedule

Budget Account:		4466 WILDLIFE - DIVERSITY									
Diversity Division's equipment request for fiscal year 2014 and fiscal year 2015. [See Attachment]											
Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt		
B000	BASE										
11	7460	EQUIPMENT UNDER \$1,000	10	1	1	6,944.00	6,944.00	6,944	6,944		6,944
		Small equipment under \$1,000.00 purchased in the base year such as audio-visual, GPS units, cameras, binoculars, spotting scopes, calculators, chairs, bookshelves, file cabinets, credenza, desks etc. that are used to replace existing items on a regular as needed basis for employees in the Diversity Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
11	7465	EQUIPMENT \$1,000 TO \$5,000	25	1	1	1,708.00	1,708.00	1,708	1,708		1,708
		Equipment \$1,000.00 - \$5,000.00 purchased in the base year such as storage containers, generators, small utility trailers, water and barometer meters, etc. that are used to replace existing equipment on an on-going basis for employees in the Diversity Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
12	7460	EQUIPMENT UNDER \$1,000	15	1	1	207.00	207.00	207	207		207
		Small equipment under \$1,000.00 purchased in the base year such as audio-visual, GPS units, cameras, binoculars, spotting scopes, calculators, chairs, bookshelves, file cabinets, credenza, desks etc. that are used to replace existing items on a regular as needed basis for employees in the Diversity Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
13	7460	EQUIPMENT UNDER \$1,000	20	1	1	103.00	103.00	103	103		103
		Small equipment under \$1,000.00 purchased in the base year such as audio-visual, GPS units, cameras, binoculars, spotting scopes, calculators, chairs, bookshelves, file cabinets, credenza, desks etc. that are used to replace existing items on a regular as needed basis for employees in the Diversity Division. The state fiscal year 2014 and state fiscal year 2015 amounts are based on a three-year average. [See Attachment]									
Total for Decision Unit: B000				4	4	8,962	8,962	8,962	8,962		8,962

E711	EQUIPMENT REPLACEMENT										
05	8310	VEHICLE-FLEET-LV-2.10 TRUCK 4WD 1/2 T;EXT CAB; LONG BD	2	1	0	23,684.00	24,394.00	23,684	24,394		0
05	8310	VEHICLE-FLEET-RNO/CC-2.10 TRUCK 4WD 1/2T;EXT CB;L BD	1	1	0	23,366.00	24,067.00	23,366	24,067		0
05	8310	VEHICLE-FLEET-RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	3	0	1	26,234.00	27,021.00	0	27,021		27,021
05	8310	VEHICLE-FLEET-RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	4	0	1	26,234.00	27,021.00	0	27,021		27,021
05	7460	CRUISE CONTROL	130	0	1	0.00	575.00	0	575		575
		PRIORITY VEHICLE # 03 [See Attachment]									
05	7460	CRUISE CONTROL	140	0	1	0.00	575.00	0	575		575
		PRIORITY VEHICLE # 04 [See Attachment]									
05	7460	DAYTIME RUNNING LAMPS	65	0	0	34.00	0.00	0	0		0
		PRIORITY VEHICLE # 01 [See Attachment]									
05	7460	DAYTIME RUNNING LIGHTS	110	1	0	37.00	0.00	37	0		0
		PRIORITY VEHICLE # 02 [See Attachment]									
05	7460	ELECTRONIC SHIFT ON FLY (4WD ONLY)	100	1	0	154.00	0.00	154	0		0
		PRIORITY VEHICLE # 02 [See Attachment]									
05	7460	INTEGRATED TRAILER BRAKE	50	0	0	196.00	0.00	0	0		0
		PRIORITY VEHICLE # 01 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	55	0	0	276.00	0.00	0	0		0
		PRIORITY VEHICLE # 01 [See Attachment]									
05	7460	LIMITED SLIP DIFFERENTIAL	85	1	0	291.00	0.00	291	0		0
		PRIORITY VEHICLE # 02 [See Attachment]									
05	7460	LT245/70R17E ON OFF ROAD TIRES	70	0	0	85.00	0.00	0	0		0

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 1, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Julie Strandberg, Budget Analyst
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.

DEPARTMENT OF PUBLIC SAFETY – HIGHWAY PATROL

Agenda Item Write-up:

Pursuant to NRS 334.010 the Highway Patrol is requesting the authority to purchase one-hundred ninety-nine (199) replacement vehicles for a total of \$10,936,337.

Additional Information:

Pursuant to Assembly Bill 470 of the 2013 Legislative Session an appropriation is made to the Division in the amount of \$10,936,337 to replace fleet vehicles. This is a request to replace fleet vehicles which have exceeded the 105,000 mile threshold for sedans and 125,000 for trucks and sports utility vehicles throughout the 2013-2015 biennium.

Statutory Authority:

Assembly Bill 470 of the 2013 Legislative Session authorized an appropriation to replace fleet vehicles.

REVIEWED:
ACTION ITEM:

Brian Sandoval
Governor



Chris Perry
Director

James M. Wright
Deputy Director

Director's Office

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

Memorandum


RECEIVED

JUN 26 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

DATE: June 25, 2013

TO: Julie Strandberg, Budget Analyst IV
Dept. of Administration, Budget Division

FROM: Mark Teska, Administrative Services Officer IV 

SUBJECT: Board of Examiners Request for Vehicle Purchase Approval

The Department of Public Safety (DPS) Nevada Highway Patrol division (NHP) is requesting approval from the Board of Examiners (BOE) to purchase vehicles pursuant to Assembly Bill 470 of the 2013 Legislative Session, One-Shot Appropriation. The NHP Budget Account 4713 will fund this request. Work programs C26824 and C26825 have been submitted to receive and balance forward the funding for this request in Budget Account 4713.

DPS is requesting this item be placed on the August 2013 Board of Examiners agenda.

Assembly Bill No. 470—Committee on Ways and Means

CHAPTER.....

AN ACT making appropriations to the Nevada Highway Patrol Division of the Department of Public Safety to replace fleet vehicles and motorcycles that have exceeded the mileage threshold; and providing other matters properly relating thereto.

EXPLANATION — Matter in *bolded italics* is new, matter between brackets ~~(omitted material)~~ is material to be omitted

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. There is hereby appropriated from the State Highway Fund to the Nevada Highway Patrol Division of the Department of Public Safety:



1. The sum of \$10,936,337 to replace fleet vehicles that have exceeded the mileage threshold; and
2. The sum of \$693,726 to replace fleet motorcycles that have exceeded the mileage threshold.

Sec. 2. Any remaining balance of the appropriations made by section 1 of this act must not be committed for expenditure after June 30, 2015, by the Nevada Highway Patrol Division of the Department of Public Safety or any entity to which money from the appropriations is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 18, 2015, by either the Nevada Highway Patrol Division or the entity to which the money was subsequently granted or transferred, and must be reverted to the State Highway Fund on or before September 18, 2015.

Sec. 3. This act becomes effective upon passage and approval.



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

Agency Name: Nevada Highway Patrol	Budget Account #: 4713
Contact Name: Johnean Morrison	Telephone Number: 775-684-4883
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: 199	Amount of the request: 10,936,337.00
Is the requested vehicle(s) new or used: new	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Ford Interceptor	
Mission of the requested vehicle(s): Law Enforcement Patrol Vehicles	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: E-888, AB 470 of the 2013 Legislative Session If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 199 Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. N/A - Law Enforcement	
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: See Attached 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. Yes If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL:	
	
Agency Appointing Authority	Title
	Date 06-25-13
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
Board of Examiners	Date

**SCHEDULE P
FISCAL YEAR 2012 AND 2013 REPLACEMENT EQUIPMENT REQUEST**

This spreadsheet must accompany any E888 decision unit and must be attached electronically to the Agency Request.

Budget Account #:

4713

Budget Account Title:

HIGHWAY PATROL DIVISION

Dec. Unit	Cat.	Object Code (GL)	Item Requested	Item being Replaced (Unit Number)	State ID #	Model Year	Miles to EOL	Projected EOL Mileage Date	Command
E888	13		VEHICLE	02415	256693	2002	35,805	07/2014	SC
E888	13		VEHICLE	08214	305008	2008	8,998	01/2013	SC
E888	13		VEHICLE	08226	305018	2008	15,689	03/2013	NCE
E888	13		VEHICLE	01304	255380	2001	29,941	05/2014	NCW
E888	13		VEHICLE	03979	268724	2003	50,438	10/18/2014	NCE
E888	13		VEHICLE	02969	276836	2002	47,719	3/18/2015	SC
E888	13		VEHICLE	08152	305006	2008	40,763	10/18/2014	SC
E888	13		VEHICLE	08144	305010	2008	37,534	8/18/2014	SC
E888	13		VEHICLE	08145	305011	2008	44,409	1/18/2015	SC
E888	13		VEHICLE	08109	305014	2008	37,715	3/18/2014	NCE
E888	13		VEHICLE	08244	305015	2008	25,403	9/18/2013	NCE
E888	13		VEHICLE	08094	305019	2008	44,106	7/18/2014	NCE
E888	13		VEHICLE	08211	305027	2008	22,380	11/18/2013	NCW
E888	13		VEHICLE	08564	305289	2008	52,924	6/18/2015	SC
E888	13		VEHICLE	08566	305293	2008	26,832	1/18/2014	SC
E888	13		VEHICLE	08288	305295	2008	36,769	7/18/2014	SC
E888	13		VEHICLE	08565	305300	2008	18,535	7/18/2013	SC
E888	13		VEHICLE	08318	305309	2008	17,225	7/18/2013	NCW
E888	13		VEHICLE	09263	313380	2009	2,550	8/18/2012	NCE
E888	13		VEHICLE	09063	313957	2009	25,553	9/18/2013	NCE
E888	13		VEHICLE	09027	313958	2009	46,831	8/18/2014	NCE
E888	13		VEHICLE	07147	295646	2007	11,459	01/2013	NCW
E888	13		VEHICLE	08977	303036	2008	15,987	01/2013	NCE
E888	13		VEHICLE	08483	308004	2008	16,134	01/2013	NCE
E888	13		VEHICLE	08317	302918	2008	14,950	02/2013	NCW
E888	13		VEHICLE	04255	272717	2004	16,431	03/2013	SC
E888	13		VEHICLE	06058	287494	2006	15,393	03/2013	NCW
E888	13		VEHICLE	06339	287497	2006	16,779	03/2013	NCW
E888	13		VEHICLE	07371	295328	2007	16,127	03/2013	SC

**SCHEDULE P
FISCAL YEAR 2012 AND 2013 REPLACEMENT EQUIPMENT REQUEST**

This spreadsheet must accompany any E888 decision unit and must be attached electronically to the Agency Request.

Budget Account #: 4713

Budget Account Title: HIGHWAY PATROL DIVISION

Dec. Unit	Cat.	Object Code (GL)	Item Requested	Item being Replaced (Unit Number)	State ID #	Model Year	Miles to EOL	Projected EOL Mileage Date	Command
E888	13		VEHICLE	08396	302066	2008	17,261	04/2013	SC
E888	13		VEHICLE	05330	279624	2005	19,751	05/2013	SC
E888	13		VEHICLE	07278	291450	2007	20,010	05/2013	SC
E888	13		VEHICLE	07477	291824	2007	19,186	05/2013	SC
E888	13		VEHICLE	08366	302083	2008	20,790	06/2013	SC
E888	13		VEHICLE	07064	291451	2007	22,415	07/2013	SC
E888	13		VEHICLE	08435	303034	2008	30,678	07/2013	NCE
E888	13		VEHICLE	08061	303046	2008	24,757	08/2013	NCW
E888	13		VEHICLE	08286	302916	2008	30,129	10/2013	NCW
E888	13		VEHICLE	06131	285351	2006	30,822	11/2013	SC
E888	13		VEHICLE	08513	302377	2008	31,003	11/2013	SC
E888	13		VEHICLE	08216	302867	2008	35,987	01/2014	NCW
E888	13		VEHICLE	06111	288034	2006	40,293	04/2014	NCW
E888	13		VEHICLE	06055	291453	2006	53,220	05/2014	NCE
E888	13		VEHICLE	08548	302906	2008	42,426	05/2014	SC
E888	13		VEHICLE	06192	288037	2006	47,190	07/2014	NCW
E888	13		VEHICLE	03343	262779	2003	9,997	12/18/2012	NCW
E888	13		VEHICLE	05099	279637	2005	22,916	7/18/2013	SC
E888	13		VEHICLE	06388	285899	2006	25,444	8/18/2013	NCW
E888	13		VEHICLE	06073	286177	2006	34,159	1/18/2014	SC
E888	13		VEHICLE	06025	287491	2006	14,195	2/18/2013	NCW
E888	13		VEHICLE	06411	288039	2006	44,428	6/18/2014	NCW
E888	13		VEHICLE	07318	290901	2007	53,164	10/18/2014	NCW
E888	13		VEHICLE	07324	290902	2007	51,718	10/18/2014	NCW
E888	13		VEHICLE	07349	290905	2007	35,439	1/18/2014	NCW
E888	13		VEHICLE	07390	290906	2007	48,915	8/18/2014	NCW
E888	13		VEHICLE	07156	295305	2007	23,911	7/18/2013	SC
E888	13		VEHICLE	07154	295312	2007	19,710	5/18/2013	SC
E888	13		VEHICLE	07280	295320	2007	-8,317	2/18/2012	SC

**SCHEDULE P
FISCAL YEAR 2012 AND 2013 REPLACEMENT EQUIPMENT REQUEST**

This spreadsheet must accompany any E888 decision unit and must be attached electronically to the Agency Request.

Budget Account #: 4713

Budget Account Title: HIGHWAY PATROL DIVISION

Dec. Unit	Cat.	Object Code (GL)	Item Requested	Item being Replaced (Unit Number)	State ID #	Model Year	Miles to EOL	Projected EOL Mileage Date	Command
E888	13		VEHICLE	07331	295323	2007	43,319	6/18/2014	SC
E888	13		VEHICLE	07292	295324	2007	40,415	4/18/2014	SC
E888	13		VEHICLE	07219	295383	2007	45,201	6/18/2014	NCW
E888	13		VEHICLE	07379	295818	2007	16,309	3/18/2013	NCW
E888	13		VEHICLE	07322	295831	2007	29,055	10/18/2013	NCW
E888	13		VEHICLE	08237	302067	2008	60,356	3/18/2015	SC
E888	13		VEHICLE	08361	302068	2008	53,274	11/18/2014	NCW
E888	13		VEHICLE	08096	302070	2008	61,398	4/18/2015	SC
E888	13		VEHICLE	08381	302071	2008	58,773	2/18/2015	SC
E888	13		VEHICLE	08405	302075	2008	46,676	7/18/2014	NCW
E888	13		VEHICLE	08408	302077	2008	43,756	6/18/2014	SC
E888	13		VEHICLE	08430	302080	2008	67,447	6/18/2015	NCW
E888	13		VEHICLE	08070	302090	2008	63,065	4/18/2015	SC
E888	13		VEHICLE	08220	302091	2008	7,411	10/18/2012	SC
E888	13		VEHICLE	08155	302092	2008	65,188	6/18/2015	SC
E888	13		VEHICLE	08174	302093	2008	33,372	12/18/2013	SC
E888	13		VEHICLE	08204	302102	2008	59,424	2/18/2015	SC
E888	13		VEHICLE	08252	302104	2008	54,935	12/18/2014	SC
E888	13		VEHICLE	08035	302106	2008	53,227	11/18/2014	SC
E888	13		VEHICLE	08066	302108	2008	60,037	3/18/2015	SC
E888	13		VEHICLE	08093	302109	2008	4,652	9/18/2012	SC
E888	13		VEHICLE	08003	302113	2008	64,200	4/18/2015	NCW
E888	13		VEHICLE	08139	302114	2008	54,835	11/18/2014	NCW
E888	13		VEHICLE	08213	302117	2008	61,130	3/18/2015	NCW
E888	13		VEHICLE	08159	302118	2008	38,318	3/18/2014	NCW
E888	13		VEHICLE	08350	302338	2008	57,328	6/18/2014	NCE
E888	13		VEHICLE	08463	302339	2008	-22,091	9/18/2011	NCE
E888	13		VEHICLE	08085	302346	2008	64,972	5/18/2015	SC
E888	13		VEHICLE	08494	302348	2008	56,118	1/18/2015	SC

**SCHEDULE P
FISCAL YEAR 2012 AND 2013 REPLACEMENT EQUIPMENT REQUEST**

This spreadsheet must accompany any E888 decision unit and must be attached electronically to the Agency Request.

Budget Account #: 4713

Budget Account Title: HIGHWAY PATROL DIVISION

Dec. Unit	Cat.	Object Code (GL)	Item Requested	Item being Replaced (Unit Number)	State ID #	Model Year	Miles to EOL	Projected EOL Mileage Date	Command
E888	13		VEHICLE	08497	302350	2008	61,989	4/18/2015	SC
E888	13		VEHICLE	08248	302353	2008	65,184	6/18/2015	SC
E888	13		VEHICLE	08490	302354	2008	54,921	12/18/2014	SC
E888	13		VEHICLE	08074	302355	2008	42,440	5/18/2014	SC
E888	13		VEHICLE	08264	302357	2008	48,602	9/18/2014	SC
E888	13		VEHICLE	08130	302359	2008	58,438	2/18/2015	SC
E888	13		VEHICLE	08498	302362	2008	34,579	1/18/2014	SC
E888	13		VEHICLE	08499	302363	2008	64,574	5/18/2015	SC
E888	13		VEHICLE	08504	302368	2008	21,032	6/18/2013	SC
E888	13		VEHICLE	08505	302369	2008	37,244	3/18/2014	SC
E888	13		VEHICLE	08506	302370	2008	14,648	2/18/2013	SC
E888	13		VEHICLE	08514	302378	2008	10,741	12/18/2012	SC
E888	13		VEHICLE	08517	302381	2008	51,792	10/18/2014	SC
E888	13		VEHICLE	08241	302385	2008	65,193	5/18/2015	NCW
E888	13		VEHICLE	08095	302390	2008	56,953	12/18/2014	NCW
E888	13		VEHICLE	08279	302391	2008	31,721	8/18/2013	NCE
E888	13		VEHICLE	08302	302393	2008	39,190	11/18/2013	NCE
E888	13		VEHICLE	08482	302394	2008	63,945	9/18/2014	NCE
E888	13		VEHICLE	08422	302397	2008	47,651	2/18/2014	NCE
E888	13		VEHICLE	08039	302398	2008	55,024	5/18/2014	NCE
E888	13		VEHICLE	08055	302399	2008	76,297	2/18/2015	NCE
E888	13		VEHICLE	08521	302633	2008	59,940	2/18/2015	NCW
E888	13		VEHICLE	08525	302634	2008	59,765	3/18/2015	SC
E888	13		VEHICLE	08524	302637	2008	60,529	2/18/2015	NCW
E888	13		VEHICLE	08534	302774	2008	18,436	4/18/2013	SC
E888	13		VEHICLE	08005	302860	2008	65,506	5/18/2015	NCW
E888	13		VEHICLE	08236	302863	2008	54,389	11/18/2014	NCW
E888	13		VEHICLE	08077	302864	2008	56,939	12/18/2014	NCW
E888	13		VEHICLE	08325	302865	2008	61,468	3/18/2015	NCW



**SCHEDULE P
FISCAL YEAR 2012 AND 2013 REPLACEMENT EQUIPMENT REQUEST**

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E888	13		VEHICLE	08539	302898	2008	15,855	3/18/2013	SC
E888	13		VEHICLE	08553	302902	2008	65,081	5/18/2015	SC
E888	13		VEHICLE	08556	302907	2008	32,217	12/18/2013	SC
E888	13		VEHICLE	08550	302908	2008	11,411	1/18/2013	SC
E888	13		VEHICLE	08166	302913	2008	56,357	12/18/2014	NCW
E888	13		VEHICLE	08122	303035	2008	48,401	8/18/2014	NCW
E888	13		VEHICLE	08496	303038	2008	28,670	6/18/2013	NCE
E888	13		VEHICLE	08458	303039	2008	-5,200	4/18/2012	NCE
E888	13		VEHICLE	08090	303045	2008	-4,103	4/18/2012	NCW
E888	13		VEHICLE	08143	303048	2008	51,631	10/18/2014	NCW
E888	13		VEHICLE	08298	303049	2008	-5,769	3/18/2012	NCW
E888	13		VEHICLE	08560	303200	2008	-4,104	4/18/2012	NCW
E888	13		VEHICLE	08559	303201	2008	41,869	5/18/2014	NCW
E888	13		VEHICLE	08262	304392	2008	34,249	9/18/2013	NCE
E888	13		VEHICLE	08113	305544	2008	38,785	11/18/2013	NCE
E888	13		VEHICLE	08198	307762	2008	15,114	3/18/2013	SC
E888	13		VEHICLE	08334	307764	2008	62,651	4/18/2015	SC
E888	13		VEHICLE	08341	307767	2008	34,300	1/18/2014	SC
E888	13		VEHICLE	08124	307865	2008	59,140	2/18/2015	NCW
E888	13		VEHICLE	08186	307867	2008	18,406	4/18/2013	NCW
E888	13		VEHICLE	08390	307870	2008	30,156	10/18/2013	NCW
E888	13		VEHICLE	08004	307872	2008	46,983	7/18/2014	NCW
E888	13		VEHICLE	08403	307873	2008	26,707	9/18/2013	NCW
E888	13		VEHICLE	08420	307876	2008	62,439	4/18/2015	SC
E888	13		VEHICLE	08395	307878	2008	27,768	9/18/2013	SC
E888	13		VEHICLE	08373	307879	2008	43,376	6/18/2014	SC
E888	13		VEHICLE	08478	307882	2008	33,056	12/18/2013	SC
E888	13		VEHICLE	08468	307999	2008	14,899	2/18/2013	NCW
E888	13		VEHICLE	08467	308000	2008	22,064	6/18/2013	NCW

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E888	13		VEHICLE	08466	308001	2008	41,680	4/18/2014	NCW
E888	13		VEHICLE	08481	308002	2008	51,999	10/18/2014	NCW
E888	13		VEHICLE	08303	308003	2008	-9,195	3/18/2012	NCE
E888	13		VEHICLE	08240	308007	2008	23,085	4/18/2013	NCE
E888	13		VEHICLE	08571	308990	2008	10,089	12/18/2012	NCW
E888	13		VEHICLE	08570	308991	2008	53,876	11/18/2014	NCW
E888	13		VEHICLE	08487	308992	2008	42,399	5/18/2014	NCW
E888	13		VEHICLE	08474	308993	2008	38,164	3/18/2014	NCW
E888	13		VEHICLE	11418	324143	2011	73,546	1/18/2015	NCE
E888	13		VEHICLE	06324	285495	2006	12,449	03/2013	NCW
E888	13		VEHICLE	05422	278539	2005	16,492	06/2013	NCW
E888	13		VEHICLE	06481	285474	2006	23,335	06/2013	SC
E888	13		VEHICLE	07282	296447	2007	23,262	06/2013	SC
E888	13		VEHICLE	07382	296461	2007	21,757	06/2013	NCE
E888	13		VEHICLE	06428	288075	2006	19,747	08/2013	NCW
E888	13		VEHICLE	06008	288528	2006	24,918	08/2013	NCE
E888	13		VEHICLE	07383	296452	2007	26,119	08/2013	SC
E888	13		VEHICLE	03211	264547	2003	21,235	09/2013	NCW
E888	13		VEHICLE	06362	285399	2006	27,585	09/2013	NCE
E888	13		VEHICLE	07209	296442	2007	28,722	09/2013	SC
E888	13		VEHICLE	07227	296451	2007	28,923	09/2013	SC
E888	13		VEHICLE	06100	290516	2006	22,142	10/2013	NCW
E888	13		VEHICLE	05329	278536	2005	36,426	01/2014	SC
E888	13		VEHICLE	05190	278538	2005	34,473	01/2014	NCE
E888	13		VEHICLE	08187	301543	2008	34,735	01/2014	NCE
E888	13		VEHICLE	06441	287530	2006	39,530	03/2014	SC
E888	13		VEHICLE	06385	285398	2006	31,172	04/2014	NCW
E888	13		VEHICLE	06344	287291	2006	36,143	07/2014	NCW
E888	13		VEHICLE	03319	264544	2003	5,765	10/18/2012	NCW

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E888	13		VEHICLE	03455	264546	2003	33,387	5/18/2014	NCW
E888	13		VEHICLE	04169	272314	2004	29,053	2/18/2014	NCW
E888	13		VEHICLE	05457	278693	2005	46,245	6/18/2014	SC
E888	13		VEHICLE	06465	285400	2006	44,900	1/18/2015	NCW
E888	13		VEHICLE	06359	285402	2006	30,098	3/18/2014	NCW
E888	13		VEHICLE	06016	285476	2006	18,717	4/18/2013	SC
E888	13		VEHICLE	06269	287151	2006	9,786	1/18/2013	NCW
E888	13		VEHICLE	06401	287245	2006	24,384	11/18/2013	NCW
E888	13		VEHICLE	06184	287292	2006	44,383	7/18/2014	NCE
E888	13		VEHICLE	06215	287529	2006	57,410	12/18/2014	SC
E888	13		VEHICLE	06175	288076	2006	42,301	11/18/2014	NCW
E888	13		VEHICLE	06452	288533	2006	16,205	6/18/2013	NCW
E888	13		VEHICLE	06439	288534	2006	8,003	12/18/2012	NCW
E888	13		VEHICLE	06449	288535	2006	27,572	9/18/2013	SC
E888	13		VEHICLE	07334	296448	2007	41,224	4/18/2014	SC
E888	13		VEHICLE	07233	296449	2007	50,790	9/18/2014	SC
E888	13		VEHICLE	07231	296450	2007	45,327	6/18/2014	SC
E888	13		VEHICLE	07414	296456	2007	54,585	10/18/2014	SC
E888	13		VEHICLE	07406	296457	2007	46,301	6/18/2014	SC
E888	13		VEHICLE	08112	301540	2008	14,830	2/18/2013	SC
E888	13		VEHICLE	08183	301542	2008	42,520	12/18/2014	NCW
E888	13		VEHICLE	08119	301544	2008	35,561	1/18/2014	SC
E888	13		VEHICLE	08114	301545	2008	31,521	12/18/2013	NCE
E888	13		VEHICLE	08116	301548	2008	23,210	7/18/2013	NCE
E888	13		VEHICLE	08491	302990	2008	35,009	6/18/2014	NCW

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: June 25, 2013
To: Jeff Mohlenkamp, Clerk of the Board
Department of Administration
From: Cathy Gregg, Budget Analyst
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.

DEPARTMENT OF ADMINISTRATION – VICTIMS OF CRIME PROGRAM (VOCP)

Agenda Item Write-up:

Pursuant to NRS 217.117, Section 3, the Board may review the case and render a decision within 15 days of the Board meeting; or, if they would like to hear the case with the appellant present, they can schedule the case to be heard at their next meeting.

Stacy Howell

The issue before the Board is the appeal of a denial for VOCP assistance due to later reporting of crimes to police. Ms. Howell has filed multiple requests for hearing and appeal, some of which were untimely, and has failed to appear at several hearings.

Additional Information:

The VOCP recommends that the Board uphold the denial of this claim.

Statutory Authority:

NRS 217.117, Section 3.

REVIEWED:
ACTION ITEM:

RECEIVED

JUN 14 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION



**DEPARTMENT OF ADMINISTRATION
VICTIMS OF CRIME**

2200 S. Rancho Dr., #130

Las Vegas, Nevada 89102

Fax (702) 486-2825

(702) 486-2740

June 11, 2013

To: Jeff Mohlenkamp, Clerk, Board of Examiners

From: Rebecca Salazar, Program Manager

Re: Appeal of Stacy Howell
Claim Nos. 13-10022162-LV
13-10022379-LV

Case Summary

Stacy Howell appeals the denial of her requests for VOCP assistance due to late reporting of the crimes to police. Ms. Howell was the victim of domestic violence on May 17, 2012 and of assault by a different offender on May 31, 2012, both of which were reported to police on July 16, 2012, which is beyond the five day timeframe allowed by NRS 217.210. Ms. Howell has filed multiple requests for hearing and appeal, some of which were untimely, and has failed to appear at several hearings.

Recommendation

NRS 217.210 Limitations on time for making order for payment of compensation; exceptions.

1. Except as otherwise provided in subsection 2, an order for the payment of compensation must not be made unless the application is made within 1 year after the date of the personal injury or death on which the claim is based, unless waived by the Board of Examiners or a person designated by the Board for good cause shown, and the personal injury or death was the result of an incident or offense that was reported to the police within 5 days of its occurrence or, if the incident or offense could not reasonably have been reported within that period, within 5 days of the time when a report could reasonably have been made.

NRS 217.112 Hearing before hearing officer: Request by applicant; failure to request hearing excused under certain circumstances; notice of change of address.

1. An applicant who is subject to the provisions of this chapter may request a hearing before a hearing officer on any matter within the hearing officer's authority. The compensation officer shall provide with his or her decision the necessary information for requesting such a hearing.

2. An applicant aggrieved by a compensation officer's decision may appeal the decision by filing a request for a hearing before a hearing officer. Such a request must be filed within 60 days after the decision was mailed by the Clerk or compensation officer.

NRS 217.117 Appeal of decision of hearing officer or appeals officer; powers and duties of appeals officer.

1. The applicant or Clerk of the Board may, within 15 days after the hearing officer renders a decision, appeal the decision to an appeals officer.

It is recommended that the Board uphold the denial of this claim.

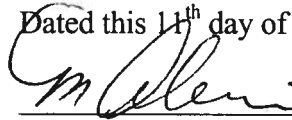
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Victim of Crime Program, does hereby certify that on the date shown below, a true and correct copy of the foregoing **BOE CASE SUMMARY** was duly mailed, postage prepaid to the following:

JEFF MOHLENKAMP, CLERK
BOARD OF EXAMINERS
209 E MUSSER RD RM 200
CARSON CITY, NV 89701

STACY HOWELL
811 E BRIDGER AVE #426
LAS VEGAS, NV 89101

Dated this 11th day of June, 2013



Employee of the State of Nevada

Stacy Howell
Claim Nos. 13-10022162-LV
13-10022379-LV

INDEX OF DOCUMENTS

1. SUMMARY
2. REQUEST FOR BOE APPEAL
3. DECISION AND ORDER OF AO BRADLEY DATED MAY 16, 2013
4. TRANSCRIPT OF PROCEEDINGS OF APRIL 16, 2013
5. VOCP APPEAL STATEMENT DATED APRIL 5, 2013
6. NOTICE OF HEARING DATED MARCH 27, 2013
7. REQUEST FOR APPEAL DATED MARCH 20, 2013
8. DECISION AND ORDER OF HO HAGAN DATED MARCH 27, 2012
9. NOTICE OF HEARING BEFORE THE HEARING OFFICER
10. REQUEST FOR HEARING DATED FEBRUARY 19, 2013
11. ORDER OF DISMISSAL ISSUED BY AO BRADLEY DATED MARCH 27, 2013
12. VOCP APPEAL STATEMENT DATED FEBRUARY 22, 2013
13. NOTICE OF HEARING DATED FEBRUARY 8, 2013
14. REQUEST FOR APPEAL DATED JANUARY 23, 2013
15. DECISION AND ORDER OF HO BERENS DATED DECEMBER 24, 2012

CASE DOCUMENTS FOR CLAIM NUMBER 13-10022379-LV

1. VOCP HEARING STATEMENT
2. NOTICE OF HEARING
3. REQUEST FOR HEARING
4. DETERMINATION OF THE COMPENSATION OFFICER
5. INCIDENT REPORT FROM LAS VEGAS METROPOLITAN POLICE DEPARTMENT
6. APPLICATION

CASE DOCUMENTS FOR CLAIM NUMBER 13-10022162-LV

1. VOCP HEARING STATEMENT
2. NOTICE OF HEARING
3. REQUEST FOR HEARING
4. DETERMINATION OF THE COMPENSATION OFFICER
5. INCIDENT REPORT FROM LAS VEGAS METROPOLITAN POLICE DEPARTMENT
6. APPLICATION

VOCP;

I Stacy Howell have medical records to support my case concerning seizures and anxiety attacks at UMC, Desert Springs, and Valley Hospital. (2012) ^{may 31}

I also have a witness to support Salenest making me walk in 120° weather on May 31, 2012 after I told them ^{myself} about the abuse from Jeff Hsieh and John Vernon. Had they not turned me away because I had a dog and given me a taxi to get to Shade Tree Shelter I would not have been hurt again. Because of their negligence I was further assaulted. (They as in Salenest)

Angelica Rodriguez was my case worker at Shade Tree. Due to my mental and physical state she was suppose to have faxed the claim within the 5 day period ^{she} did not. I mailed the form in on my own in case she forgot to do it. She no longer works at Shade Tree.

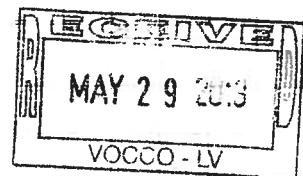
1 West Owens Ave Las Vegas Nevada 89030.

I therefore do not agree with your decision and am appealing your decision.

Ransom, Real Psychiatric Hospital also stated I am mentally impaired I have the letter from Doctor MAJORAN confirming this.

Stacy Howell

5-21-13



1 CERTIFICATE OF MAILING

2 The undersigned, an employee of the State of Nevada, Department of Administration,
3 Hearings Division, does hereby certify that on the date shown below, a true and correct copy of
4 the foregoing DECISION AND ORDER was duly mailed, postage prepaid OR placed in the
5 appropriate addressee runner file at the Department of Administration, Hearings Division, 2200
6 S. Rancho Drive, #220, Las Vegas, Nevada, to the following:

7 STACY L HOWELL
8 811 BRIDGER AVE UNIT 426
9 LAS VEGAS NV 89101

10 VICTIMS OF CRIME PROGRAM
11 2200 S RANCHO DR STE 130
12 LAS VEGAS NV 89102

13 Dated this 16th day of May, 2013.

14 Parti Fox
15 Parti Fox, Legal Secretary II
16 Employee of the State of Nevada

17 5.24.13

18 sent letter
19 Bick

20
21 I deny appeal decision
22 decision made by the court.

23 Howells-24-13

1 times since she filed her first request for hearing, and at times she has been in transitional
2 housing and/or mental health facilities since she received the VOCP determination letters. Ms.
3 Howell did appear at the hearing before this Appeals Officer on April 16, 2013, and presented
4 sworn testimony regarding her Applications and the reasons she is requesting compensation
5 through the VOCP. As the appeals process is intended to provide a fair and impartial hearing
6 for those who believe they are aggrieved by a VOCP determination, based on the unique
7 procedural history of this case and Case No. 1305494-GB, the Appeals Officer has determined
8 that it is in the best interests of Ms. Howell and the VOCP, and in the interest of judicial
9 economy, to issue a decision that addresses the procedural and substantive issues raised by Ms.
10 Howell's appeals from both VOCP determinations, and on which Ms. Howell was provided an
11 opportunity to be heard and present evidence at the hearing that was held on April 16, 2013.
12
13

14 The hearing was conducted pursuant to NRS Chapter 217, and all applicable
15 administrative regulations (the "VOCP Policies"). The Appeals Officer admitted into evidence a
16 56-page evidence packet submitted by the VOCP, consisting of, among other things, the
17 VOCP's Appeal Statement, Hearing Officer Berens' Decision and Order, the Applicant's
18 requests for hearing, the VOCP determination letters, the Las Vegas Metropolitan Police
19 Department's Case Reports, and the Applications for VOCP compensation. The Appeals Officer
20 also admitted into evidence a 14-page evidence packet submitted by Ms. Howell, consisting of,
21 among other things, Hearing Officer Berens' and Hearing Officer Hagan's decisions, and Ms.
22 Howell's requests for hearing. Sworn testimony was provided at the hearing by Ms. Howell.
23
24

25 After carefully considering the written evidence and verbal testimony provided at the
26 hearing, the Appeals Officer hereby renders the following Findings of Fact and Conclusions of
27 Law:
28

1 **FINDINGS OF FACT**

2 1. Stacy L. Howell is a 47 year old woman who generally alleges that she was a
3 victim of two crimes that resulted in personal injury, and that she is therefore entitled to
4 compensation through the VOCP.
5

6 2. Specifically, Ms. Howell filed two Applications for Victims of Crime
7 Compensation. Claim No. 13-10022162-LV (hereinafter, the "August 29 Claim") was
8 commenced on August 29, 2012, by the filing of an Application in which Ms. Howell asserted
9 that she was a victim of an assault by her ex-boyfriend on May 17, 2012, that she suffered a
10 neck sprain, back sprain, and right arm sprain as a result of the assault, and that she reported the
11 crime to the police on July 16, 2012. In the same Application, Ms. Howell asserts that she was
12 the victim of a second assault by another man on May 31, 2012, that resulted in unspecified
13 personal injuries, theft of personal property, and theft of her dog. She asserts that she reported
14 the crime to the police on July 16, 2012. On September 18, 2012, the VOCP denied Ms.
15 Howell's Application on the stated grounds that the crime was not reported within 5 days and
16 that Ms. Howell is ineligible to file for assistance.
17

18 2. Claim No. 13-10022379-LV (hereinafter, the "September 27 Claim") was
19 commenced on September 27, 2012, by the filing of a second Application for Victims of Crime
20 Compensation, in which Ms. Howell asserted again that she was a victim of an assault on May
21 31, 2012. Although she did not provide a date on which she reported the incident to the police,
22 she did provide a crime report number. The crime report was filed on July 16, 2012 and is the
23 same crime report as one of the two reports referred to in the August 29, 2012 Application. In
24 her Application, Ms. Howell answered "no" to the question of whether she ever filed a victims
25 of crime claim in Nevada or any other state. On September 28, 2012, the VOCP denied Ms.
26
27
28

1 Howell's Application on the stated grounds that the crime was not reported within 5 days and
2 that Ms. Howell is ineligible to file for assistance.

3 3. Las Vegas Metropolitan Police Department Case Report No. LLV-
4 120716001795-001 is dated July 16, 2012. It relates to a battery (not domestic) that occurred on
5 May 31, 2012 at 10:30 a.m. Ms. Howell reported that she suffered verbal abuse from the
6 alleged batterer, and has no memory of anything that happened until she woke up in Valley
7 Hospital. She asserted that she was told that she was found near a dumpster, and that she
8 believes that the alleged batterer is responsible for her (unspecified) injuries. The Appeals
9 Officer was provided no hospital records or any other written evidence regarding the alleged
10 crime.
11

12 4. Las Vegas Metropolitan Police Department Case Report No. LLV-
13 120716001679-001 is also dated July 16, 2012. It relates to a battery (domestic) by Ms.
14 Howell's ex-boyfriend on May 17, 2012 at 4:30 p.m., and describes events that allegedly
15 resulted in neck sprain. The Appeals Officer was provided no hospital or other medical records
16 or any other written evidence regarding the alleged crime.
17

18 5. Each of the two VOCP determination letters provide appeal rights, stating that if
19 Ms. Howell disagrees with the VOCP's decision, she must file her appeal within 60 days of the
20 date of the letter.
21

22 6. Ms. Howell filed a request for hearing by a Hearing Officer on November 27,
23 2012, in which she stated that she is appealing the denial of both of her Applications. To the
24 extent her appeal is from the September 18, 2012 determination letter denying the August 29
25 Claim (which was filed in connection with the crimes that allegedly occurred on May 17, 2012
26 and May 31, 2012), her appeal was untimely. To the extent her appeal is from the September
27 28, 2012 determination letter denying her September 27 Claim (which was filed in connection
28

1 with the crime that allegedly took place on May 31, 2012), her appeal was filed on the 60th day
2 and is therefore timely.

3 7. A hearing was held on December 17, 2012 before Hearing Officer Mercer
4 Berens. Ms. Howell failed to appear at the hearing, and was not represented by counsel at the
5 hearing. On December 24, 2012, Hearing Officer Berens issued an Order of Dismissal pursuant
6 to NAC 616C.279.

8 8. Ms. Howell filed an appeal from Hearing Officer Berens' Order of Dismissal on
9 January 23, 2013, commencing Appeal No. 1305494-GB. As the appeal was not filed within 15
10 days after the date of the decision by the Hearing Officer, the appeal was not timely filed. Ms.
11 Howell subsequently failed to appear at the hearing before the Appeals Officer scheduled from
12 February 27, 2013. The Appeals Officer issued an Order to Show Cause why the appeal should
13 not be dismissed for failure to appear, and Ms. Howell failed to respond to the Order within the
14 time set forth in the Order. The Appeals Officer issued an Order of Dismissal on March 27,
15 2013.

17 9. In the meantime, Ms. Howell filed a second request for hearing on February 19,
18 2013, in which she refers to the August 29 Claim. The case was assigned to Hearing Officer
19 Hagan, who scheduled a hearing for March 20, 2013. Ms. Howell failed to appear at the
20 hearing and the case was dismissed.

22 10. Ms. Howell did not appeal from Hearing Officer Hagan's March 27, 2013, but she
23 did, on March 20, 2013, file a new appeal from Hearing Officer Berens' Order of Dismissal. The
24 matter was scheduled for hearing on April 16, 2013, and Ms. Howell did, finally, appear at the
25 hearing. It is Ms. Howell's March 20, 2013 appeal that is before the Appeals Officer.

27 11. Ms. Howell testified regarding the circumstances surrounding the assaults that
28 allegedly occurred on May 17, 2012 and May 31, 2012. She testified that she has no memory of

1 events that occurred after the May 17, 2012 involving her ex-boyfriend, that she was voluntarily
2 drinking alcohol but had also been robbed and drugged, that she was evicted from her apartment,
3 was hospitalized at Valley Hospital, resided in transitional housing for a time, resided at a
4 psychiatric hospital for a time, and moved to her current residence sometime in January 2013. She
5 testified that she did not pursue criminal charges in either case because she was afraid of the
6 assailants, and that she "would wind up in the hospital every time she tried" to pursue charges
7 against her ex-boyfriend. She testified that she can no longer work (she used to work as a dancer at
8 Cheetah's) because of the pain in her back and neck, and that she no longer drinks or takes drugs.
9

10 12. The Appeals Officer finds that Ms. Howell's testimony reveals that she is confused
11 regarding the events surrounding the incidents that allegedly occurred in May of 2012, and
12 regarding the events that occurred between the dates of the incidents and the date she filed police
13 reports. If there were any witnesses to any of the events that are relevant to Ms. Howell's
14 applications, or any documents that would shed light on what occurred, no such witnesses or
15 documents were produced.
16

17 13. Any Finding of Fact which may be deemed to be a Conclusion of Law shall be so
18 considered.
19

20 CONCLUSIONS OF LAW

21 1. It is the policy of the State of Nevada to provide assistance to persons who are
22 victims of violent crimes. NRS 217.010. However, the Applicant has the burden of proof, by
23 clear and convincing evidence, to establish eligibility for acceptance of any benefits offered by
24 the Victims of Crime Program. VOCP Policies, Section Four, Subsection 1(A), and Section
25 Fourteen, Subsection 4.

26 2. NRS 217.210 provides that "an order for the payment of compensation must not
27 be made unless the application is made within 1 year after the date of the personal injury or death
28

1 on which the claim is based, unless waived by the Board of Examiners or a person designated by
2 the Board for good cause shown, and the personal injury or death was the result of an incident or
3 offense that was reported to the police within 5 days of its occurrence or, if the incident or
4 offense could not reasonably have been reported within that period, within five days of the time
5 when a report could reasonably have been made.” NRS 217.210(1) (emphasis added). The
6 Nevada legislature expressly excluded from the aforementioned limitations on compensation a
7 minor who is sexually abused or who is involved in the production of pornography. NRS
8 217.210(2). All other victims of violent crime must comply with the time limits set forth in
9 subsection (1).
10

11 3. The Appeals Officer is not empowered to go beyond the face of a statute to lend
12 it a construction contrary to its clear meaning. *Union Plaza Hotel v. Jackson*, 101 Nev. 733,
13 736, 709 P.2d 1020, 1022 (1985). Where there is no ambiguity in a statute, there is no
14 opportunity for judicial construction and the law must be followed regardless of the result.
15 *Randono v. CUNA Mutual Ins. Group*, 106 Nev. 371, 374, 793 P.2d 1324, 1326 (1990).
16

17 4. NRS 217.210 is clear and unambiguous on its face. The Board of Examiners or a
18 person designated by the Board may, for good cause shown, waive the time limit for the filing of
19 the application for compensation, but no such waiver is permitted in connection with the time
20 limit for the submission of the police report. *See also* VOCP Policies, Section Five, Subsection
21 4.
22

23 5. Although Ms. Howell offered sworn testimony that she was the victim of a
24 battery on May 17, 2012, and that she was the victim of at least a theft and possibly a battery on
25 May 31, 2012, Ms. Howell did not establish that she qualifies for compensation through the
26 VOCP. Ms. Howell has not established that she was physically or mentally incapable of
27 reporting either or both of the incidents to the police within 5 days of the occurrence. An
28

1 applicant for VOCP compensation must establish by clear and convincing evidence that she is
2 entitled to compensation. Ms. Howell's confusion regarding the events surrounding the alleged
3 crimes and her actions prior to the date she filed the police reports does not and cannot meet the
4 "clear and convincing evidence" burden that must be met, where, as here, there is no evidence
5 other than her testimony to establish that she was mentally and/or physically incapable of
6 reporting the incidents to the police. The time limits set forth in NRS 217.210(1) regarding the
7 filing of the police report must be satisfied before an order of payment of compensation may be
8 made. VOCP Policies, Section Four, Subsection 3(A).

10 6. The VOCP Policies provide that the compensation officer may deny an
11 application when it does not comply with NRS 217 or the VOCP Policies, including when the
12 crime was reported more than five days after the crime. VOCP Policies, Section Twelve,
13 Subsection 4. Denial of an application is not a finding of wrongdoing by the applicant; it is
14 simply a determination that the applicant has not met the criteria for approval. VOCP Policies,
15 Section Twelve, Subsection 3(E). The Appeals Officer concludes that the compensation officer
16 properly denied Ms. Howell's applications for compensation for failure to satisfy the eligibility
17 requirements set forth in NRS 217.210.

19 7. Moreover, even if the criteria for compensability had been met, Ms. Howell's
20 March 20, 2013 appeal from the VOCP's September 2012 determination letters was untimely
21 filed.

23 8. The Appeals Officer further finds that there is insufficient evidence to determine
24 whether or not Ms. Howell actually received notice of the December 17, 2012 hearing, and
25 therefore cannot find that Hearing Officer Berens improperly dismissed Ms. Howell's case for
26 failure to appear. Nevertheless, for the reasons stated above, the Appeals Officer has provided
27 Ms. Howell with an opportunity to be heard on the merits of her appeal and is issuing this
28

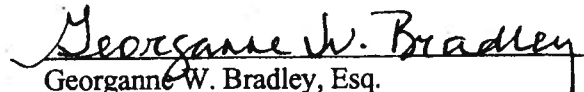
1 Decision and Order on the merits rather than simply affirming Hearing Officer's Berens'
2 dismissal on procedural grounds.

3 9. Any Conclusion of Law which may be deemed a Finding of Fact shall be so
4 considered.
5

6 **ORDER**

7 Based on the foregoing Findings of Fact and Conclusions of Law, the Appeals Officer
8 hereby **AFFIRMS** the VOCP's September 19, 2012 and September 28, 2012 determination
9 letters denying Ms. Howell's applications for compensation in Claim No. 13-10022162-LV and
10 Claim No. 13-10022379-LV.

11 **IT IS SO ORDERED** this 16th day of May, 2013.

12
13
14 
15 Georganne W. Bradley, Esq.
16 APPEALS OFFICER
17
18

19 **NOTICE:** Pursuant to NRS 217.117, should any party desire to appeal this final
20 determination of the Appeal Officer, a written request for an appeal must be filed with the
21 State Board of Examiners, 209 East Musser, #200, Carson City, NV 89710, within fifteen
22 (15) days of the date of this decision.
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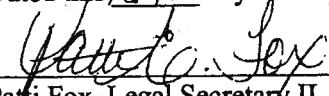
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **DECISION AND ORDER** was duly mailed, postage prepaid **OR** placed in the appropriate addressee runner file at the Department of Administration, Hearings Division, 2200 S. Rancho Drive, #220, Las Vegas, Nevada, to the following:

STACY L HOWELL
811 BRIDGER AVE UNIT 426
LAS VEGAS NV 89101

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 16th day of May, 2013.



Pati Fox, Legal Secretary II
Employee of the State of Nevada

BEFORE THE APPEALS OFFICER

In the Matter of the Contested)	
Victims of Crime Claim of:)	Claim No: 13-10022162-IV
)	
STACY L. HOWELL,)	Appeal No: 1307366-GB
)	
Applicant.)	
_____)	

TRANSCRIPT OF PROCEEDINGS

BEFORE THE

HONORABLE GEORGANNE W. BRADLEY, ESQ., ESQ.

APPEAL OFFICER

TUESDAY, APRIL 16, 2013

11:01 A.M.

Ordered by: State of Nevada
 Department of Administration
 2200 South Rancho Drive, Suite 220
 Las Vegas, Nevada 89102

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On behalf of the Claimant:

Stacy Howell, Pro Se
811 Bridger Avenue, Unit 426
Las Vegas, Nevada 89101

On behalf of Victims of Crime Program:

Rebecca Salazar, Esq.
2200 S. Rancho Drive, Suite 130
Las Vegas, Nevada 89102

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I N D E X

WITNESS	DIRECT	CROSS	RE-DIRECT	RE-CROSS
Stacy L. Howell	5			

E X H I B I T S

EXHIBITS	IDENTIFIED	IN EVIDENCE
None		

1 P R O C E E D I N G S

2 APPEALS OFFICER BRADLEY: Okay. We are
3 on the record in the matter of the Contested Victims of
4 Crime claim of Stacy L. Howell. We're here today on
5 Appeal Number 1307366-GB.

6 Present in the courtroom today is Ms.
7 Howell. Representing the Victims of Crime Program is
8 Rebecca Salazar.

9 Ms. Howell, what I would like to do
10 first is I'll swear you in so that your comments and
11 testimony today can be considered sworn testimony. And
12 then I'd like to just kind of walk through this with
13 you. I'll ask some questions and then at the
14 conclusion of my questions, you'll have an opportunity
15 to make a statement of anything else that you'd like
16 for me to know to make this decision.

17 I will -- let me introduce myself. I'm
18 Georganne Bradley. I'm the Appeals Officer who's been
19 assigned to this case, as well as the other appeal that
20 you had previously filed. This is a new hearing today.
21 I have -- do not have -- I have not discussed this
22 matter with the Hearing Officer who heard your -- your
23 prior cases. So we're starting from scratch. And the
24 purpose of being here today, although this is as
25 administrative hearing and there are certain

1 formalities we have to follow, I basically just want to
2 be able to find out what happened, why you believe you
3 are entitled to compensation through the Victims of
4 Crime Program.

5 I will not be ruling from the bench
6 today. What I'll do is take everything I hear from you
7 today and any other comments that Ms. Salazar has.
8 I'll go back and review all the records more closely.
9 Take that in -- take your testimony into account and
10 then I'll issue a written decision. Okay? Okay. So
11 with that, then, let me ask you to please raise your
12 right hand. Do you solemnly swear or affirm that the
13 testimony you're about to give in this matter shall be
14 the truth, the whole truth and nothing but the truth?

15 MS. HOWELL: I do.

16 APPEALS OFFICER BRADLEY: Thank you.

17 And could you move the microphone up a little bit
18 closer to you? Also, I should let you know that this
19 matter is being digitally recorded. If at any time I
20 have trouble registering your answers, I'll let you
21 know.

22 THE WITNESS: Okay.

23 APPEALS OFFICER BRADLEY: Okay. All
24 right. Is your full name Stacy, that's S-T-A-C-Y, L --
25 middle initial L, Howell, H-O-W-E-L-L?

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THE WITNESS: Yes.

APPEALS OFFICER BRADLEY: Thank you.

And you can probably -- you don't need to lean right in. I'll be able to pick you up.

THE WITNESS: Okay.

APPEALS OFFICER BRADLEY: And what is your current mailing address, Ms. Howell?

THE WITNESS: It's 811 Bridger, Apartment 426 Las Vegas, Nevada, 89101.

APPEALS OFFICER BRADLEY: Okay, that's 811 Bridger --

THE WITNESS: Uh-huh.

APPEALS OFFICER BRADLEY: -- Apartment 426, Las Vegas, Nevada, 89101; is that correct?

THE WITNESS: Yeah.

APPEALS OFFICER BRADLEY: All right, thank you. Okay, now, Ms. Howell, from what I could see from looking through the file, you alleged through your Applications for Compensation that you were a victim of a violent crime on two separate occasions; is that correct?

THE WITNESS: Yes.

APPEALS OFFICER BRADLEY: Okay. Let's go through the first incident, which would have been --

THE WITNESS: It was roughly May 17th.

1 APPEALS OFFICER BRADLEY: May 17th?

2 THE WITNESS: I can't remember that
3 exact date, but --

4 APPEALS OFFICER BRADLEY: Okay. And
5 what year was that?

6 THE WITNESS: 2012.

7 APPEALS OFFICER BRADLEY: 2012. Okay,
8 and what happened on that day?

9 THE WITNESS: Jeffrey Shay (ph), my ex-
10 boyfriend, we were -- we were dating on and off for 14
11 years. He came over to my apartment on 1655 East
12 Sahara and I said something to piss him off and he had
13 hurt me, you know, on and off for 14 years, like,
14 kicked me in the back, was abusive. Anyway, I didn't
15 really think he would ever truly hurt me. And he had
16 jumped from the couch, you know, in a nutshell, to
17 where I was sitting on my couch in my apartment and
18 then tried to, like, lean on me, tried to break my neck
19 or, like, twist it as hard as he could. And then, I
20 just remember -- I remember, like, bits and pieces and
21 then he stood up and he said, "I'll kill you next time,
22 and I should have killed you a long time ago. And I
23 will kill you or I'll hire somebody to kill you." And
24 then after that, I was -- I remained calm and then he
25 sat down and I said something and then he said, you

1 know, "Mark my words, I'll carry through," something.

2 Then he ended up leaving.

3 And then after that, a lot of my memory,
4 I don't remember too much. My -- I guess it was
5 trauma, you know, I just kind of blacked out a lot. So
6 that's why I don't remember the exact date. And it was
7 during the day, he was -- I remember he was from
8 Sunrise doing surgery that day because he came over in
9 his scrubs. And --

10 APPEALS OFFICER BRADLEY: He was doing
11 surgery that day. Is he a doctor?

12 THE WITNESS: Yeah, he's a surgeon at
13 Women's Cancer Center. And, you know, he was -- it
14 just got worse and worse and worse. And that, you
15 know, during those 14 years, I would always leave him
16 and come back, though, which was my fault. I realize
17 that.

18 APPEALS OFFICER BRADLEY: So let me --
19 let me stop you there. So this -- this took place at
20 your apartment on East Sahara.

21 THE WITNESS: Uh-huh.

22 APPEALS OFFICER BRADLEY: Did you live
23 there by yourself?

24 THE WITNESS: I was, yeah. He was, at
25 that time, supporting -- well, helping me pay rent

1 because I had, you know, had been hurt.

2 APPEALS OFFICER BRADLEY: Okay. And so,
3 after he left that day, after the assault occurred and
4 he left that day, did you call the police?

5 THE WITNESS: I called my boyfriend I
6 had dated, who's a sergeant at Las Vegas. And I don't
7 remember calling him at all and told him what happened.
8 I should have called the police, but I -- I guess I
9 just blacked out.

10 APPEALS OFFICER BRADLEY: So this was a
11 man that you had previously dated or it was a friend of
12 yours?

13 THE WITNESS: I had dated him.

14 APPEALS OFFICER BRADLEY: Okay.

15 THE WITNESS: Yeah. We lived together
16 for approximately three years, I think. I would go
17 back and forth between the two of them.

18 APPEALS OFFICER BRADLEY: And he was a
19 police officer?

20 THE WITNESS: Yes. And I called him and
21 told him what happened and I -- I don't remember --

22 APPEALS OFFICER BRADLEY: What -- what's
23 his name?

24 THE WITNESS: William Lipski, L-I-P-S-K-
25 I.

1 APPEALS OFFICER BRADLEY: Here, let me
2 -- here's some tissues just in case. This is -- you
3 can - take your time with this. We are not in a rush.
4 I understand these are emotional matters. If you need
5 a break at any time just let me know, okay? Okay, so
6 after Mr. Shay left, then you called Mr. Lipski. And I
7 understand that this is all to the best of your
8 recollection.

9 THE WITNESS: Right.

10 APPEAL OFFICER BRADLEY: What happened
11 then? Did he come to the house or did he send police
12 officers over or --

13 THE WITNESS: I -- I don't remember
14 after that. I had -- I think I started drinking after
15 that because I was trying not to drink and I -- that
16 was my way of coping at that time. And then I ended up
17 at a drug dealer's house or something and I -- I didn't
18 remember a lot. Anyway, I was there and they ended up
19 keeping me at the house -- I ended up at this -- this
20 house that was a mobile home park place and they -- I
21 was there, I thought, for -- for three to seven --
22 three to four days or something like that and I was
23 actually there for a month. During that time, my -- my
24 apartment was robbed

25 APPEAL OFFICER BRADLEY: Okay, let's

1 stop there. Let me back up again. I'm just --

2 THE WITNESS: And like I say, I get all
3 scattered.

4 APPEAL OFFICER BRADLEY: Yeah, I'm just
5 trying understand this as best as I can so I'll -- I'll
6 try to walk you through that section again and then
7 we'll move on from there.

8 THE WITNESS: All right.

9 APPEALS OFFICER BRADLEY: So your --
10 you -- at the time, were you an alcoholic at the time;
11 you believe?

12 THE WITNESS: Yeah. Uh-huh.

13 APPEAL OFFICER BRADLEY: Okay. So after
14 this happened, you were upset and you started drinking
15 and your memory was --

16 THE WITNESS: Yeah.

17 APPEAL OFFICER BRADLEY: -- is sketchy.

18 THE WITNESS: Yeah. I -- I didn't drink
19 that day. And then I remember, I must have after that
20 drank. I just -- I just blacked out.

21 APPEAL OFFICER BRADLEY: So you don't
22 really remember what happened after you called Officer
23 Lipski.

24 THE WITNESS: Huh-uh.

25 APPEAL OFFICER BRADLEY: Okay. And you

1 started drinking the next day?

2 THE WITNESS: I think so.

3 APPEAL OFFICER BRADLEY: When did you go
4 from your apartment on East Sahara to this other home
5 you're talking about?

6 THE WITNESS: I don't know. I -- it's
7 -- I can't -- I don't remember anything after that.

8 APPEAL OFFICER BRADLEY: So, basically,
9 you have a blackout until you woke up at this other
10 place.

11 THE WITNESS: Uh-huh.

12 APPEAL OFFICER BRADLEY: Okay.

13 THE WITNESS: I don't know if it's just
14 my -- my, you know, my brain shutting it off or -- or
15 what.

16 APPEAL OFFICER BRADLEY: Had that
17 happened to you before? Had you had blackouts and --

18 THE WITNESS: I -- when things would get
19 too heavy, when he would hurt me over the years, yeah,
20 I would just forget it, just forget that things
21 happened. Until later they would come back and then it
22 was, like, you know, how could I not remember that?

23 APPEAL OFFICER BRADLEY: Uh-huh.

24 THE WITNESS: You know?

25 APPEAL OFFICER BRADLEY: So you -- do

1 you know the people at -- that were at this place that
2 you, when you recall being at this new place, do you
3 know -- were they friends of yours?

4 THE WITNESS: They had -- they were
5 people I had met here in Vegas and I thought, you know,
6 they were my friends, but they were not.

7 APPEAL OFFICER BRADLEY: Okay. And you
8 said you think you were there for about a month.

9 THE WITNESS: That's what they said
10 because I went after that to make a police report and I
11 told the officers what I remember happening and then --
12 because my face was, like, you know, I was at the --
13 this -- the drug dealer person's house and I kept
14 saying, "Why can't I go to my apartment, I have an
15 apartment." They're like, "No, you're -- you're too
16 sick, your neck hurts too bad," or something like that.
17 And then, they wouldn't let me leave and then I
18 realized later, oh, my God, these are the people that
19 were robbing my place.

20 APPEAL OFFICER BRADLEY: Okay.

21 THE WITNESS: And then I went and made a
22 police report on that after I had kind of came to a
23 little bit.

24 APPEAL OFFICER BRADLEY: Okay.

25 THE WITNESS: But at the timeframe of,

1 you know, it was a little bit off.

2 APPEAL OFFICER BRADLEY: Okay. Let me
3 stop you there, then, and we'll work through this
4 section. So, when you came to, you were at this other
5 place, you -- through the course of all this, you
6 realized that they really didn't want you to go back to
7 your apartment because they had -- they had robbed your
8 apartment on East Sahara.

9 THE WITNESS: I started seeing things in
10 their house that were up in my apartment and I'm
11 putting things together. At this time, I'm, like, you
12 know, it's kind of self separated or something, I
13 don't know.

14 APPEAL OFFICER BRADLEY: Uh-huh.

15 THE WITNESS: And I started going, "Why
16 do you have my dishes in your -- in your cupboard?"
17 you know, "Why are this -- why are these things here?"
18 And then I started, you know, coming to, going, "You,
19 you," I started screaming at them and saying, you know,
20 they robbed my apartment and then I would black out
21 there. And I know they were drugging me there more
22 than I was -- realized. I know that. So that's why a
23 lot of the memories stopped, you know, I don't have
24 memories -- not that great during that time.

25 APPEAL OFFICER BRADLEY: Why do you

1 believe they were drugging you?

2 THE WITNESS: Because I can't remember a
3 lot and I -- they found a lot of drugs in my system, I
4 believe, at Valley Hospital when I ended up there.

5 APPEAL OFFICER BRADLEY: Do you recall
6 taking any drugs voluntarily?

7 THE WITNESS: I remember, like, I would
8 -- I had been on the couch crying with my neck and his
9 name's John that -- the guy that lived at that place
10 and he would put pills in my mouth every two hours.
11 And I don't know -- I don't -- for the pain or
12 something. So I'm not sure what they were. And then I
13 had a -- I was on Phenobarbital during that time from a
14 doctor and so, you know, I don't know. They had
15 control pretty much over what the -- was happening over
16 me.

17 APPEAL OFFICER BRADLEY: Okay. Now you
18 mentioned before then that you -- after you realized
19 what was going on here, you then went to file a police
20 report.

21 THE WITNESS: Yeah.

22 APPEAL OFFICER BRADLEY: Is that the
23 first written police report that you submitted since
24 the May 17th incident, to the best of your knowledge?

25 THE WITNESS: I had an ID theft problem

1 maybe a year and a half before.

2 APPEAL OFFICER BRADLEY: I mean, just
3 since the May 17th assault by Mr. Shay. Did you
4 file --

5 THE WITNESS: Yeah, with him -- yeah.

6 APPEAL OFFICER BRADLEY: Did you file
7 the written report regarding that -- as a result of the
8 attack by Mr. Shay, did you ever file a written police
9 report for that?

10 THE WITNESS: I think -- they -- I
11 attached it to that one, I believe. They had a
12 narrative and as well as my writing one, I believe.

13 APPEAL OFFICER BRADLEY: Okay. So did
14 you actually go to the police station to --

15 THE WITNESS: Yeah.

16 APPEAL OFFICER BRADLEY: -- to submit a
17 report?

18 THE WITNESS: It took me a while to kind
19 of get it together in order to get there to tell them
20 what happened. You know, because I -- I was at a
21 shelter and I -- I was at Shade Tree.

22 APPEAL OFFICER BRADLEY: When did you go
23 to Shade Tree? Let's go -- okay, you're at this place
24 with John who --

25 THE WITNESS: Right. And I --

1 APPEAL OFFICER BRADLEY: -- and you're
2 out of there.

3 THE WITNESS: So I'm evicted from my --

4 APPEAL OFFICER BRADLEY: After that what
5 happens then?

6 THE WITNESS: I get evicted from my
7 apartment. I had a car at the time. John ends up with
8 my car somehow. He got me to sign it over to him or
9 something. I don't know what I was doing. And he --
10 he paid, like, a dollar for it or something like that,
11 I find out later. Like, because I started remembering
12 things. And he's -- he was saying he was going to buy
13 it from me and I'm, like, "Okay, whatever." Turns out
14 he lied to me and -- and -- I remember seeing a dollar
15 on some transfer ownership or something. It was, like,
16 that. So anyway, he got the car -- my car. They
17 robbed my apartment. They -- then I ended up at a
18 shelter.

19 APPEAL OFFICER BRADLEY: When you say
20 you were evicted from your apartment, how did that
21 happen? Was there a notice on your door, were the
22 locks changed?

23 THE WITNESS: I -- I just remember,
24 like, John had acted like he was the one helping me go,
25 you know, "Oh, my God, your house was robbed." So he

1 took me over there. And he -- he's -- he pushes the
2 door open and he's, like, "Oh, my God, your house is
3 robbed." And I'm going, that's kind of a bad acting
4 job. I'm thinking wait a minute, this is not right.
5 So that's when I started figuring out, you know. I had
6 realized my things were at his house. I realized, you
7 know, he -- this was kind of staged. So I'm thinking
8 this guy is the one who -- who did it and they're
9 setting me up and all this kind of -- of stuff. And it
10 was planned.

11 APPEAL OFFICER BRADLEY: Okay.

12 THE WITNESS: Then I had -- it's all
13 kind of, like, scattered. He -- there -- it was pretty
14 pre-planned because they had gotten my trust for a
15 while. Russ was a friend of his who had my trust. He
16 was the one --

17 APPEAL OFFICER BRADLEY: Russ?

18 THE WITNESS: Russ -- Russell.

19 APPEAL OFFICER BRADLEY: R-U-S-S.

20 THE WITNESS: And then John was his
21 friend and Russell had brought me over to John's and
22 that's when, you know, all this kind of stuff -- this
23 all happened where my place was robbed and my car -- I
24 couldn't get out of there, pretty much. Like, I was
25 not in my right mind at all.

1 APPEAL OFFICER BRADLEY: Let me ask you
2 a question about that.

3 THE WITNESS: Okay.

4 APPEAL OFFICER BRADLEY: You say when
5 you were not in your right mind. And I understand that
6 there was -- there was some drugs that they were giving
7 you that were pain pills, the Phenobarbital. Do you --
8 have you ever been diagnosed with any kind of a
9 condition that -- that affects your ability to --

10 THE WITNESS: Remember?

11 APPEALS OFFICER BRADLEY: -- function
12 well during these times?

13 THE WITNESS: I was abused as a child,
14 so sometimes I can -- I'll just kind of not remember
15 things and kind of block them -- block them
16 (inaudible).

17 APPEAL OFFICER BRADLEY: Have you
18 received any treatment for that, any counseling?

19 THE WITNESS: Yeah, I went to Nevada
20 Mental Health and they're trying to help me with that.
21 You know, go get through that --

22 APPEAL OFFICER BRADLEY: How long ago
23 was that?

24 THE WITNESS: I've been with -- like,
25 this last year they've been trying to help me.

1 APPEAL OFFICER BRADLEY: Since --
2 since --

3 THE WITNESS: Let's see, I started --
4 started to go, I think, maybe a couple of years ago
5 because I was really depressed and stuff. And then, I
6 got in the system finally and then I had, like, after
7 the shelter and all this kind of stuff, I ended up
8 having a couple of incidents where I would lose -- I
9 just broke down.

10 APPEAL OFFICER BRADLEY: Uh-huh.

11 THE WITNESS: Because I started
12 remembering things.

13 APPEAL OFFICER BRADLEY: Did you go to
14 Shade Tree after you left John's place?

15 THE WITNESS: Yeah, what happened was --

16 APPEAL OFFICER BRADLEY: Was that the
17 next place that you lived or resided?

18 THE WITNESS: I had tried -- after Jeff
19 twisted my neck, I was kind of like out there and --
20 and I tried to go to work at Cheetah's because I was --
21 I danced a little bit.

22 APPEAL OFFICER BRADLEY: Uh-huh.

23 THE WITNESS: And then I -- I couldn't
24 -- I couldn't really do it because of my back and my
25 neck, whatever. So I remember walking from the parking

1 lot to my friend's car to pick me up and I fell and --
2 in the parking lot. So he's like, "You should sue
3 Cheetah's," so I was going to do that and then I
4 changed my mind and I didn't want to do that. I said
5 it's mostly -- it's because Jeff had hurt me is why I,
6 you know, my leg gave out and I hurt, you know. So --

7 APPEAL OFFICER BRADLEY: How soon after
8 the -- the May 17 incident where Jeff twisted your neck
9 did you try to go back to work?

10 THE WITNESS: I don't remember.

11 APPEAL OFFICER BRADLEY: Was it -- was
12 it while you were at John's place or were you still --

13 THE WITNESS: It was before that, I
14 think. See, some of the timeframes are just all mixed
15 up in my head.

16 APPEAL OFFICER BRADLEY: Okay. Was it
17 before or after you filed the police report, do you
18 know?

19 THE WITNESS: I don't know.

20 APPEAL OFFICER BRADLEY: Okay. So now
21 we have -- we have the incident where Jeff assaulted --
22 physically assaulted you. We have the robberies, other
23 incidents involved with -- with John and Russ. Did
24 John or Russ ever physically assault you?

25 THE WITNESS: Yeah, John did. So I went

1 to a Safe Nest. And yeah, it hurt -- did something to
2 my dog that I wasn't aware -- I had a dog at the time
3 and I had rescued the dog kind of thing and this just
4 breaks my heart. So, you know, I didn't realize that
5 he -- I mean, I don't know what he was doing with the
6 dog. I have no idea. But you know, I was real
7 protective of the dog. But the dog was kind of just
8 out of it all the time and I'm like what's wrong with
9 my dog? You know. So one night -- one day, it was
10 really hot and he didn't pay the bill there or
11 something and he locked my dog in the mobile home and I
12 started screaming, "Get my dog out of there, it's 120."
13 And then he was, like, "No," he's -- he wouldn't open
14 the door. So I just went, "Oh, my God," you know, and
15 started screaming and screaming. And then I finally
16 got him to open the door and I grabbed my dog and I
17 said, "Just -- just, you know, take me," I had a
18 doctor's appointment that day, "Take me to the
19 doctor's," it was over in Charleston right next to Safe
20 Next, thank God. And then I -- I went to the doctor's
21 and I said, "I don't want," I told the doctor -- the
22 receptionist, "I don't want this guy around me, he's
23 scaring me." I was, like, "Please just get him away
24 from me." And I kind of remember saying what happened.
25 And then, I grabbed my dog out of the car and I brought

1 him inside the doctor's office and then I went next
2 door to Safe Nest. And I told them what happened and
3 my arm was all swollen. They have all the information
4 there. And they said, "Okay, well, we can't help you,
5 though, because you have an animal. So walk, you know,
6 walk to Shade Tree." And I'm like, "I don't know where
7 it is," you know, I'm already kind of hurt as is, you
8 know, through all this stuff.

9 And I was walking -- anyway, I ended up
10 walking, it was like 120. It was really getting hot
11 and my dog started getting sick and throwing up and
12 stuff. So I called my mom. She wouldn't come help me.
13 Called another friend. He wouldn't help me. And then
14 I -- I remember John driving by and he said, you know,
15 "Fuck you." And I'm, like, I don't remember anything
16 after that. I just remember walking, it was really
17 hot. I blacked out or something. I don't remember
18 anything. And then I had flashbacks about a week or so
19 ago or whatever where I started out in my dress, my
20 purse, my organizer, and I had my dog. And I was
21 walking and then I ended up in a sheet -- a sheet and
22 thongs and then I don't know what happened in between
23 that time.

24 APPEAL OFFICER BRADLEY: In a -- in a
25 sheet with some thongs on your feet?

1 THE WITNESS: Yeah. And my dog was gone
2 and I don't know what happened. And -- and then I
3 remember I was running across the street and some guy
4 had -- had a stick and hit me in the back with it and I
5 was trying to run and I remember a semi-truck coming
6 and I was trying to run to the truck to try and get
7 help and then I fell and then that's all I remember
8 that part.

9 APPEAL OFFICER BRADLEY: Okay, let me --
10 let me stop you right there, please, Ms. Howell. So do
11 you know where you were when you woke up in the sheet?

12 THE WITNESS: I was at a gas station.
13 Somebody called 911 they said.

14 APPEAL OFFICER BRADLEY: At a gas
15 station?

16 THE WITNESS: Yeah. A lady had called
17 911. And when I woke up -- I just remember waking up
18 in the hospital and then, like, where's my -- my dress,
19 where's my dog? And she -- and the nurse said that I
20 only came with a sheet.

21 APPEAL OFFICER BRADLEY: And when you --
22 when you ran and you said some guy hit you with a
23 stick?

24 THE WITNESS: Yeah.

25 APPEAL OFFICER BRADLEY: Just some guy

1 who was on the street?

2 THE WITNESS: I don't -- because I was
3 out there for a whole day and a half, I think, or
4 something, because it was --

5 APPEAL OFFICER BRADLEY: Out on the
6 street?

7 THE WITNESS: -- May 31st because I
8 remember my doctor's appointment was at 10:30, and I
9 remember looking at the clock across the street. And I
10 remember my dog and I remember walking and I remember
11 John yelling and I remember calling my mother and then
12 I don't -- there's a big gap.

13 APPEAL OFFICER BRADLEY: Uh-huh.

14 THE WITNESS: And then I don't know what
15 happened during that time.

16 APPEAL OFFICER BRADLEY: You woke up in
17 the hospital?

18 THE WITNESS: No. And then I -- I
19 remember I -- I was at some house, I had my dress on
20 and then I blacked out there and then I -- I wake up
21 again and I'm in a sheet and I'm running across the
22 street and the guy hit me and he put, like, a hose on
23 me and -- and then I tried to get help from the truck
24 driver and I remember blacking out again. And that's
25 all. And then some lady -- when I asked -- when I was

1 in Valley, I asked what happened to my -- my dog, my
2 dress and my purse and stuff like that and she's, like,
3 "What are you talking about? The only thing you had
4 was -- was your sheet, but -- wrapped in a sheet with
5 some thongs."

6 So John, I guess, found out that I was
7 at the Shade Tree shelter and I have -- he had the car
8 that he had bought. And I said, you know, I tried to
9 look at the license plate because I was going to call
10 the police and tell them he had come and found me at
11 the shelter. And I walked up to -- what happened,
12 they're not supposed to tell anybody where -- where you
13 are, right? But they had made a mistake and they paged
14 me, so he found out where I was. So I came downstairs
15 and then I went outside, thinking it was Bill, but it
16 was John. And I go, "You son of a bitch, you killed my
17 dog." And he goes, "Yeah, I know that." And then I
18 said -- and he goes, "Well, I have all your paperwork,
19 your birth certificates, your sheriff card, your ID."
20 Okay, well, that's what I started out with in my
21 organizer. So I would assume that was the person, I
22 guess, who might have done something to me.

23 APPEAL OFFICER BRADLEY: When you were
24 at Valley Hospital, did you go from Valley back to
25 Shade Tree, and --

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THE WITNESS: I was there for --

APPEAL OFFICER BRADLEY: -- that's when you saw John?

THE WITNESS: -- I think -- yeah, I went -- I went to the Valley for, like, four days, I think, and then to Bill's for -- I was really sick.

APPEAL OFFICER BRADLEY: Who's Bill?

THE WITNESS: Oh, William Lipski, he --

APPEAL OFFICER BRADLEY: Oh, okay.

THE WITNESS: He let me go to his house for a couple of days because I was really sick and they wouldn't keep me at the hospital anymore. So he let me, you know, rest there for two days, I think, or three days. And then I went to Shade Tree on the 8th of June. And then John found me there, I don't know, maybe a couple of weeks later or a month later. I can't remember.

APPEAL OFFICER BRADLEY: You said you went to Shade Tree on June 8th.

THE WITNESS: Uh-huh.

APPEALS OFFICER BRADLEY: That's -- so that would be -- if we look at May 17th -- just two -- two and a half weeks after you were attacked by Mr. Shay.

THE WITNESS: Yeah. Yeah. I'm trying

1 to -- yeah, that date I'm not real certain on, the May
2 17th, but May 31st, I remember just because of the
3 doctor's appointment and I remember distinctly Safe
4 Nest telling me what happened.

5 APPEALS OFFICER BRADLEY: Okay, so that
6 was May 31st. And then it was June 8th that you went
7 back to Shade Tree.

8 THE WITNESS: I -- well --

9 APPEALS OFFICER BRADLEY: Why do you
10 know that date?

11 THE WITNESS: Because that's what they
12 told me.

13 APPEALS OFFICER BRADLEY: Okay.

14 THE WITNESS: I asked the caseworker.
15 Because Safe Nest turned me away and -- they should
16 have given me a ride there because I was in bad shape.
17 You know, had they not, my dog would have been alive
18 and I wouldn't have been hurt like that. And you know,
19 I was like, and then for two months at Shade Tree, I
20 don't remember going to classes. They have classes
21 over there. I don't remember talking to people. I
22 don't remember anything. So again, I shut my mind off,
23 you know.

24 APPEALS OFFICER BRADLEY: Did you go to
25 the police after those incidents? The incident with

1 John and the --

2 THE WITNESS: Yeah.

3 APPEALS OFFICER BRADLEY: -- you know,
4 all this. Did you go back to the police? Did you --
5 did you go to a police precinct, to a --

6 THE WITNESS: Headquarters.

7 APPEALS OFFICER BRADLEY: Uh-huh.

8 THE WITNESS: And I told them about the
9 car and that Russ and John -- and I told them pretty
10 much what I could remember.

11 APPEALS OFFICER BRADLEY: Did you file a
12 written report?

13 THE WITNESS: And they wanted me to go
14 back there and get my stuff and I said -- I just
15 couldn't handle it. You know. And they said, "We'll
16 meet you there, you know, get the VIN number off the
17 car." Because that's what they do, they steal cars or
18 something like that. I said, "Okay." And they were
19 going to go with me, but every time I did I would fall
20 apart.

21 APPEALS OFFICER BRADLEY: When was that
22 that you went to the police? Do you remember the date?
23 Was it before or after you went back to Shade Tree
24 after being at --

25 THE WITNESS: After I was at Shade Tree.

1 APPEALS OFFICER BRADLEY: It was after
2 Shade Tree.

3 THE WITNESS: I think. I think.

4 APPEALS OFFICER BRADLEY: So it was
5 after June --

6 THE WITNESS: I can't remember.

7 APPEALS OFFICER BRADLEY: But not while
8 you were staying with Mr. Lipski?

9 THE WITNESS: Huh-uh, no.

10 APPEALS OFFICER BRADLEY: Did he ever
11 encourage you to file a police report?

12 THE WITNESS: No.

13 APPEALS OFFICER BRADLEY: Just curious.

14 THE WITNESS: No.

15 APPEALS OFFICER BRADLEY: Did you file a
16 police report when you did go to the police that time?
17 Did you file a written report with them?

18 THE WITNESS: Yeah.

19 APPEALS OFFICER BRADLEY: Okay. So --
20 okay.

21 THE WITNESS: I know, it's a lot. Well,
22 I had -- I never had a seizure that I -- that I know
23 of. I started having seizures after that. Like, the
24 anxiety would get me so bad, I'd start shaking. And I
25 -- I didn't have any anxiety medicine at the time.

1 Like, right now, I'm on (inaudible) you can tell. But
2 it would turn into a seizure. And then I was like
3 shaking and then, you know, taken to the hospital for a
4 seizure. And I was having, like, three a week for
5 seven months or something. So.

6 APPEALS OFFICER BRADLEY: While staying
7 at Shade Tree or were you someplace --

8 THE WITNESS: At Shade Tree.

9 APPEALS OFFICER BRADLEY: Okay.

10 THE WITNESS: So they finally got those
11 under control with, like, Dilantin, and they gave me
12 Dilantin and some other things for seizures.

13 APPEALS OFFICER BRADLEY: Okay. So what
14 -- what -- what the Victims of Crime Program addresses
15 are violent crimes, not crime against property. So in
16 understanding the distinction between a robbery, you
17 know, or, sadly, even the incident involving your dog,
18 I've been looking at -- at situations in which you were
19 physically attacked. We have --

20 THE WITNESS: My neck and my back have
21 never been the same since after that and the seizures
22 that, you know, it's hard to --

23 APPEALS OFFICER BRADLEY: Right. And
24 that was, then, the incident was on or around May 17th
25 where Jeffrey Shay attacked you. That's -- that's one

1 incident. Do you also claim, then, that you were
2 physically assaulted by John?

3 THE WITNESS: I would assume it would be
4 him. I remember who did it.

5 APPEALS OFFICER BRADLEY: Okay.

6 THE WITNESS: But yeah, my -- my back.
7 I remember getting hit in the back.

8 APPEALS OFFICER BRADLEY: Okay.

9 THE WITNESS: And it hurt.

10 APPEALS OFFICER BRADLEY: And that was
11 on May 31st?

12 THE WITNESS: Yeah.

13 APPEALS OFFICER BRADLEY: Okay.

14 THE WITNESS: That's when that was.

15 APPEALS OFFICER BRADLEY: So those two
16 -- those are the two days that we're looking at as far
17 as violent physical crime is concerned, correct?

18 THE WITNESS: Right.

19 APPEALS OFFICER BRADLEY: And you filed
20 a police report in each case?

21 THE WITNESS: I -- yeah. There was a
22 couple of them. Yeah.

23 APPEALS OFFICER BRADLEY: Okay. When
24 did you find out about the -- the Victims of Violent
25 Crime Program and how they might be able to help you?

1 THE WITNESS: I think Angelica Rodriguez
2 was my caseworker --

3 APPEALS OFFICER BRADLEY: At?

4 THE WITNESS: -- at Shade Tree. She
5 doesn't work there anymore, though. I don't know why.
6 Had given me paperwork on it because I didn't know what
7 it was. And I kept, you know, I would forget things a
8 lot. Like, I'd be really good for a week and then I
9 would just kind of forget everything. And I think
10 that's why a lot of my paperwork was missing or I
11 didn't get the mail a lot of times either. So, just --
12 it was a lot to handle.

13 APPEALS OFFICER BRADLEY: From Shade
14 Tree, did you -- did you move from there to your
15 apartment on Bridger or were you living someplace else
16 in between?

17 THE WITNESS: A transitional housing
18 place. And when -- I was at Rawson-Neal for a month
19 also.

20 APPEALS OFFICER BRADLEY: At where?

21 THE WITNESS: Rawson-Neal for a month.

22 APPEALS OFFICER BRADLEY: What's that?

23 THE WITNESS: It's like a -- a
24 psychiatric hospital because I --

25 APPEALS OFFICER BRADLEY: Can you spell

1 that for me?

2 THE WITNESS: R-A-W-S-O-N.

3 APPEALS OFFICER BRADLEY: Rawson.

4 THE WITNESS: And then slash N-E-A-L.

5 APPEALS OFFICER BRADLEY: All right.

6 Okay. That's a transitional housing place?

7 THE WITNESS: No, that's a psychiatric
8 hospital. And then they told me about a transitional
9 housing place after that. That's what it was.

10 APPEALS OFFICER BRADLEY: Okay. And did
11 you then go from Rawson-Neal to --

12 THE WITNESS: To the --

13 APPEALS OFFICER BRADLEY: -- a
14 transitional housing place?

15 THE WITNESS: Right. Covenant of Love
16 was what it's called. And then I got, let's see, two
17 vouchers from Social Services to pay for the rent where
18 I am right now.

19 APPEALS OFFICER BRADLEY: Okay.

20 THE WITNESS: And that's where I am.

21 APPEALS OFFICER BRADLEY: And when did
22 you move to your apartment on Bridger?

23 THE WITNESS: Like, three months ago, I
24 think.

25 APPEALS OFFICER BRADLEY: Okay. Are you

1 living there by yourself now?

2 THE WITNESS: Yeah.

3 APPEALS OFFICER BRADLEY: Okay.

4 THE WITNESS: Sorry, it's a lot.

5 APPEALS OFFICER BRADLEY: No, no, that's
6 fine. I mean, that -- it's -- it's -- clarifies some
7 -- I know you can only remember what you can remember.

8 THE WITNESS: Uh-huh.

9 APPEALS OFFICER BRADLEY: Do you have
10 medical bills for your time at Valley or any of the
11 other doctor visits that you may have had in connection
12 with the injury that you occurred on -- by Mr. Shay
13 and/or the injuries that were from May 31st?

14 THE WITNESS: Yeah, I have -- Valley
15 paid was some -- yeah, I have bills from Valley and UMC
16 and North Vista for -- for those. Some of the -- the
17 things concerning the seizures were taken care of, I
18 believe, from Social Services. Some of them from UMC,
19 but not all of them. And the caseworker had coming out
20 -- I just remember -- a caseworker came into Valley
21 Hospital to see how I was doing or something. I
22 remember them coming in. And they took care of part of
23 the -- part of the bill. And then, after that, I don't
24 think it's being paid for anymore. I don't know. I
25 have to look at, you know, the medical records and

1 stuff.

2 APPEALS OFFICER BRADLEY: I'll just take
3 a minute here to look through some things.

4 THE WITNESS: Because I know Social
5 Services said they would help with the seizures, but
6 not anything else.

7 APPEALS OFFICER BRADLEY: Okay, just
8 give me a minute. Okay. Ms. Salazar, do you have any
9 questions?

10 MS. SALAZAR: No, I do not.

11 APPEALS OFFICER BRADLEY: Okay. You
12 know, as I said what I'm -- what I'm going to do is go
13 back and look at the documents that I have. Did you
14 bring any of your documents with you today that you
15 want me to consider?

16 THE WITNESS: No, I -- I just have the
17 ones that you sent me and then I have, like, my folder
18 from, like, saying I have a seizure disorder.

19 APPEALS OFFICER BRADLEY: Okay.

20 THE WITNESS: Anxiety disorder and stuff
21 like that.

22 APPEALS OFFICER BRADLEY: Did your --
23 your anxiety and seizure disorder exist prior to the
24 attack by -- by Mr. Shay?

25 THE WITNESS: I had -- I always had

1 anxiety, but not to this level. And then I didn't have
2 seizures before.

3 APPEALS OFFICER BRADLEY: No seizures
4 before May; the middle of May of last year?

5 THE WITNESS: No.

6 APPEALS OFFICER BRADLEY: Is that
7 correct?

8 THE WITNESS: No, I did not. Yeah, he
9 kicked me in the back and did muscle damage to my arms
10 a while back. I went to the hospital, but I never, you
11 know, reported it.

12 APPEALS OFFICER BRADLEY: Prior to May
13 of 2012? Is he still around?

14 THE WITNESS: Yeah. He works at Women's
15 Cancer Center in Nevada.

16 APPEALS OFFICER BRADLEY: Are you still
17 involved with him?

18 THE WITNESS: No. I could never talk to
19 him again.

20 APPEALS OFFICER BRADLEY: And is Mr.
21 Lipski a -- is he currently a police officer?

22 THE WITNESS: Yeah, he's a sergeant in
23 Laughlin.

24 APPEALS OFFICER BRADLEY: And do you
25 know John's last name?

1 THE WITNESS: It -- he changed it, but I
2 remember on his paperwork it was John Francis Vernon.
3 And then he mixed up the names of John Vernon Francis,
4 so I don't really know what is real name is, but that's
5 what he went by.

6 APPEALS OFFICER BRADLEY: How about
7 Russell? Do you know Russell's last name?

8 THE WITNESS: I think it was Guerilla.
9 Like a G-U-E-R-I-L-L-A, or something like that.

10 APPEALS OFFICER BRADLEY: Okay.

11 THE WITNESS: And then he had another
12 last name, but I don't remember what it was.

13 APPEALS OFFICER BRADLEY: Have you
14 worked at all since May of last year?

15 THE WITNESS: I tried to work for about,
16 like, a week. It was a webcam thing and then I lost it
17 because of my back injury and then I had the seizure
18 thing and I had to go to the hospital.

19 APPEALS OFFICER BRADLEY: Have you
20 talked to the police about pressing charges against Mr.
21 Shay for the assault?

22 THE WITNESS: They never brought that
23 part -- I was supposed to get a protective order and
24 then I got -- every time I would do it, I would, like,
25 start shaking and then end up in the hospital. So --

1 but they never brought that up.

2 APPEALS OFFICER BRADLEY: So after you
3 filed the police report --

4 THE WITNESS: Yeah, they didn't -- I
5 don't remember if they said -- I don't know.

6 APPEALS OFFICER BRADLEY: Did you -- did
7 -- do you recall talking to anybody about trying to
8 make sure that he was punished for what he did to you?
9 Did you talk to the police about that at all? So you
10 submitted a report and -- and then it was not followed
11 up?

12 THE WITNESS: I think -- they said to
13 call -- I did call the numbers that they gave me and
14 then it wasn't followed up on the -- I don't think I
15 followed up on that. I would always end up in the
16 hospital every time I get close to doing something.
17 And I tried to get the protective order and I went to
18 the wrong building. And then I ended up in the
19 hospital again. Because it was just -- I'll, you know,
20 start remembering things and I just couldn't handle it.

21 APPEALS OFFICER BRADLEY: What about
22 with John, did you -- did you talk to any --

23 THE WITNESS: He scares me to death. I
24 did call him and said I was going to come get my stuff
25 and then he was -- he was really nice and I asked him

1 -- I said, "Can I have my car back? You know, you, you
2 know, you took my car, you know, you took advantage of
3 me," this, that and the other. He said it was totaled
4 in the accident. I said, "What are you talking about?"
5 He said, "Yeah, I got into an accident." I said -- I
6 just said, "Well, that's a big, fat lie." He just said
7 that to get money. So. He said it was totaled or
8 something stupid.

9 APPEALS OFFICER BRADLEY: Did you talk
10 to the police about arresting John for anything that he
11 did?

12 THE WITNESS: I was going to and then I
13 just -- I left it alone because I got scared of both of
14 them. I figured, you know, they had left --

15 APPEALS OFFICER BRADLEY: Both being
16 John and Russell?

17 THE WITNESS: And Jeff.

18 APPEALS OFFICER BRADLEY: Jeff.

19 THE WITNESS: Yeah. Because I -- I
20 didn't -- you know, so far, nothing's happened to me
21 that I haven't, you know, they haven't come after me,
22 so I didn't know if I should just leave well enough
23 alone or not. But I moved into Bridger (inaudible)
24 apartments. My window's already been broken, so they
25 fixed that. And then somebody had broken my lock to my

1 mailbox already. So it looks like they, you know,
2 either Jeff or John or Russell, whatever, they know
3 where I am now. So that's probably best that I do get
4 a protective order now.

5 APPEALS OFFICER BRADLEY: Well, I can't
6 give you any advice on those things, but yeah, you need
7 to be careful who you pick as friends.

8 THE WITNESS: Yeah. I'm -- yeah, I
9 haven't talked to them for a long time. And I don't
10 drink anymore and I'm not, you know, doing drugs
11 anymore, so.

12 APPEALS OFFICER BRADLEY: Okay.

13 THE WITNESS: Hard lesson to learn.

14 APPEALS OFFICER BRADLEY: Life's not
15 easy, that's for sure.

16 THE WITNESS: Yeah.

17 APPEALS OFFICER BRADLEY: Okay. Is
18 there anything else, then, about these incidents that
19 you -- that we haven't already discussed that you want
20 me to know and take into account when I look at that --
21 these issues. You understand I can look at them under
22 the policies that apply to the Victims of Crime
23 Program? It -- it's important you understand that I
24 have no jurisdiction over anybody that -- that attacked
25 you or committed any kind of a crime. This isn't a

1 criminal court.

2 THE WITNESS: Yeah, I --

3 APPEALS OFFICER BRADLEY: This is an
4 administrative proceeding. And my job is to decide
5 whether or not the Victims of Crime Program and its
6 officers are properly applying their policies.

7 THE WITNESS: Okay.

8 APPEALS OFFICER BRADLEY: So that's what
9 I'll be doing. I'll be looking at your -- everything
10 that occurred with you in connection with their
11 policies to see whether or not they --

12 THE WITNESS: Can help me.

13 APPEALS OFFICER BRADLEY: -- they can
14 help you. Whether you're entitled to compensation
15 under those policies.

16 THE WITNESS: Okay.

17 APPEALS OFFICER BRADLEY: But -- and
18 with that in mind, is there anything else that -- that
19 would help me in making that decision?

20 THE WITNESS: Just that I can't work
21 right now because my back and my neck it's like
22 constant pain all the time. And, you know, it's not
23 like I don't want to work. I want to work because it's
24 depressing to stay home, you know. So if I could just
25 get help with maybe, you know, doctors that can maybe

1 help me with something to do with my back, like,
2 Lidocaine or something to take the pain away so at
3 least maybe I can back to work because I'll have to do
4 that, you know. Stay away from those kind of people.

5 APPEALS OFFICER BRADLEY: Yeah. Makes
6 life easier.

7 THE WITNESS: Yeah.

8 APPEALS OFFICER BRADLEY: Okay. Well, I
9 really appreciate you coming in today, Ms. Howell. You
10 have probably received in the mail -- there was --
11 there was some confusion over -- over the Hearing
12 Officer hearings and notices that went out and --

13 THE WITNESS: Yeah.

14 APPEALS OFFICER BRADLEY: -- what you
15 were actually bringing. So there was a case we had
16 before that was set for hearing on February 27th that
17 was set before me that you were not here for.

18 THE WITNESS: Yeah, I think -- haven't
19 got that in the mail or something happened.

20 APPEALS OFFICER BRADLEY: Yeah. I
21 issued an order to show cause why the case shouldn't be
22 dismissed and then I didn't get a response, so I did
23 dismiss that appeal, but as this matter that's before
24 me today relates to the same incidents --

25 THE WITNESS: Right.

1 APPEALS OFFICER BRADLEY: -- what I'm
2 going to do is -- I'll explain in my -- in my written
3 decision about what issues are before me and how it got
4 there and -- and make a decision based on the -- the
5 actual matters that you -- the reason why you disagreed
6 with the -- the VOCP's decision. Rather than -- I'm
7 not going to deal with this just on a strictly
8 procedural basis.

9 THE WITNESS: Okay. Thank you.

10 APPEALS OFFICER BRADLEY: So I think
11 with that, anything else that you'd like to add, Ms.
12 Salazar?

13 MS. SALAZAR: No.

14 APPEALS OFFICER BRADLEY: Okay. So
15 thank you very much, Ms. Howell. With that, then, I'll
16 have this matter as submitted for decision. You'll
17 have my decision in writing within 30 days of today and
18 I'll mail that to your Bridger address.

19 THE WITNESS: Okay.

20 APPEALS OFFICER BRADLEY: Okay? If for
21 any reason your address changes between now and when
22 you get that decision, if you could contact our office
23 and let us know what your mailing address is, I would
24 appreciate that.

25 THE WITNESS: Okay. And that's Bridger.

1 I think they forgot the "R".

2 APPEALS OFFICER BRADLEY: Oh, did --
3 they have Bridge. Okay, yeah, I've got you down, then,
4 811 Bridger --

5 THE WITNESS: Okay.

6 APPEALS OFFICER BRADLEY: -- Apartment
7 426, Las Vegas, Nevada, 89101.

8 THE WITNESS: Okay, great.

9 APPEALS OFFICER BRADLEY: Right?

10 THE WITNESS: Yeah, that's perfect.

11 APPEALS OFFICER BRADLEY: Okay.

12 THE WITNESS: Thank you.

13 APPEALS OFFICER BRADLEY: Thank you.

14 We'll go off the record now.

15 THE WITNESS: Okay. Thank you.
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C E R T I F I C A T E

TITLE: In the Matter of the Contested Victims of
Crime Claim of: STACY L. HOWELL

DATE: April 16, 2013

LOCATION: Las Vegas, Nevada 89102

The below signature certifies that the
proceedings and evidence are contained fully and
accurately in the digital audio as reported at the
proceedings in the above-referenced matter before the
Department of Administration, Appeals Office.

MICHELE BOYLES
COURT REPORTING SERVICES

19
20
21
22
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25
6-5-13
DATE

1.3

DEPARTMENT OF ADMINISTRATION
Victims of Crime Compensation Program
2200 S. Rancho Drive, #130
Las Vegas, NV 89102

STATE OF NEVADA
DEPT. OF ADMINISTRATION
HEARINGS DIVISION

13 APR -5 AM 11:53

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NEVADA DEPARTMENT OF ADMINISTRATION
BEFORE THE APPEALS OFFICER

In the Matter of the Contested)
Application for Compensation:)
)
)
Stacy Howell,)
Applicant)
_____)

APPEAL NO: 1307366-GB
VOCP NO: 13-10022162-LV
13-10022379-LV

VOCP APPEAL STATEMENT

This is the second appeal on the same matter brought forth under Appeal Number 1305494-GB. In that matter, Ms. Howell did not appear at the scheduled hearing before Appeals Officer Georganne Bradley. An Order to Show Cause was issued, followed by an Order of Dismissal on March 27, 2013.

In the current appeal, Ms. Howell appeals a decision made by Mercer Berens on December 24, 2012. This request for appeal was filed on March 20, 2013, which is outside the fifteen day timeframe allowed by statute.

The Victims of Crime Program stands by its decision and argument set forth in 1305494-GB and requests the Appeals Officer dismiss this request.

Dated this 5th of April, 2013
Victims of Crime Program

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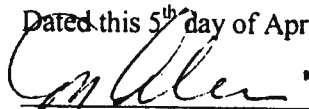
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Victim of Crime Program, does hereby certify that on the date shown below, a true and correct copy of the foregoing **VOCP APPEAL STATEMENT** was duly mailed, postage prepaid to the following:

DEPARTMENT OF ADMINISTRATION
APPEALS DIVISION
2200 S RANCHO DR STE 220
LAS VEGAS, NV 89102

STACEY HOWELL
811 BRIDGER AVE UNIT 426
LAS VEGAS, NV 89101

Dated this 5th day of April, 2013



Employee of the State of Nevada

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BEFORE THE APPEALS OFFICER

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In the Matter of the Contested)	
Victims of Crime Claim of:)	Claim No: 13-10022162-LV
)	
STACY L HOWELL,)	Appeal No: 1307366-GB
)	
Applicant.)	

NOTICE OF HEARING

YOU ARE HEREBY NOTIFIED that a hearing will be held in the above-entitled matter before the Appeal Officer on:

Date: April 16, 2013

Start Time: 11:00AM (Approximate length of time for hearing – 1 Hour)

Place: Appeals Office Hearing Room
 2200 South Rancho Drive, Suite #220
 Las Vegas, NV 89102
 Phone: (702) 486-2527

Should the Victim wish to make his appearance via telephone he or she may do so by contacting this office prior to the date of the hearing and making arrangements therefore.

IT IS SO ORDERED this 27th day of March, 2013.

 Georganne W Bradley, Esq.
 APPEAL OFFICER

1 CERTIFICATE OF MAILING

2 The undersigned, an employee of the State of Nevada, Department of Administration,
3 Hearings Division, does hereby certify that on the date shown below, a true and correct copy of
4 the foregoing NOTICE OF HEARING was duly mailed, postage prepaid OR placed in the
5 appropriate addressee runner file at the Department of Administration, Hearings Division, 2200
S. Rancho Drive, #220, Las Vegas, Nevada, to the following:

6 STACY L HOWELL
7 811 BRIDGER AVE UNIT 426
LAS VEGAS NV 89101

8 VICTIMS OF CRIME PROGRAM
9 2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

10 Dated this 2nd day of March, 2013.

11 Patti C. Fox
12 Patti Fox, Legal Secretary II
13 Employee of the State of Nevada

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REQUEST FOR HEARING BEFORE THE APPEALS OFFICER
NEVADA DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303507-MB/1303508-MB
Claim Number: 13-10022162-LV

STACY L HOWELL
~~PO BOX 669~~
~~LAS VEGAS, NV 89125~~

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

*Request
for
Appeal*

I WISH TO APPEAL THE HEARING OFFICER DECISION DATED: MAY 17th 2012

(Please attach a copy of the Hearing Officer's Decision.

PERSON REQUESTING APPEAL: (circle one) CLAIMANT/EMPLOYER/INSURER

REASON FOR APPEAL: did not receive mail

If you are represented by an attorney or other agent, please print the name and address below.

none
Name of Attorney or Representative
Address
City, State, Zip Code
Telephone Number

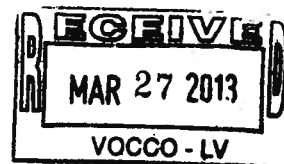
Stacy Howell
Person requesting this hearing (please print)
Stacy Howell
Person requesting this hearing (signature)
366-7654 (702)
Telephone Number
3-20-13
Date

If you are appealing the Hearing Officer's decision, file this form no later than fifteen (15) days after that decision at:

NEVADA DEPARTMENT OF ADMINISTRATION
APPEALS OFFICE
2200 S RANCHO DRIVE, SUITE 220
LAS VEGAS, NV 89102
(702) 486-2527

1307366-GB

**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION**



In the matter of the Contested
Application for Compensation:

Hearing Number: 1306351-TH
Claim Number: 13-10022379-LV

STACY L HOWELL
811 BRIDGER AVE UNIT 426
LAS VEGAS, NV 89101

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

The Applicant's request for hearing was filed on February 19, 2013 and a hearing was scheduled for and held on **March 20, 2013** before Hearing Officer Tracey Hagan, in accordance with Chapter 217 of the Nevada Revised Statutes.

The Applicant, STACY L HOWELL, was not present and was not represented by legal counsel. Victims of Crime Program (VOC) was represented by Rebecca Salazar, Compensation Officer.

ISSUE

The Applicant appealed the Compensation Officer's determination dated September 28, 2012.

The issue before the Hearing Officer is Denial of Application.

DECISION AND ORDER

This matter was previously appealed and a decision rendered on Hearing Number 1303508-MB. The matter is thus *res judicata* and is hereby **DISMISSED**.

IT IS SO ORDERED this 27th day of March, 2012.


**Tracey Hagan
Hearing Officer**

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APPEAL RIGHTS

Pursuant to NRS 217.117, should any party desire to appeal this final decision of the Hearing Officer, a written request for appeal must be filed with the Appeals Officer within fifteen (15) days after the date of the decision by the Hearing Officer. Mail the **REQUEST FOR HEARING BEFORE THE APPEALS OFFICER** to: **APPEALS OFFICE, DEPARTMENT OF ADMINISTRATION, 2200 SOUTH RANCHO DRIVE SUITE 220, LAS VEGAS, NV 89102.**

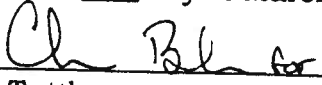
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **DECISION AND ORDER** was duly mailed, postage prepaid **OR** placed in the appropriate addressee runner file at the Department of Administration, Hearings Division, 2200 S. Rancho Drive, #210, Las Vegas, Nevada, to the following:

STACY L HOWELL
811 BRIDGER AVE UNIT 426
LAS VEGAS NV 89101

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 27th day of March, 2012.



Carol Tuttle
Employee of the State of Nevada

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

In the matter of the Contested
Application for Compensation:

Hearing Number: 1306351-TH
Claim Number: 13-10022379-LV

STACY L HOWELL
C/O LYNN HOWELL
2865 SKOWHEGAN DR
LAS VEGAS, NV 89074

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

NOTICE OF HEARING BEFORE THE HEARING OFFICER

Pursuant to the **Victim's** request for a Hearing Officer review of the Compensation Officer's Determination under Chapters 217 of the Nevada Revised Statutes, you are hereby notified a hearing will be held:

DATE: March 20, 2013
TIME: 10:30AM
PLACE: Department of Administration, Hearings Division
2200 South Rancho Drive, Suite 210
Las Vegas, NV 89102
Phone (702) 486-2525

The matter to be ascertained from this Hearing shall be whether the determination rendered by the Compensation Officer is proper.

If you would prefer to testify by telephone, please contact this office one week prior to the hearing date at 486-2525 with the appropriate information. Telephone hearings will generally take place within 1 hour of the time designated for the Hearing (see above).

NOTE: This Hearing will be scheduled on a **STACKED** calendar.

Dated this 22nd day of February, 2012.

Tracey Hagan
Hearing Officer

HEARING NO. 1303507-MB

State of Nevada Victims of Crime Compensation Program

Request for Hearing

Complete and submit this form to appeal a decision of the compensation officer

Victim/Applicant Name: STACY HOWELL	VOCP Claim # 13-10022162-LV
Address: 2865 SKOWHEGAN	City, State, Zip: HENDERSON, NV 89074
Phone # 702-305-4126	Email: LCANNING@COX.NET

Reason for Appeal:

no email

ATTACH A COPY OF THE DECISION YOU WISH TO APPEAL

Date of compensation officer decision being appealed:

Reason for appealing the compensation officer decision:

Do you have any documents to submit to the hearing officer?

Yes If Yes: please describe the document here:

No If Yes: please attach the documents to this form.

Is there any additional information the hearing officer should consider?

Yes If Yes please explain:

No

The information provided herein is true and accurate to the best of my information and belief

Applicant Signature: <i>Stacy Howell</i>	Print Name: STACY HOWELL	Date: 2-19-13
Telephone # 702-305-4126	Email address: LCANNING@COX.NET	
For Southern Nevada Mail to: Hearings Officer 2200 South Rancho Drive Las Vegas NV 89102	Fax to: LV - (702) 486-2879 CC - (775) 687-8441	For Northern Nevada Mail to: Hearings Officer 1050 E Williams St # 450 Carson City NV 89701

SW

~~366-7654~~ 305-4126

366-7654

13060351-TH

Stacy Howell
811 Bridger Ave # 426
LAS VEGAS NEVADA 89101

new address
3-30-13

House (702) 366-7654
(702) 305-4126 cell

CHANGED IN DATA BASE
DATE: 3-20-13
INITIALS: mm

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BEFORE THE APPEALS OFFICER

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In the Matter of the Contested
Victims of Crime Claim of:

)
) Claim No: 13-10022162-LV
)
) Appeal No: 1305494-GB
)

STACY L HOWELL,

)
) Applicant.
)
)

ORDER OF DISMISSAL

Pursuant to an Order to Show Cause filed and mailed on March 1, 2013, and for good cause appearing;

IT IS HEREBY ORDERED that this matter is hereby **DISMISSED** with prejudice, for failure to comply with the Show Cause Order, without further proceeding.

IT IS SO ORDERED this 27 day of March, 2013.

Georganne W. Bradley
Georganne W. Bradley, Esq.
APPEALS OFFICER

NOTICE: Pursuant to NRS 217.117, should any party desire to appeal this final determination of the Appeal Officer, a written request for an appeal must be filed with the State Board of Examiners, 209 East Musser, #200, Carson City, NV 89710, within fifteen (15) days of the date of this decision.

DEPARTMENT OF ADMINISTRATION
Victims of Crime Compensation Program
2200 S. Rancho Drive, #130
Las Vegas, NV 89102

**NEVADA DEPARTMENT OF ADMINISTRATION
BEFORE THE APPEALS OFFICER**

In the Matter of the Contested)
Application for Compensation:)
)
)
Stacy Howell,)
Applicant)
_____)

APPEAL NO: 1305494-GB

VOCP NO: 13-10022162-LV
13-10022379-LV

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VOCP APPEAL STATEMENT

This appeal concerns two separate applications for assistance and two separate dates of crime. The application for 13-10022162-LV was submitted on August 29, 2012 and was denied on September 18, 2012. This application concerns a domestic violence that occurred against Ms. Howell on May 17, 2012. Ms. Howell did not report the crime until July 16, 2012.

The application for 13-10022379-LV was submitted on August 27, 2012 and was denied on August 28. This application concerns a domestic violence that occurred against Ms. Howell by a different offender on May 31, 2012. Ms. Howell reported this crime also on July 16, 2012.

Both of these incidents were reported to police nearly two months after they occurred, which is outside of the five day time frame allowed by statute.

A hearing was held on December 17, 2012 before Hearing Officer Mercer Berens during which Ms. Howell failed to appear. Therefore, the decision to deny these claims was upheld.

Failure to report a crime to the police within five days of its occurrence may result in a denial of the claim pursuant to NRS 217.210 and the Board of Examiners policy, Reasons for Denial:

NRS 217.210 Limitations on time for making order for payment of compensation; exceptions.

1. Except as otherwise provided in subsection 2, an order for the payment of compensation must not be made unless the application is made within 1 year after the date of the personal injury or death on which the claim is based, unless waived by the Board of Examiners or a person designated by the Board for good cause shown, and the personal injury or death was the result of an incident or offense that was reported to the police within 5 days of its occurrence or, if the incident or offense could not reasonably have been reported within that period, within 5 days of the time when a report could reasonably have been made.

A. The compensation officer may deny an application when it does not comply with NRS 217 or BOE Policies. Common reasons for Application Denial include:

.....6) Crime Reported After 5 Days

Victims of Crime requests the Appeals Officer affirm the denial of this claim.

Dated this 22nd day of February, 2013
Victims of Crime Program

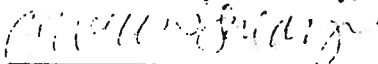
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Victim of Crime Program, does hereby certify that on the date shown below, a true and correct copy of the foregoing **VOCP APPEAL STATEMENT** was duly mailed, postage prepaid to the following:

DEPARTMENT OF ADMINISTRATION
APPEALS DIVISION
2200 S RANCHO DR STE 220
LAS VEGAS, NV 89102

STACY HOWELL
C/O LYNN HOWELL
2865 SKOWHEGAN DR
HENDERSON, NV 89074

Dated this 22nd day of February, 2013



Employee of the State of Nevada

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BEFORE THE APPEALS OFFICER

In the Matter of the Contested
Victims of Crime Claim of:

STACY L HOWELL,

Applicant.

)
) Claim No: 13-10022162-LV

)
) Appeal No: 1305494-GB

NOTICE OF HEARING

YOU ARE HEREBY NOTIFIED that a hearing will be held in the above-entitled matter before the Appeal Officer on:

Date: February 27, 2013

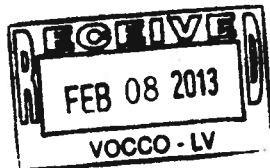
Start Time: 10:00AM (Approximate length of time for hearing - 1 Hour)

Place: Appeals Office Hearing Room
2200 South Rancho Drive, Suite #220
Las Vegas, NV 89102
Phone: (702) 486-2527

Should the Victim wish to make his appearance via telephone he or she may do so by contacting this office prior to the date of the hearing and making arrangements therefore.

IT IS SO ORDERED this 3rd day of February, 2013.

Georganne W Bradley, Esq.
APPEAL OFFICER



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CERTIFICATE OF MAILING

2 The undersigned, an employee of the State of Nevada, Department of Administration,
3 Hearings Division, does hereby certify that on the date shown below, a true and correct copy of
4 the foregoing NOTICE OF HEARING was duly mailed, postage prepaid OR placed in the
5 appropriate addressee runner file at the Department of Administration, Hearings Division, 2200
6 S. Rancho Drive, #220, Las Vegas, Nevada, to the following:

6 STACY L HOWELL
7 C/O LYNN HOWELL
8 2865 SKOWHEGAN DR
9 LAS VEGAS NV 89074

8 VICTIMS OF CRIME PROGRAM
9 2200 S RANCHO DR STE 130
10 LAS VEGAS NV 89102

11 Dated this 24 day of February, 2013.

12 Patti Fox
13 Patti Fox, Legal Secretary II
14 Employee of the State of Nevada

**REQUEST FOR HEARING BEFORE THE APPEALS OFFICER
NEVADA DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION**

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303507-MB/1303508-MB
Claim Number: 13-10022162-LV

STACY L HOWELL
PO BOX 669
LAS VEGAS, NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

*moved to Coventry of Low Transitional Housing
Please see the compensation 2505...*
I WISH TO APPEAL THE HEARING OFFICER DECISION DATED: *September 18 and 28 2012*

(Please attach a copy of the Hearing Officer's Decision)

PERSON REQUESTING APPEAL: (circle one) CLAIMANT/EMPLOYER/INSURER

REASON FOR APPEAL: *Hospitalization on the 24th Dec 2012
at Las Vegas and I did not receive my mail
until it was too late. I need your help please.*

If you are represented by an attorney or other agent, please print the name and address below.

none
Name of Attorney or Representative
Address
City, State, Zip Code
Telephone Number

Stacy Howell
Person requesting this hearing (please print)
Stacy Howell
Person requesting this hearing (signature)
2805 Showalter Drive LV, NV
(702) 305-4126 (1-1713) 89074
Telephone Number Date

If you are appealing the Hearing Officer's decision, file this form no later than fifteen (15) days after that decision at:

NEVADA DEPARTMENT OF ADMINISTRATION
APPEALS OFFICE
2200 S RANCHO DRIVE, SUITE 220
LAS VEGAS, NV 89102
(702) 486-2527

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mail ↑

*I, Stacy Howell, would like if possible to receive my
a Payment but was appreciated if there is any I can
get!*

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Angelica ... 973 0505

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DEPARTMENT OF ADMINISTRATION
2200 SOUTH RANCHO DRIVE
SUITE 210
LAS VEGAS NV

Hearing #
1303507-1113-11303
503
Case # 13-10022152-LV

Hon. Judge,

I want to appear to the court.
Please excuse my hearing due to
my hospitalization and delayed mail
that was given to me concerning
my hearing. My phone # is
(702) 305-4126 702 407-6673.

Please see 2865 ^{SKowhegan} Skowhegan Ave
Lyonville NV, 89074 as my
temporary address as it will get
to me. C.A.S.P.

My hospitalization had to do with
my condition caused by this traumatic
event. Thank you for your
time...
Steve Bruce

Cell (702) 305-4126 5010
(702) 407-6673 mom

I appreciate your consideration
of all parties. I sincerely
have nothing and would like to remain
independent once again.

Sincerely yours,
Steve Bruce

*I have Doctor
Bill to prove
witness I
need what Dave said*

*online need Social
Security
Statement*

**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION**

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303507-MB/1303508-MB
Claim Number: 13-10022162-LV

STACY L HOWELL
PO BOX 669
LAS VEGAS, NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

*Then call
1RS*

The Applicant's requests for hearing were filed on November 27, 2012 and the hearings were scheduled for and held on December 17, 2012 before Hearing Officer Mercer Berens, in accordance with Chapter 217 of the Nevada Revised Statutes.

The Applicant, Howell, Stacy L, was not present, and was not represented by legal counsel. Victims of Crime Program (VOC) was represented by Rebecca Salazar, Compensation Officer.

ISSUE

The Applicant appealed the Compensation Officer's determinations dated September 18, 2012 and September 28, 2012.

The issue before the Hearing Officer is DENY APPLICATION FOR COMPENSATION.

DECISION AND ORDER

The determination of the Compensation Officer is hereby **DISMISSED**. Applicant failed to appear.

NAC 616C.279 provides if the appealing party fails to appear at the Hearing after timely notice, the appeal may be dismissed with prejudice.

IT IS SO ORDERED this 24th day of December, 2012

Mercer W. Berens

Mercer W. Berens
Hearing Officer

APPEAL RIGHTS

Pursuant to NRS 217.117, should any party desire to appeal this final decision of the Hearing Officer, a written request for appeal must be filed with the Appeals Officer within fifteen (15) days after the date of the decision by the Hearing Officer. Mail the REQUEST FOR HEARING BEFORE THE APPEALS OFFICER to: APPEALS OFFICE, DEPARTMENT OF ADMINISTRATION, 2200 SOUTH RANCHO DRIVE SUITE 220, LAS VEGAS, NV 89102.

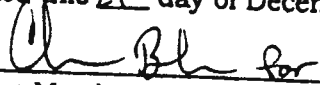
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **DECISION AND ORDER** was duly mailed, postage prepaid **OR** placed in the appropriate addressee runner file at the Department of Administration, Hearings Division, 2200 S. Rancho Drive (#210), Las Vegas, Nevada, to the following:

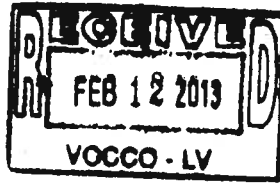
STACY L HOWELL
PO BOX 669
LAS VEGAS NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 24th day of December, 2012


Violet Martinez
Employee of the State of Nevada

*I was in the Hospital at UMC
your signature on the 24th of December and then
I was transported to Ranson and need for
approximately one month due to depression
and seizures. You can verify this so I can
please have some help with my case. I am
receiving no money and would appreciate some
loss of compensation so to restart my life.*



VOCP 120716 - 1679
120716 - 1795

13-22379-L ✓

2-5-13

I received a call from VOCP that you were sending me, Stacy Howell, c/o Lynn Howell the documents concerning the appeal. I have not received any letters yet. 2-7-13 I am at a transitional living home but I do not know how long I will be here can you please send the appeal letters to

RECEIVED
FEB 19 2013
CCM

Stacy Howell
c/o Lynn Howell
2865 Stawpton DR
Henderson, NV 89074

Thank you Stacy Howell

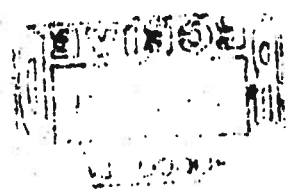
Also I do not have an attorney I am working with Colleen Witt my social worker on 2432 N. MLK Phone 455-7208 Please speak with Colleen Witt if you have any questions Thank you.

One more question is I was wondering who Cost Strategies were? Are they affiliated with you. I was under the assumption I was to deal directly with VCP only. Thank you

Stacy Howell

(547 69 6803)

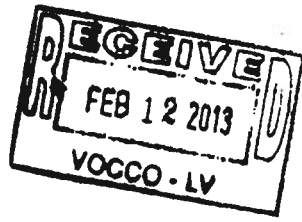
305-4126



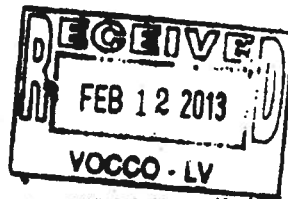
Question #2 Who is Darlene
Smith 601 Holland Avenue
Las Vegas Nevada 89106

It was on the return envelope?
I never used that name
nor lived at that address
Thank you
Shirley 2-6-13

RECEIVED
FEB 12 2013
VOCCO - LV



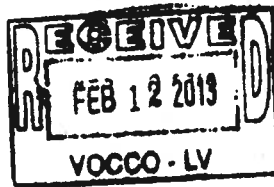
STATE OF NEVADA
VOCP Department of
Administration
2200 S Ranch drive
Suite 130 LV, NV
89102



THE REASON I HAD RESPONDED IN A
TIMELY FASHION WAS BECAUSE I DID
NOT RECEIVE THE MAIL I NEEDED
IN TIME. (E DON'T BELIEVE THIS WAS
ANY FAULT OF MINE'S BUT IT
DISCREPANCY ALSO I WAS HOSPITALIZED
AND ADMITTED TO THE HOSPITAL NUMEROUS
TIMES DUE TO RELATED SIBBLES BECAUSE
OF THIS CRIME - CRIME

THANK YOU Jay Hurd

[Signature]



2-5-13

DID YOUR VOCP PROGRAM SEND ME A LETTER
SO I CAN APPEAL THE DECISION. I AM A
US CITIZEN, SINGLE, NEVER MARRIED,
AND I AM CURRENTLY LIVING AT THE
COVENANT OF LOVE. PLEASE SEND ME
MY MAIL TO MY MOTHERS ADDRESS
AS OF NOW DUE TO THE CONFUSION OF
MY MAIL BEING MISDIRECTED DUE TO
THE SHADY TREE SHELTER, AND NOW
A NEW TRANSITIONAL HOUSING THAT IS
TEMPORARY. ALSO DO YOU HAVE ANY
KNOWLEDGE OF "CRS CONTAINMENT
STRATEGIES INC" AND WHAT ITS
ROLE IN VOCA IS? IS IT THE SAME
PROGRAM? (AGENT FOR THE VICTIMS
OF CRIME PROGRAM PO BOX 94525 LV 89193)

1015
STATE OF NEVADA
DEPARTMENT OF ADMINISTRATIVE
HEARINGS DIVISION
2200 S. Rainbow Drive, Suite 210
Las Vegas, Nevada 89102
Retain Service Requested

*Please forward this
to the
Please file with A/S, P.D. 30
and with A/S, P.D. 30*

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[REDACTED]

[REDACTED]

1015
STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION
2200 S. Rancho Drive, Suite 210
Las Vegas, Nevada 89102

Return Service Requested

1015
STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION
2200 S. Rancho Drive, Suite 210
Las Vegas, Nevada 89102

Return Service Requested

42 LRECPNMP 891

R
STACY L HOWELL,
C/O LYNN HOWELL,
2865 SKOWHEGAN DR
HENDERSON, NV 89074

42 LRECPNMP 891

**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION**

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303507-MB/1303508-MB
Claim Number: 13-10022162-LV

STACY L HOWELL
PO BOX 669
LAS VEGAS, NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

The Applicant's requests for hearing were filed on November 27, 2012 and the hearings were scheduled for and held on **December 17, 2012** before Hearing Officer Mercer Berens, in accordance with Chapter 217 of the Nevada Revised Statutes.

The Applicant, Howell, Stacy L, was not present, and was not represented by legal counsel. Victims of Crime Program (VOC) was represented by Rebecca Salazar, Compensation Officer.

ISSUE

The Applicant appealed the Compensation Officer's determinations dated September 18, 2012 and September 28, 2012.

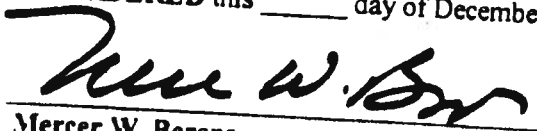
The issue before the Hearing Officer is DENY APPLICATION FOR COMPENSATION.

DECISION AND ORDER

The determination of the Compensation Officer is hereby **DISMISSED**. Applicant failed to appear.

NAC 616C.279 provides if the appealing party fails to appear at the Hearing after timely notice, the appeal may be dismissed with prejudice.

IT IS SO ORDERED this 24th day of December, 2012


Mercer W. Berens
Hearing Officer

APPEAL RIGHTS

Pursuant to NRS 217.117, should any party desire to appeal this final decision of the Hearing Officer, a written request for appeal must be filed with the Appeals Officer within fifteen (15) days after the date of the decision by the Hearing Officer. Mail the REQUEST FOR HEARING BEFORE THE APPEALS OFFICER to: APPEALS OFFICE, DEPARTMENT OF ADMINISTRATION, 2200 SOUTH RANCHO DRIVE SUITE 220, LAS VEGAS, NV 89102.

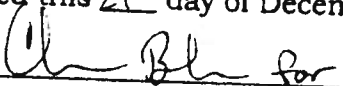
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STACY L HOWELL
PO BOX 669
LAS VEGAS NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 24th day of December, 2012



Violet Martinez
Employee of the State of Nevada

Case documents for claim #

13-10022379-LW

DEPARTMENT OF ADMINISTRATION
Victims of Crime Compensation Program
2200 S. Rancho Drive, #130
Las Vegas, NV 89102

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

12 DEC 12 AM 8:36

RECEIVED
FILED

NEVADA DEPARTMENT OF ADMINISTRATION
BEFORE THE HEARINGS OFFICER

In the Matter of the Contested) HEARING NO: 1303508-MB
Application for Compensation:)
)
Stacy Howell,) VOCP NO: 13-10022379-LV
Applicant)
_____)

VOCP HEARING STATEMENT

The application was submitted on September 27, 2012. The claim was denied on September 28, 2012 for late filing of the police report. The police report indicates the incident occurred on May 31, 2012 and was reported to the police on July 16, 2012, which is past the five day deadline allowed by statute for reporting the crime to police.

Failure to report a crime to the police within five days of its occurrence may result in a denial of the claim pursuant to NRS 217.210 and Board of Examiners policy:

Section Twelve. Claim Acceptance, Denial and Closure, and Reconsideration:

A. The compensation officer may deny an application when it does not comply with NRS 217 or BOE Policies. Common reasons for Application Denial include:

..... 6) Crime Reported After 5 Days

NRS 217.210 Limitations on time for making order for payment of compensation; exceptions.

1. Except as otherwise provided in subsection 2, an order for the payment of compensation must not be made unless the application is made within 1 year after the date of the personal injury or death on which the claim is based, unless waived by the Board of Examiners or a person designated by the Board for good cause shown, and the personal injury or death was the result of an incident or offense that was reported to the police within 5 days of its occurrence or, if the incident or offense could not reasonably have been reported within that period, within 5 days of the time when a report could reasonably have been made.

Victims of Crime requests the Hearing Officer affirm the denial of this claim.

RECEIVED
DEC 18 2012
CCSI

Dated this 12th day of December, 2012
Victims of Crime Program

CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **VOCP HEARING STATEMENT** was duly mailed, postage prepaid to the following:

STATE OF NEVADA
HEARINGS DIVISION
2200 S RANCHO DR STE 220
LAS VEGAS, NV 89102

STACY HOWELL
PO BOX 669
LAS VEGAS, NV 89125

Dated this 12th day of December, 2012



Employee of the State of Nevada

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303508-MB
Claim Number: 13-10022379-LV

STACY L HOWELL
PO BOX 669
LAS VEGAS, NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

NOTICE OF HEARING BEFORE THE HEARING OFFICER

Pursuant to the Victim's request for a Hearing Officer review of the Compensation Officer's Determination under Chapters 217 of the Nevada Revised Statutes, you are hereby notified a hearing will be held:

DATE: December 17, 2012
TIME: 10:30AM
PLACE: Department of Administration, Hearings Division
2200 South Rancho Drive, Suite 210
Las Vegas, NV 89102
Phone (702) 486-2525

The matter to be ascertained from this Hearing shall be whether the determination rendered by the Compensation Officer is proper.

If you would prefer to testify by telephone, please contact this office one week prior to the hearing date at 486-2525 with the appropriate information. Telephone hearings will generally take place within 1 hour of the time designated for the Hearing (see above).

NOTE: This Hearing will be scheduled on a **STACKED** calendar.

Dated this 30th day of November, 2012.

Mercer Berens
Hearing Officer



CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **NOTICE OF HEARING BEFORE THE HEARING OFFICER** was duly mailed, postage prepaid **OR** placed in the appropriate addressee runner file at the Department of Administration, Hearings Division, 2200 S. Rancho Drive, #210, Las Vegas, Nevada, to the following:

STACY L HOWELL
PO BOX 669
LAS VEGAS NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 7 day of November, 2012.



Violet Martinez
Employee of the State of Nevada

11-26-12

I, Stacy Howell, am appealing the
decision on both claims
13-10022-102-LV and
13-10022-579-LV. I was mentally,
unexpectedly as well as physically
unable to apply within the
5 day period. I met someone
from your program. Because I never
turned me away on May 31st
because I had a dog I was
a victim of crime. I ended up at
Valley Hospital I believe June 1st
2012 because someone called 911
to help me. I only remember what
the nurse told me that I was left
weary, only a sheet. My dog was
gone, my purse was gone, my keys,
and because of that incident as
well as DR. Geoffrey made
my ex-boyfriend physically torture my
neck I suffer chronic back
pain, constant neck pain, seizures,
panic attacks, and PTSD. I have had
so many seizures due to the three incidents
that my right hand will tremble as well
due to all the falls due to
seizures. I am in a constant
state of anxiety. Therefore I appeal
your decision.

Stacy Howell 1303508-

My last seizure was 11-25-12

STATE OF NEVADA



DEPARTMENT OF ADMINISTRATION
VICTIMS OF CRIME PROGRAM

103
FILE

September 28, 2012

STACY L. HOWELL
PO BOX 669
LAS VEGAS NV 89125

RE: Claim Number: 13-10022379-LV
 Victim: Howell, Stacy L.
 Date Of Crime: May 31, 2012

Your application for benefits from the Victims of Crime Program has been denied. This denial is based on the information you have provided in your application and/or the law enforcement crime report.

The decision to deny your application is based on VOCP policies concerning:

- Crime was not reported to police for 5 or more days.
- Victim is ineligible to file for assistance.

APPEAL RIGHTS: If you disagree with this decision, you have the right to appeal to the Hearing Officer. Appeals must be filed within sixty (60) days from the date of this letter by sending a copy of this letter with a written request for a hearing to:

Department of Administration Hearing Division
2200 S. Rancho Dr. Suite 210
Las Vegas, NV 89102
Fax: (702) 486-2879

Authorized Representative
Victims of Crime Program

13-22379-LV

Case Report Number:
LLV120716001795-001

Las Vegas Metropolitan Police
Department



VICTIM/STACY STATED THAT WHEN SHE EXITED THE DOCTOR'S OFFICE SUSPECT/JOHN WAS WAITING FOR HER IN HER VEHICLE. VICTIM/STACY STATED THAT SUSPECT/JOHN BEGAN TO VERBALLY ABUSE HER BECAUSE SHE WOULD NOT GET BACK IN THE VEHICLE WITH HIM.

VICTIM/STACY STATED AT THAT TIME SHE BEGAN TO WALK DOWN THE STREET TO SAFE NEST, BUT WAS NOT ABLE TO BE ADMITTED BECAUSE SHE HAD HER DOG WITH HER. VICTIM/STACY STATED THAT AFTER LEAVING SAFE NEST, AND BEING TOLD TO TREE SHADE TREE SUSPECT/JOHN DROVE BY HER.

VICTIM/STACY STATED THAT SHE DOES NOT REMEMBER ANYTHING AFTER THAT BESIDES WAKING UP IN VALLEY HOSPITAL, BEING TOLD THAT SHE WAS FOUND NEAR A DUMPSTER IN THE AREA OF CHARLESTON & RANCHO.

VICTIM/STACY STATED THAT SHE BELIEVES SUSPECT/JOHN CAUSED THE INJURIES TO HER THAT SHE SUFFERED WHICH WERE A SPRAINED BACK, NECK AND ARM. VICTIM/STACY STATED THAT SHE HAS DOCUMENTATION FROM THE HOSPITAL

VICTIM/STACY WAS GIVEN A VIG.

Offense

Offense	BATTERY	Domestic Violence	No
Code Section		Premises Entered	
IBR Code	13B	Entry	
IBR Group	A	Using	
Crime Against	Person	Weapons	Personal Weapons (Hands, Feet, Teeth, etc.)
UCR Hierarchy	09	Criminal Activity	
Location Type	Highway/Road/Alley	Type Security	
Completed	Yes	Tools	
Hate/Bias	Unknown (Offenders Motivation Not Known)		

Offenders

Suspect Name: VERNON, JOHN FRANCIS

Addresses

Address Type	Address	City	State	Zip
Residence	4460 Vegas Valley Dr	LAS VEGAS,	NV	89121

Phones

Phone Type	Phone Number
Cellular	702 472-1848

Case Report Number:
LLV120718001795-001



Las Vegas Metropolitan Police
Department

E-mails

Email Address

Sex	Male	Teeth	
Race	White	Build	Thin
Ethnicity		Height	5' 10"
DOB		Weight	150
Age	58	Resident	Resident
Eye Color	Blue	POB	
Hair Color	Gray	DLN	
Hair Style	Thin	DL State	
Hair Length	Other	DL Country	
Facial Hair		SSN	
Complexion	Fair		

Scars, Marks and Tattoos

SM/Tattoo	Location	Description
-----------	----------	-------------

Attire	WHITE SHIRT, KHAKI SHORTS	MO
Employer/School		Other MO
Employer Address		Habitual Offender
Employer CSZ		Status
Occupation/Grade	UNEMPLOYED	

Victims

Name: HOWELL, STACY LYNN

Victim Type Individual
Victim of 200.481F - BATTERY

Addresses

Address Type	Address	City	Country
--------------	---------	------	---------

Phones

Phone Type	Phone Number
------------	--------------

Cellular 702 609-0645 *3rd ring phone when assaulted*

E-mails

Printed 7/16/2012 12:26 PM

Page 3 of 4

200

09/27/2012 09:34 FAX 7023882337

100

Case Report Number:
LLV120716001795001



Las Vegas Metropolitan Police
Department

Email Address

Sex Female
Race White
Ethnicity
DOB 2/16/1968
Age 46
Eye Color Hazel
Hair Color Blond
Facial Hair
Complexion
Height 5' 9"
Weight 120
Resident Resident

POB
DLN
DL State
DL Country
SSN
Attire
Employer/School
Employer Address
Employer CSZ
Occupation/Grade
Testify
Injury Other

Witnesses Told SAPELST OF RESIDENT PRISON COMPANY (578)
Other Entities _____
Properties _____



State of Nevada
Victims of Crime Program

FAX TO
(702) 458-5586
RECEIVED

1795
LOOP #

SEP 27 2012

CCM

273792

VOCP Data Stamp and Claim #

Application for Victim of Crime Compensation

Section 1: Tell us about the victim.

The victim is the person who was attacked, injured or killed during the crime.

First Name STACY	Middle LYNN	Last Name HOWELL
Mailing Address #0 BOX 669 LAS VEGAS	Apt.	City, State, Zip LAS VEGAS NEVADA
Home Phone 702) 305-4126	Work Phone 305 4126	Cell Phone 702) 305 4126
Date of Birth 2-16-66	Age 46	Last 4 Digits SSN 6803
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		If victim is deceased, date of death:

Section 2: If you are applying for the victim, tell us about you.

An applicant is a person, other than the victim, who is completing the application where the victim is under the age of 18, mentally or physically incapable of completing the application, or deceased.

First Name	Middle	Last Name
Mailing Address (if different from victim)	Apt.	City, State, Zip
Home Phone	Work Phone	E-Mail
Relationship to victim:	Last 4 Digits SSN	Date of Birth (applicant must be an adult)

Section 3: Tell us about the victim's residency status.

Nevada law limits VOCP assistance to citizens of the United States, or those lawfully entitled to "reside" (live without legal restrictions) in the United States at the time of the crime. NRS 217.220 (b)

Is the victim a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes skip to Section 4 below:	If not a citizen is the victim/ applicant legally entitled to "reside" in the U.S.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes provide copy of "green card", drivers license, Passport, or other documentation.	If not entitled to reside in the U.S. describe victim/applicant status: <input type="checkbox"/> Tourist/ Visitor <input type="checkbox"/> Visiting Worker <input type="checkbox"/> Undocumented Alien <input type="checkbox"/> Other:
--	--	--

Section 4: Tell us about the crime.

Please attach a copy of the police report prepared by the Law Enforcement Agency. Claims submitted without a police report will be accepted and the VOCP will request a report. A decision will be made when the VOCP receives an official police report.
 Note: Only Violent Crimes are eligible for VOCP assistance. No Theft or Property Crimes can be approved by the VOCP.

Name of Law Enforcement Agency the crime was reported to:
 LAS VEGAS METRO POLICE DEPARTMENT

Date of Crime: MAY 31ST 10:30 A.M. Date Crime was Reported: Crime Report No: 120716-1795

If Crime occurred more than one (1) year ago, please indicate why you did not apply to the VOCP until now.

- Unaware of the VOCP
- Physically/Mentally unable to apply
- Other, explain:

Type of crime:

- Misdemeanor Assault/Battery
- Felony Assault/Battery
- Domestic Violence/Assault
- Homicide
- Pedestrian Hit and Run
- Robbery
- Child Abuse
- Elder Abuse
- Stalking/Kidnapping
- DUI
- Vehicular Manslaughter
- Sexual Assault/ over 18*
- Sexual Assault/ under 18*
- Other:

County where crime occurred:

- Clark
- Carson City
- Churchill
- Douglas
- Elko
- Eureka
- Esmeralda
- Humboldt
- Lyon
- Lincoln
- Lander
- Mineral
- Nye
- Pershing
- Storey
- Washoe
- White Pine

* Sexual Assault Crimes Only:
 Required by: NRS 217.290 and NRS 217.300

Did you submit an application to the County for sexual assault assistance?

- Yes
- No If No: please explain:

If Yes, have you received and/or spent those funds?

- Yes
- No If No: please explain:

Offender's Name and Address: (if known)

I BELIEVE - (NOT POSITIVE) JOHN VERNON WAS PERSON WHO ASSAULTED ME ON CHARLESTON BLVD - HE IS THE ONE WHO HURT MY DAD - TALK MY DAD -

Where did the crime occur? (exact address, location, or nearest cross streets)

RANCH 9 CHARLESTON LAS VEGAS NEVADA 89129

Describe how the crime occurred:

SEE REPORT - I ALSO REPORTED ON MAY 31ST - SAME DAY BEFORE THIS ASSAULT TO STAFFORD (646-1648)

I HAD MY POKING AND WITH ME AND I HAD BEEN ABUSED AND I WAS AND POSSIBLY PSYCHOLOGICALLY TO STAFFORD THAT I WAS EMOTIONAL AND PHYSICALLY ABUSED BY JOHN VERNON MAY 31ST

IN JUNE 8TH AGAIN CALLED FROM SAFE HOUSE TO REPORT HOUSE ON PHONE. DESCRIBE VICTIM'S CRIME INJURIES: I WAS INJURED I HURT BACK WHEN WENT TO VALLEY HOSPITAL IN LAS VEGAS NEVADA.

Section 5: Tell us about your Crime-Related Expenses

Please help us determine how we can help you. The VOCP has limited resources and we want to make sure the most important needs and financial issues are taken care of. Please check the crime related expenses you have incurred, or expect to incur because of the crime. Attach your bills, receipts, estimates, or other documents which support your request for payment. Expenses must be directly related to the crime and must have valid supporting documents to be paid by the VOCP.

<input type="checkbox"/> Hospital Bills <input type="checkbox"/> Ambulance Bills <input checked="" type="checkbox"/> Medical/Dental Bills <input checked="" type="checkbox"/> Prescription Medication <input type="checkbox"/> Vision/Glasses <input type="checkbox"/> Chiropractic/Physical Therapy <input type="checkbox"/> Loss of Earnings/Support <input type="checkbox"/> Counseling/Mental Health	<input type="checkbox"/> Funeral and Burial expense <input type="checkbox"/> Crime Scene Clean Up (death claims only) <input type="checkbox"/> Child Care Expenses <input type="checkbox"/> Emergency Moving or Relocation Expenses <input type="checkbox"/> Emergency Temporary Housing or Living Expenses <input type="checkbox"/> Home Security Repairs (homeowners only) <input type="checkbox"/> Home Health Care <input type="checkbox"/> Other:
---	---

Section 6: Tell us about any Prior Disabilities or Medical Conditions

If you suffered from any disabilities, or were receiving medical treatment prior to the crime, please explain below:

ADD, DEPRESSION, INSOMNIA, FIBROSY ALGIA, PTSD,
 POSSIBLE BI-POLAR. DR. CRUICK 2340 PASSEO OCE PRADO LN,
 NV 702 247-1403

Section 7: Tell us about any Prior Victims of Crime Claims

Have you ever filed a Victims of Crime Claim in Nevada, or any other State?

Yes
 No

If Yes: State where Claim Filed	Date filed	Type of Crime
Name of Victim, Applicant, or Claimant		Current Status: (Opened or Closed)

Section 8: Please provide Demographic and Statistical Information

This information is gathered for statistical reporting purposes only. This information does NOT affect eligibility in any way.

Annual Income: <input checked="" type="checkbox"/> \$0 to \$10,000 <input type="checkbox"/> \$10,000 to \$20,000 <input type="checkbox"/> \$20,000 to \$30,000 <input type="checkbox"/> \$30,000 to \$40,000 <input type="checkbox"/> \$40,000 to \$60,000 <input type="checkbox"/> \$60,000 to \$80,000 <input type="checkbox"/> \$80,000 to \$100,000 <input type="checkbox"/> Over \$100,000	Employment at Time of Crime: <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Other:	Primary Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Asian <input type="checkbox"/> Other:	Were Alcohol or Drugs a factor in this crime, in any way? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Race: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> American Indian <input type="checkbox"/> Bi-Racial	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Domestic Partners <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Education Level: <input type="checkbox"/> Less than High School Graduate <input type="checkbox"/> High School Graduate or GED <input type="checkbox"/> Attended College <input type="checkbox"/> Attended Graduate School/ University <input type="checkbox"/> Have Advanced Degree	

Section 9: How did you find out about the VOCP?

To help us evaluate and improve our services, please let us know how you heard of the VOCP. Please check one or two that apply.

<input type="checkbox"/> Law Enforcement	<input type="checkbox"/> Victim Advocate
<input type="checkbox"/> District Attorney/Prosecutor	<input type="checkbox"/> Victim Service Program (Safe Nest, Stop DUI, etc)
<input type="checkbox"/> Hospital/Clinic	<input type="checkbox"/> Internet Search
<input type="checkbox"/> Medical/Dental Provider	<input type="checkbox"/> Newspaper/Media
<input type="checkbox"/> Children's Protective Services	<input type="checkbox"/> Friend/Family
<input type="checkbox"/> Mental Health Counselor	<input checked="" type="checkbox"/> Other

Section 10: Person helping the Applicant Complete this Application

Please complete the information below if you are only helping the victim complete this application.

First Name	Last Name	Name of Company, Affiliation, or Relationship (Hospital, Dental Provider, Victim Program, etc):
Tele	Email	

Section 11: If an Advocate or Attorney is helping you, let us about them

Complete this section if an attorney or victim advocate is assisting the victim. An advocate or attorney is not required in order to apply.

First Name	Last Name	Office Telephone
Office Address	City, State, Zip:	
Victim Advocate Program or Law Firm Name:	Victim Advocate VOCP Account #	
	Email:	

Please provide the name of Advocate or Attorney with copies of any documents sent to the Applicant.

Signature of Advocate or Attorney: (Required to receive documents)

Date:

Section 12: Tell us about the Victim's Insurance or Civil Suit Information

If you have any type of insurance or legal claim please enter the information in the space provided below. Use extra sheets if needed.

Does the Victim/ Applicant have Life, Medical, Dental, or Vision Insurance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If the crime involved an auto, does the Victim/ Applicant, or the Offender have Auto Insurance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If the crime happened in Victim's home, or on Victim's property, is there Homeowners Insurance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If the crime happened at the Victim/ Applicant's place of work, is there a Workers' Compensation Claim? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name:	Phone Number:	Type and Policy Number:	
Has the victim/applicant filed, or will the victim/applicant file, a Civil Suit related to this crime? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		Has the victim/applicant received or expect to receive any payment or settlement related to the crime? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

Case documents for claim # 13-10022102-LV

DEPARTMENT OF ADMINISTRATION
Victims of Crime Compensation Program
2200 S. Rancho Drive, #130
Las Vegas, NV 89102

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

12 DEC 12 AM 8:36

RECEIVED
AND
FILED

**NEVADA DEPARTMENT OF ADMINISTRATION
BEFORE THE HEARINGS OFFICER**

In the Matter of the Contested) HEARING NO: 1303507-MB
Application for Compensation:)
)
Stacy Howell.)
Applicant)
_____)

HEARING NO: 1303507-MB
VOCP NO: 13-10022162-LV

VOCP HEARING STATEMENT

The application was submitted on August 29, 2012. The claim was denied on September 18, 2012 for late filing of the police report. The application indicates the incident occurred on May 17, 2012 and was reported to the police on July 16, 2012, which is past the five day deadline allowed by statute for reporting the crime to police.

Failure to report a crime to the police within five days of its occurrence may result in a denial of the claim pursuant to NRS 217.210 and Board of Examiners policy:

Section Twelve. Claim Acceptance, Denial and Closure, and Reconsideration:

A. The compensation officer may deny an application when it does not comply with NRS 217 or BOE Policies. Common reasons for Application Denial include:

.....6) Crime Reported After 5 Days

NRS 217.210 Limitations on time for making order for payment of compensation; exceptions.

1. Except as otherwise provided in subsection 2, an order for the payment of compensation must not be made unless the application is made within 1 year after the date of the personal injury or death on which the claim is based, unless waived by the Board of Examiners or a person designated by the Board for good cause shown, and the personal injury or death was the result of an incident or offense that was reported to the police within 5 days of its occurrence or, if the incident or offense could not reasonably have been reported within that period, within 5 days of the time when a report could reasonably have been made.

Victims of Crime requests the Hearing Officer affirm the denial of this claim.

Dated this 12th day of December, 2012
Victims of Crime Program

RECEIVED

DEC 18 2012

CCS

CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **VOCP HEARING STATEMENT** was duly mailed, postage prepaid to the following:

STATE OF NEVADA
HEARINGS DIVISION
2200 S RANCHO DR STE 220
LAS VEGAS, NV 89102

STACY HOWELL
PO BOX 669
LAS VEGAS, NV 89125

Dated this 12th day of December, 2012



Employee of the State of Nevada

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
HEARINGS DIVISION

In the matter of the Contested
Application for Compensation:

Hearing Number: 1303507-MB
Claim Number: 13-10022162-LV

STACY L HOWELL
PO BOX 669
LAS VEGAS, NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS, NV 89102

NOTICE OF HEARING BEFORE THE HEARING OFFICER

Pursuant to the Victim's request for a Hearing Officer review of the Compensation Officer's Determination under Chapters 217 of the Nevada Revised Statutes, you are hereby notified a hearing will be held:

DATE: December 17, 2012
TIME: 10:30AM
PLACE: Department of Administration, Hearings Division
2200 South Rancho Drive, Suite 210
Las Vegas, NV 89102
Phone (702) 486-2525

The matter to be ascertained from this Hearing shall be whether the determination rendered by the Compensation Officer is proper.

If you would prefer to testify by telephone, please contact this office one week prior to the hearing date at 486-2525 with the appropriate information. Telephone hearings will generally take place within 1 hour of the time designated for the Hearing (see above).

NOTE: This Hearing will be scheduled on a **STACKED** calendar.

Dated this 30th day of November, 2012.

Mercer Berens
Hearing Officer



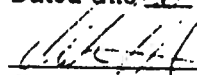
CERTIFICATE OF MAILING

The undersigned, an employee of the State of Nevada, Department of Administration, Hearings Division, does hereby certify that on the date shown below, a true and correct copy of the foregoing **NOTICE OF HEARING BEFORE THE HEARING OFFICER** was duly mailed, postage prepaid **OR** placed in the appropriate addressee runner file at the Department of Administration, Hearings Division, 2200 S. Rancho Drive, #210, Las Vegas, Nevada, to the following:

STACY L HOWELL
PO BOX 669
LAS VEGAS NV 89125

VICTIMS OF CRIME PROGRAM
2200 S RANCHO DR STE 130
LAS VEGAS NV 89102

Dated this 9th day of November, 2012.



Violet Martinez
Employee of the State of Nevada

CH Howell
13-10022162-LV

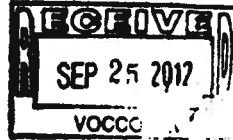
STATE OF NEVADA



DEPARTMENT OF ADMINISTRATION
VICTIMS OF CRIME PROGRAM

September 18, 2012

STACY L. HOWELL
PO BOX 669
LAS VEGAS NV 89125



RE: Claim Number: 13-10022162-LV
Victim: Howell, Stacy L.
Date Of Crime: May 17, 2012

Your application for benefits from the Victims of Crime Program has been denied. This denial is based on the information you have provided in your application and/or the law enforcement crime report.

The decision to deny your application is based on VOCP policies concerning:

- Crime was not reported to police for 5 or more days.
- Victim is ineligible to file for assistance.

APPEAL RIGHTS: If you disagree with this decision, you have the right to appeal to the Hearing Officer. Appeals must be filed within sixty (60) days from the date of this letter by sending a copy of this letter with a written request for a hearing to:

Department of Administration Hearing Division
2200 S. Rancho Dr. Suite 210
Las Vegas, NV 89102
Fax: (702) 486-2879

RECEIVED
SEP 18 2012
CCBI

No more
I just received this letter today

9-21-12 . I appeal

Authorized Representative
Victims of Crime Program

The assassin Geoffrey Hawk →
almost bite my neck & kicked me in my back
threatened to kill me

9-21-12

I. Stacy Dewell
will redo my forms
I talked with VUCB
on Thursday 20th 2012

I will send them Mon.
Tuesday September 20th
2012

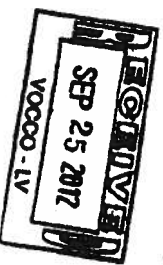
on the way to
court order I
had a seizure.

I have them
with the kids.

I need help from you. Thank you

Stacy Dewell 9-21-12

DORLENE SPARKS
601. HOLLAND AVE
LAS VEGAS, NV 89126



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
VICTIM OF CRIME PROGRAM
2800 S. RANCHO DRIVE SUITE 130
LAS VEGAS, NV 89102



STATE OF NEVADA



DEPARTMENT OF ADMINISTRATION
VICTIMS OF CRIME PROGRAM

September 18, 2012

• **STACY L. HOWELL**
PO BOX 669
LAS VEGAS NV 89125

RE: Claim Number: 13-10022162-LV
 Victim: Howell, Stacy L.
 Date Of Crime: May 17, 2012

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Department of Administration Hearing Division
2200 S. Rancho Dr. Suite 210
Las Vegas, NV 89102
Fax: (702) 486-2879

Authorized Representative
Victims of Crime Program

1303507-1MB



Administrative

Crime Type **BATTERY / DOMESTIC VIOLENCE**
 Location **1665 E Sahara Ave C 2028 LAS VEGAS, NV 89104** Sector/Beat **H1**
 Occurred On (Date / Time) **Thursday 5/17/2012 4:30:00 PM** Or Between (Date / Time)
 Reporting Officer **13681 - Davis, A.** Reported On **7/16/2012**
 Entered By **13681 - Davis, A.** Entered On **7/16/2012 11:33:47 AM**
 Related Cases
 Assisted By:

Offenses

BATTERY / DOMESTIC VIOLENCE Code Section
 Completed **Yes** Hate/Bias Unknown (Offenders Motivation Not Known) Domestic Violence Yes
 Entry Premises Entered Type Security Location Type Residence/Home
 Weapons **Personal Weapons (Hands, Feet, Teeth, etc.)**
 Criminal Activities

Victims

Name: **HOWELL, STACY LYNN**
 Victim Type **Individual** Written Statement **Yes** Can ID Suspect
 Victim of **200.485 - BATTERY / DOMESTIC VIOLENCE**
 SSN **DOB 2/16/1966** Age **46** Sex **Female** Race **White**
 Height **5' 9"** Weight **120** Hair Color **Blond** Eye Color **Hazel**
 Addresses
 Phones
 Cellular **702 609-0648**
 Resident **POB**
 DLN **DL State** DL Country **VOC**
 Employer/School **Employer Address**
 Occupation/Grade **Work Schedule**
 Tourist Departure Date **Testify**
 Injury **Other** Injury Weapons **Personal Weapons (Hands, Feet, Teeth, etc.)**
 Offender Relationships
 Offender **Relationship**

Narrative

ON THE ABOVE DATE AND TIME VICTIM/STACY LYNN HOWELL CAME INTO THE METRO HQ TO REPORT THAT SHE HAD BECOME THE VICTIM OF BATTERY DOMESTIC VIOLENCE.

VICTIM/STACY STATED THAT SHE HAD BEEN DATING SUSPECT/EX-BOYFRIEND/GEOFFREY HSIEH FOR APPROXIMATELY 14 YEARS ON AND OFF, AND THEY HAD ALSO LIVED TOGETHER OFF AND AN FOR APPROXIMATELY 6 YEARS.

VICTIM/STACY STATED THAT APPROXIMATELY 8 WEEKS AGO, WHILE AT THE ABOVE LISTED LOCATION, SHE AND SUSPECT/GEOFFREY WERE ARGUING OVER SUSPECT/GEOFFREY INTERFERING WITH HER BANK ACCOUNT.

VICTIM/STACY STATED THAT WHAT SEEMED TO HAVE SET SUSPECT/GEOFFREY OFF WAS WHEN SHE MENTIONED THAT SHE HAD SOLD THE VEHICLE THAT HE HAD GIVEN TO HER.

VICTIM/STACY STATED THAT SHE WAS SEATED ON THE COUCH IN HER LIVING ROOM WITH SUSPECT/GEOFFREY SEATED IN A CHAIR NEAR THE COUCH. VICTIM/STACY STATED THAT SUSPECT/GEOFFREY GOT UPSET AND GOT FROM THE CHAIR WHERE HE WAS SEATED, PUSHED HER BACK AGAINST THE COUCH.

VICTIM/STACY STATED THAT SUSPECT/GEOFFREY PUSHED HIS RIGHT KNEE INTO HER LEFT SHOULDER AND TOOK HIS RIGHT HAND PUSHED VICTIM/STACY'S FACE TO THE RIGHT.

VICTIM/STACY STATED THAT TO GET SUSPECT/GEOFFREY TO STOP HIS ATTACK SHE WENT LIMP, AND AFTER THAT SUSPECT/GEOFFREY GOT OFF OF HER. VICTIM/STACY STATED THAT SHE CANNOT REMEMBER WHAT SUSPECT/GEOFFREY WAS SAYING WHILE HE WAS PUSHING ON HER, AND JUST REMEMBERS HIM LEAVING SOON AFTER THAT.

VICTIM/STACY STATED THAT BEFORE SUSPECT/GEOFFREY LEFT HE SAID, "NEXT TIME I'LL KILL YOU OR HIRE SOMEONE TO KILL YOU."

VICTIM/STACY STATED THAT SHE DOES NOT REMEMBER MUCH ELSE BESIDES THIS. VICTIM/STACY STATED THAT SHE SUFFERED A NECK SPRAIN AS A RESULT OF SUSPECT/GEOFFREY PUSHING SO HARD ON HER FACE.

VICTIM/STACY HAS NO VISIBLE INJURIES AT THIS TIME. VICTIM/STACY WAS GIVEN A VIG & BLUE CARD.

I AM MISSING SECTIONS

13-22162-EUGB AND 1-9



State of Nevada Victims of Crime Program

Application for Victim of Crime Compensation

VOCP Date Stamp and Claim #

If you need help completing this application please go to: www.voc.nv.gov, to find victim assistance programs in your community, or to contact the VOCP office in Reno or Las Vegas for assistance or referral to a community program near you.

Please complete Sections 1 through 12 to the best of your ability. Use a black or blue ballpoint pen. Please Print Neatly.

Section 1: Tell us about the Victim.

The victim is the person who was attacked, injured or killed during the crime.

First Name STACY	Middle LYNN	Last Name HOWELL
Mailing Address PO BOX 669 LAS VEGAS NV 89125	Apt. none	City, State, Zip LAS VEGAS
Home Phone (702) 305-4126	Work Phone (702) 305-4126	Cell Phone (702) 305-4126
Date of Birth 2-16-66	Age 46	Last 4 Digits SSN 6803
<input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		E-Mail none If victim is deceased, date of death: NOT DECEASED

Section 2: If you are applying for the victim, tell us about you.

An applicant is a person, other than the victim, who is completing the application where the victim is under the age of 18, mentally or physically incapable of completing the application, or deceased.

First Name	Middle	Last Name
Mailing Address (if different from victim)	Apt.	City, State, Zip
Home Phone	Work Phone	E-Mail
Relationship to victim:	Last 4 Digits SSN	Date of Birth (applicant must be an adult)

Section 3: Tell us about the Victim's Residency Status.

Nevada law limits VOCP assistance to citizens of the United States, or those lawfully entitled to "reside" (live without legal restrictions) in the United States at the time of the crime. NRS 217.220 (b)

Is the victim a U.S. Citizen? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes skip to Section 4 below:	If not a citizen is the victim/ applicant legally entitled to "reside" in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes provide copy of "green card", license, Passport, or other documentation.	If not entitled to reside in the U.S. describe victim/applicant status: <input type="checkbox"/> Tourist/ Visitor <input type="checkbox"/> Visiting Worker <input type="checkbox"/> Undocumented Alien <input type="checkbox"/> Other
--	---	---

RECEIVED
AUG 29 2012

CCSI

Section 4: Tell us about the crime.

Please attach a copy of the police report prepared by the Law Enforcement Agency. Claims submitted without a police report will be accepted and the VOCP will request a report. A decision will be made when the VOCP receives an official police report.
 Note: Only Violent Crimes are eligible for VOCP assistance. No Theft or Property Crimes can be approved by the VOCP.

Name of Law Enforcement Agency the crime was reported to:

LAS VEGAS METRO POLICE DEPARTMENT

Date of Crime: 5 MAY 17 12 Date Crime was Reported: 12:00

MAY 31ST 12 7-16-12

Crime Report No: JOHN VERNON - LV120716001795-001
GEORGE HSIEH - LV120716001679-001

If Crime occurred more than one (1) year ago, please indicate why you did not apply to the VOCP until now.

- Unaware of the VOCP
 Physically/Mentally unable to apply
 Other, explain SH

Type of crime:

- | | | |
|---|---|---|
| <input type="checkbox"/> Misdemeanor Assault/Battery | <input type="checkbox"/> Pedestrian Hit and Run | <input type="checkbox"/> DUI |
| <input type="checkbox"/> Felony Assault/Battery | <input type="checkbox"/> Robbery | <input type="checkbox"/> Vehicular Manslaughter |
| <input checked="" type="checkbox"/> Domestic Violence/Assault | <input type="checkbox"/> Child Abuse | <input type="checkbox"/> Sexual Assault over 18" |
| <input type="checkbox"/> Homicide | <input type="checkbox"/> Elder Abuse | <input type="checkbox"/> Sexual Assault under 18" |
| | <input type="checkbox"/> Stalking/Kidnapping | <input type="checkbox"/> Other. |

County where crime occurred:

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Clark | <input type="checkbox"/> Lyon |
| <input checked="" type="checkbox"/> Carson City | <input type="checkbox"/> Lincoln |
| <input type="checkbox"/> Churchill | <input type="checkbox"/> Lander |
| <input type="checkbox"/> Douglas | <input type="checkbox"/> Mineral |
| <input type="checkbox"/> Elko | <input type="checkbox"/> Nye |
| <input type="checkbox"/> Eureka | <input type="checkbox"/> Pershing |
| <input type="checkbox"/> Esmeralda | <input type="checkbox"/> Storey |
| <input type="checkbox"/> Humboldt | <input type="checkbox"/> Washoe |
| | <input type="checkbox"/> White Pine |

* Sexual Assault Crimes Only:

Required by: NRS 217.290 and NRS 217.300

Did you submit an application to the County for sexual assault assistance?

- Yes
 No If No: please explain:

If Yes, have you received and/or spent those funds?

- Yes
 No If No: please explain:

Offender's Name and Address: (if known)

1) GEOFFREY HSIEH AND 2) JOHN FRANCIS VERNON

Where did the crime occur? (exact address, location, or nearest cross streets) JOHN FRANCIS VERNON N CHARLOTTE ST

1) GEOFFREY HSIEH AT 1655 E SAMARA AVE 6-2025 AND RANCHO

Describe how the crime occurred:

1) I, STACY HOWELL, WAS PHYSICALLY ATTACKED IN MY APARTMENT 1655 E SAMARA BY MY EX-BUYER AND GEOFFREY HSIEH. ALTHOUGH HE WAS SEEING OTHER WOMEN MY WIFE IN CLOSE CONTACT WHEN I FIRST MET HIM BACK FROM LA, CA. GEOFFREY HSIEH ATTACKED ME ON MY COUCH AS HE WAS SEATED IN A CHAIR NEAR THE COUCH. HE PUSHED ME, STACY, AGAINST THE COUCH, PUNCHED HIS RIGHT FINGER ON MY LEFT SHOULDER TOOK HIS RIGHT HAND AND PUSHED - TRUSTED MY NECK - WHILE GRABBING MY FACE IN HIS HAND (RIGHT) - I WENT LIMP AND HE STOPPED - AND STATED

Describe victims crime injuries:

NECK SPRAIN
 BACK SPRAIN
 RIGHT ARM SPRAINED REPORTED
 THIS TO SAFEST WENT TO UNMC AND VALLEY HOSPITAL DID NOT REPORT THEM TO HOSPITAL.

I WILL KILL YOU NEXT TIME OR MURDER SOMEONE TO KILL YOU. I SUFFERED A NECK SPRAIN AS A RESULT OF THIS ATTACK SUPPLY FROM SLEEVES
 2)
 BACK PAIN, NECK PAIN ON BACK PAIN AND UNABLE OF PAPER TO WORK UNTIL 8-25-12 →

(2) I, Victim STACY HOWELL, WANTED A FULL INVESTIGATION FROM SAFEWAYS (NEXT TO DOCTORS) AFTER BEING TOLD TO GO TO SIMPLETECH DUE TO ME HAVING MY DOG I ASKED SAFEWAY FOR THE. THEY SAID "NO" (GAVE THE WHY THERE). (I HAD MY DOG, PURSE CONTAINING MY LICENSE, BIRTH CERTIFICATE, SHERIFFS CARD, CREDIT CARD, BEST CARD, PHONE, PURSE, ORGANIZER, PRESCRIPTIONS, SHOES, DUVV AND MISC PARAGWIK LEFT IN CAR AS WELL AS MY CAR 318 WHITE THAT WAS ALL STOLEN AS WELL AS MY CAR 318 WHITE BMW WORTH APPROX 3,000.00. ^{2,500.00} STACY HOWELL, SAW JOHN VARNON DRIVE AWAY ON CHARLESTON; PARKED IN MY CAR WHILE SAYING PROFANITIES. (ALSO JOHN VARNON ALSO THROUGHT TO DRIVE MY CAR INTO THE P.V. DOOR ON THE WAY TO MY DOCTORS APPOINTMENT FOR MY NECK: BACK FROM JEFF-TAND AFFAIR) I DON'T REMEMBER ANYTHING AFTER THAT AND I Woke up in VAUGHN HOSPITAL AND MY DOG WAS GONE, MY DRESS I WAS WEARING, ALL MY ITEMS I HAD ON MY PERSON AS LISTED ABOVE. I WAS TOLD I WAS LEFT AT A GAS STATION IN OR BY A BUMPSTER WITH ONLY A SHEET AND A PAIR OF TROUSERS. I BELIEVE JOHN VARNON WAS A SUSPECT. IN MY INVESTIGATION (ADDON - ON TOP OF PREVIOUS INQUIRY. RESULTING FROM GEORGE HSIEN) I HAD A SPANDED NECK, BACK AND ARM (MY ARM I DON'T REMEMBER TELLING HOSPITAL)

Section 5: Tell us about your Crime Related Expenses.

Please help us determine how we can help you. The VOCP has limited resources and we want to make sure the most important needs and financial issues are taken care of. Please check the crime related expenses you have incurred, or expect to incur because of the crime. Attach your bills, receipts, estimates, or other documents which support your request for payment. Expenses must be directly related to the crime and must have valid supporting documents to be paid by the VOCP.

<input checked="" type="checkbox"/> Hospital Bills <input checked="" type="checkbox"/> Ambulance Bills <input checked="" type="checkbox"/> Medical/Dental Bills <input type="checkbox"/> Prescription Medication <input type="checkbox"/> Vision/Glasses <input type="checkbox"/> Chiropractic/Physical Therapy <input checked="" type="checkbox"/> Loss of Earnings/Support <input checked="" type="checkbox"/> Counseling/Mental Health	<input type="checkbox"/> Funeral and Burial expense <input type="checkbox"/> Crime Scene Clean Up (death claims only) <input type="checkbox"/> Child Care Expenses <input checked="" type="checkbox"/> Emergency Moving or Relocation Expenses <input checked="" type="checkbox"/> Emergency Temporary Housing or Living Expenses <input type="checkbox"/> Home Security Repairs (homeowners only) <input type="checkbox"/> Home Health Care <input type="checkbox"/> Other: <u>LOST APARTMENT, CAR, APARTMENT ROBBED ETC.</u>
--	---

Section 6: Tell us about any Prior Disabilities or Medical Conditions.

If you suffered from any disabilities, or were receiving medical treatment prior to the crime, please explain below:

MUSCLE DAMAGE IN BOTH MY ARMS DUE TO GUNFIRE WOUND A FEW YEARS BEFORE THIS ATTACK ALSO I WAS KICKED IN THE BACK AND TAIL BONE.

Section 7: Tell us about any Prior Victim of Crime Claims.

Have you ever filed a Victims of Crime Claim in Nevada, or any other State?
 Yes
 No I WANT TO WRANG COURT WILL TRY ADMIN.

If Yes: State where Claim Filed <u>NEVADA</u>	Date filed <u>PENDING</u>	Type of Crime <u>BATTERY: ASSAULT + DOMESTIC VIOLENCE.</u>
Name of Victim, Applicant, or Claimant <u>STACY HOWELL</u>	Current Status: (Opened or Closed) <u>OPENED</u>	

Section 8: Please provide Demographic and Statistical Information

This information is gathered for statistical reporting purposes only. This information does NOT affect eligibility in any way.

Annual Income: <input type="checkbox"/> \$0 to \$10,000 <input type="checkbox"/> \$10,000 to \$20,000 <input type="checkbox"/> \$20,000 to \$30,000 <input type="checkbox"/> \$30,000 to \$40,000 <input type="checkbox"/> \$40,000 to \$60,000 <input type="checkbox"/> \$60,000 to \$80,000 <input type="checkbox"/> \$80,000 to \$100,000 <input type="checkbox"/> Over \$100,000 <u>NOT SURE</u>	Employment at Time of Crime: <input type="checkbox"/> Employed <input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Other: <u>NOT SURE</u>	Primary Language: <input checked="" type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Asian <input type="checkbox"/> Other:	Were Alcohol or Drugs a factor in this crime, in any way? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown
Race: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> American Indian <input type="checkbox"/> Bi-Racial	Marital Status: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Domestic Partners <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed	Education Level: <input type="checkbox"/> Less than High School Graduate <input type="checkbox"/> High School Graduate or GED <input type="checkbox"/> Attended College <input checked="" type="checkbox"/> Attended Graduate School/ University <input type="checkbox"/> Have Advanced Degree	

Section 9: How did you find out about the VOCP?

To help us evaluate and improve our services, please let us know how you heard of the VOCP. Please check one or two that apply

- | | |
|---|--|
| <input checked="" type="checkbox"/> Law Enforcement | <input type="checkbox"/> Victim Advocate |
| <input type="checkbox"/> District Attorney/Prosecutor | <input type="checkbox"/> Victim Service Program (Safe Nest, Stop DUI, etc) |
| <input type="checkbox"/> Hospital/Clinic | <input type="checkbox"/> Internet Search |
| <input type="checkbox"/> Medical/Dental Provider | <input type="checkbox"/> Newspaper/Media |
| <input type="checkbox"/> Children's Protective Services | <input type="checkbox"/> Friend/Family |
| <input type="checkbox"/> Mental Health Counselor | <input type="checkbox"/> Other. |

Section 10: Person helping the Applicant Complete this Application.

Please complete the information below if you are only helping the victim complete this application.

First Name <i>MYSELF-STACY</i>	Last Name <i>HOWELL</i>	Name of Company, Affiliation, or Relationship (Hospital, Dental Provider, Victim Program, etc): <i>MYSELF</i>
Tele <i>702) 305-4126</i>	Email <i>NONE</i>	

Section 11: If an Advocate or Attorney is helping you, tell us about them.

Complete this section if an attorney or victim advocate is assisting the victim. An advocate or attorney is not required in order to apply

First Name <i>NONE</i>	Last Name <i>NONE</i>	Office Telephone <i>NONE</i>
Office Address <i>NONE</i>	City, State, Zip <i>NONE</i>	
Victim Advocate Program or Law Firm Name: <i>N/A</i>	Victim Advocate VOCP Account # <i>N/A</i>	
	Email: <i>N/A</i>	

- Please provide the above advocate or attorney with copies of correspondence sent to the Applicant.

Signature of Advocate or Attorney: (Required to receive documents)

Date:

ALL OR ANY SUIITS ARE NOT PENDING AND HAS DROPPED BACK

Section 12: Tell us about the Victim's Insurance or Civil Suit Information

If you have any type of insurance or legal claim please enter the information in the space provided below. Use extra sheets if needed.

Does the Victim/ Applicant have Life, Medical, Dental, or Vision Insurance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If the crime involved an auto, does the Victim/ Applicant, or the Offender have Auto Insurance? <input type="checkbox"/> Yes <i>I DID</i> <input type="checkbox"/> No	If the crime happened in Victim's home, or on Victim's property, is there Homeowners Insurance? <input checked="" type="checkbox"/> Yes <i>I DID MY MUM</i> <input type="checkbox"/> No <i>MUM BOB LANGE</i>	If the crime happened at the Victim/ Applicant's place of work, is there a Workers' Compensation Claim? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Company Name: <i>GEOFFREY HSLEY M. D. WOMENS CANCER CENTER AND DIA - BUT STOPPED SUIT - CHESTNUTS (ID TRUST ALSO)</i>	Phone Number: <i>702) 249-8812</i>	Type and Policy Number: <i>UNKNOWN</i>	
Has the victim/applicant filed, or will the victim/applicant file, a Civil Suit related to this crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Has the victim/applicant received or expect to receive any payment or settlement related to the crime? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Unknown		

For Budget Division Use Only	
Reviewed by: <u>DO</u>	<u>7-3-13</u>
Reviewed by:	
Reviewed by:	

711

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Child and Family Services, Youth Parole
 620 Belrose Street, Suite 107
 Las Vegas, Nevada 89107
 contact: Heather Plager phone 775.753.1285 fax 775.684.4455

2. Name of Landlord (Lessor): Venturacci Properties, LP

3. Address of Landlord: c/o Wallace Realty
 525 West Williams Avenue
 Fallon, Nevada 89406

4. Property contact: Michelle Wallace
 phone 775.423.2131 fax 775.423.3209 email michelle.wallace@wallacerealtycorp.com

5. Address of Lease property: 135 Keddie Street
 Fallon, Nevada 89406

a. Square Footage: Rentable Usable 745

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$764.90	12	\$9,178.80	September 1, 2013 - August 31, 2014	\$1.03
0% \$764.90	12	\$9,178.80	September 1, 2014 - August 31, 2015	\$1.03
0% \$764.90	12	\$9,178.80	September 1, 2015 - August 31, 2016	\$1.03
0% \$764.90	12	\$9,178.80	September 1, 2016 - August 31, 2017	\$1.03

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 OFFICE OF THE DIRECTOR
 BUDGET AND PLANNING DIVISION

c. Total Lease Consideration: 48 \$36,715.20

d. Option to renew: Yes No Renewal terms: One identical term

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

f. Term: Four (4) Years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: After every attempt to obtain this information, the Market Rate is not available for this rural area

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

o. Lease will be paid for by Agency Budget Account Number: 3263

6. Purpose of the lease: To house the Division of Child and Family Services, Youth Parole

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

Remarks: Leasing Services negotiated this full service lease to remain at the current rate as the prior lease for four years with no increase.

Exceptions/ Special notes:

lease #2


STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20031223980</u>		
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input checked="" 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 Office?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
g. State of Nevada Vendor number:	<u>T81104771</u>		

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, Buildings and Grounds Section
Date 7-1-13



Authorized Signature - Agency
for AMBER HOWELL
Date 6/25/13

II
For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by: <i>985 7/16/13</i>	
Reviewed by: <i>2747 7/16/13</i>	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
Health Division, Health Care Quality and Compliance
4150 Technology Way, Suite 300
Carson City, Nevada 89706
contact: Donna McCafferty phone 702.486.6515 email dmccafferty@health.nv.gov

2. Name of Landlord (Lessor): KJ LaPlaza, LLC

3. Address of Landlord: 4220 South Maryland Pkwy, Suite A-210
Las Vegas, Nevada 89119

4. Property contact: Bill Malone
phone 702.732.2066 email williammilone@kj.lvcoxmail.com

5. Address of Lease property: 4220 South Maryland Pkwy, Building D, Suite 810
Las Vegas, Nevada 89119

a. Square Footage: Rentable
 Usable 7,581

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	cost per square foot
\$13,645.80	12	\$163,749.60	September 1, 2013 - August 31, 2014	\$1.80
\$13,645.80	12	\$163,749.60	September 1, 2014 - August 31, 2015	\$1.80
2% \$13,949.04	12	\$167,388.48	September 1, 2015 - August 31, 2016	\$1.84
2% \$13,949.04	12	\$167,388.48	September 1, 2016 - August 31, 2017	\$1.84
2% \$14,176.47	12	\$170,117.64	September 1, 2017 - August 31, 2018	\$1.87
2% \$14,176.47	12	\$170,117.64	September 1, 2018 - August 31, 2019	\$1.87
2% \$14,479.71	12	\$173,756.52	September 1, 2019 - August 31, 2020	\$1.91
2% \$14,479.71	12	\$173,756.52	September 1, 2020 - August 31, 2021	\$1.91
2% \$14,782.95	12	\$177,395.40	September 1, 2021 - August 31, 2022	\$1.95
2% \$14,782.95	12	\$177,395.40	September 1, 2022 - August 31, 2023	\$1.95

Increase % factored on cost per sq ft

c. Total Lease Consideration: 120 \$1,704,815.28

d. Option to renew: Yes No Renewal terms: One identical term

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

f. Term: Ten (10) Years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

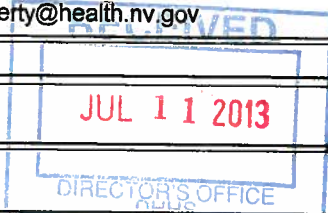
k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.84 - \$2.44

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

o. Lease will be paid for by Agency Budget Account Number: 3216



6. Purpose of the lease: To house the health Division, Health Care Quality and Compliance

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



Estimated moving expenses: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

Remarks: This lease will allow the agency to remain at the current location and expand into adjoining space due to program growth. When compared to the previous agreement, this lease represents a savings of \$62,184.72 or 3.52% over the term, even though the space occupied increased 14.51% (1,100 square feet).

Exceptions/ Special notes:

1000042


STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20021157030</u>		
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"/> LLP <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			
Is the Legal Entity active and in good standing with the Nevada Secretary of States			
f. Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>T27002329</u>		

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, Buildings and Grounds Section
Date 7-12-13

Walpers

Authorized Signature - Agency
Date 7.11.13

II
For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by:	<i>MB 7/16/13</i>
Reviewed by:	<i>MB 7/17/13</i>
Reviewed by:	

STATEWIDE LEASE INFORMATION

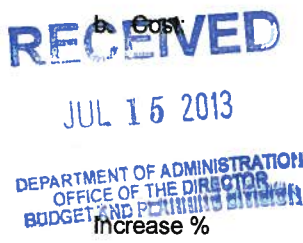
1. Agency: Department of Health and Human Services
Health Division, Child Care Licensing
4150 Technology Way
Carson City, Nevada 89706
contact: Melissa Faul phone 775.684.4439 email mfaul@health.nv.gov

2. Name of Landlord (Lessor): WBCMT 2007-C33 Charleston Boulevard, LLC

3. Address of Landlord: c/o LNR Partners, LLC
1601 Washington Avenue, Suite 800
Miami Beach, Florida 33139

4. Property contact: Integris Realty Services
8340 West Lake Mead Blvd, Suite 110
Las Vegas, Nevada 89128
contact: David Jewkes phone 702.997.4883

5. Address of Lease property: 3811 West Charleston Boulevard, Suite 210
Las Vegas, Nevada 89102



a. Square Footage: Rentable 2,681

b. Cost:

cost per month	# of months in time frame	cost per year	estimated time frame	cost per square foot
\$4,825.80	1	\$4,825.80	Month 1	\$1.80
\$0.00	3	\$0.00	Month 2 - Month 4	\$0.00
\$4,825.80	8	\$38,606.40	Month 5 - Month 12	\$1.80
\$4,825.80	12	\$57,909.60	Month 13 - Month 24	\$1.80
\$4,825.80	3	\$14,477.40	Month 25 - Month 27	\$1.80
2% \$4,933.04	12	\$59,196.48	Month 28 - month 39	\$1.84
\$4,933.04	12	\$59,196.48	Month 40 - Month 51	\$1.84
2% \$5,013.47	12	\$60,161.64	Month 52 - Month 63	\$1.87
\$5,013.47	12	\$60,161.64	Month 64 - Month 75	\$1.87
3% \$5,174.33	12	\$62,091.96	Month 76 - Month 87	\$1.93

c. Total Lease Consideration: 87 \$416,627.40

d. Option to renew: Yes No Renewal terms: One identical term

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

f. Term: Seven (7) Years, Three (3) Months

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.84 - \$2.44

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

o. Lease will be paid for by Agency Budget Account Number: 3149

6. Purpose of the lease: To house the Health Division, Child Care Licensing

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: \$4,100.00

Furnishings: \$0.00

Data/Phones: \$3,275.00

Remarks:

Leasing Services negotiated this relocation to include tenant improvements plus three months of rent abatement to offset moving costs.

Exceptions/
Special
notes:

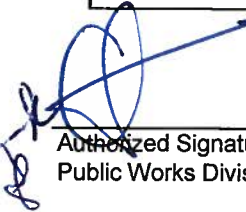
STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20121011166</u>		
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"/> LLP <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			
Is the Legal Entity active and in good standing with the Nevada Secretary of States			
f. Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>T32001981</u>		

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, Buildings and Grounds Section
Date 7.17.13

Walpers

Authorized Signature - Agency
Date 7.11.13

For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by:	Jo 7-22-13
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Public and Behavioral Health
 1665 Old Hot Springs Road Suite 157, Carson City, Nevada 89706
 contact: Cole Schmidt 775-684-4039; fax: 775-684-4211; cschmidt@health.nv.gov
 Kathryn Baughman, 775-687-5162; kbaughman@ruralclinics.nv.gov
 Kathleen Bent, 775-687-5162; kbent@ruralclinics.nv.gov

2. Name of Landlord (Lessor): Douglas & S. JoAnn Roderick
 Contact: Douglas Roderick
 roderickdr1@yahoo.com

3. Address of Landlord: 61 Giorgi Lane
 Yerington, Nevada 89447

4. Property contact: Phone: 775-315-0303
 Fax: 775-463-0154

5. Address of Lease property: 215 West Bridge Street, Suite 5
 Yerington, Nevada 89447

a. Square Footage: Rentable 2,895
 Usable

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$3,937.20	12	\$47,246.40	September 1, 2013 - August 31, 2014	\$ 1.36
\$3,937.20	12	\$47,246.40	September 1, 2014 - August 31, 2015	\$ 1.36
\$4,055.32	12	\$48,663.84	September 1, 2015 - August 31, 2016	\$ 1.40
\$4,055.32	12	\$48,663.84	September 1, 2016 - August 31, 2017	\$ 1.40
\$4,176.98	12	\$50,123.76	September 1, 2017 - August 31, 2018	\$ 1.44

Increase % * 0% 3% 0% 3%

c. Total Lease Consideration: 60 \$241,944.24

d. Option to renew: Yes No Renewal terms: one (1) identical lease term

e. Holdover notice: # of Days required 30 Holdover terms: 5% after ninety days

f. Term: Five (5) years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: After every effort to obtain this information the Market Rate is Not Available for this rural area.

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

o. Lease will be paid for by Agency Budget Account Number: 3648

6. Purpose of the lease: To house the Division of Public and Behavioral Health

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

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 OFFICE OF THE DIRECTOR
 BUDGET AND PLANNING DIVISION

a. Estimated moving expenses: N/A Furnishings: N/A Data/Phones: N/A

Remarks: This lease was re-negotiated to full service, specifically to include janitorial services. When comparing total cost for all services plus rent, this lease saves the agency \$6,081.66 or 2.72% over the 60 month term. ✓

1002045

STATEWIDE LEASE INFORMATION

**Exceptions/
Special
notes:**

In order to take advantage of the economies of scale, 4 of 5 leases at this facility were renegotiated at the same time.
Lessor is Sole Proprietor and is exempt from having a State Business License .
NV Business ID #: NV 20111382072."

8. State of Nevada Business License Information:

a. Nevada Business ID Number: NV20111382072

b. The Contractor is registered with the Nevada Secretary of State's Office as a: LLC INC CORP LLP
Sole Proprietor

c. Is the Contractor Exempt from obtaining a Business License: YES NO
*If yes, please explain in exceptions section

d. Is the Contractors Name the same as the Legal Entity Name? YES NO
*If no please explain in exceptions section

e. Does the Contractor have a current Nevada State Business License (SBL)? YES NO
*If no please explain in exceptions section

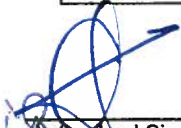
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office? YES NO

g. State of Nevada Vendor number: T81090047

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

a. I/we have considered the reasonableness of the terms of this lease, including cost YES NO

b. I/we have considered other state leased or owned space available for use by this agency YES NO



Authorized Signature
Public Works Division, Buildings and Grounds Section
do

7-19-13
Date



Authorized Signature - Agency
Date

7/19/13

For Board of Examiners YES NO

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

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Welfare and Supportive Services
 1470 College Parkway
 Carson City, NV 89706
 contact: Don Coston, phone (775) 684-0652, fax (775) 684-0656, dxcoston@dwss.nv.gov
 Elizabeth Watson, phone (775) 684-0514, EWATSON@dwss.nv.gov

2. Name of Landlord: Plaza Vegas, LLC

3. Address of Landlord: 195 East Reno Avenue
 Las Vegas, NV 89120

4. Property contact: contact: Dan Laliberte
 The Ribeiro Companies
 (702) 798-1133, dan.laliberte@ribeirocorp.com

5. Address of Lease property: 3101 Spring Mountain Road Suites 3, 4, 5
 Las Vegas, Nevada 89102

a. Square Footage: Rentable 8,153
 Usable

b. Cost:

	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
0%	\$ 19,323.00	12	\$ 231,876.00	Months 1 - 12 (Anticipated November 1, 2013)	\$ 2.37
Increase %	0%	12	\$ 231,876.00	Months 13 - 24	\$ 2.37
	3%	12	\$ 238,832.28	Months 25 - 36	\$ 2.44
	0%	12	\$ 238,832.28	Months 37 - 48	\$ 2.44
	3%	12	\$ 245,997.24	Months 49-60 (Anticipated October 31, 2018)	\$ 2.51

c. Total Lease Consideration: 60 \$1,187,413.80

d. Option to renew: Yes No Renewal terms: Yes w/90 days

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

f. Term: Five years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.64 - \$2.45

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

o. Lease will be paid for by Agency Budget Account Number: 3233

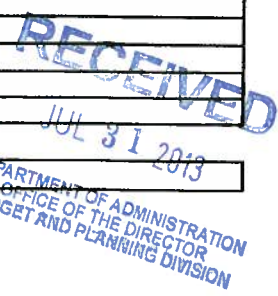
6. Purpose of the lease: To house the Division of Welfare and Supportive Services

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: \$132,758.00 Data/Phones: \$257,343.00

Remarks: The new office location is needed to provide additional client services mandated by the Affordable Care Act.

Exceptions/Special notes: Janitorial 5 day, day-time service.



(over 100)

STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20111716371</u>			
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"/>	LLP <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				
Is the Legal Entity active and In good standing with the Nevada Secretary of States Office?				
f. Office?	<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>Lessor to apply</u>			

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] 7/30/13
 Authorized Signature Date
 Public Works Division, Buildings and Grounds Section
 do

[Signature] 7.31.13
 Authorized Signature - Agency Date

For Board of Examiners YES NO

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

STATEWIDE LEASE INFORMATION

1. Agency: Department of Health and Human Services
 Division of Welfare and Supportive Services
 1470 College Parkway
 Carson City, NV 89706
 contact: Don Coston phone (775) 684-0652 fax (775) 684-0656 email dxcoston@dwss.nv.gov
 Elizabeth Watson phone (775) 684-0514 email ewatson@dwss.nv.gov

2. Name of Landlord (Lessor): MEOW, LLC

3. Address of Landlord: c/o The Ribeiro Company
 195 East Reno Avenue
 Las Vegas, Nevada 89119

4. Property contact: The Ribeiro Company
 195 East Reno Avenue
 Las Vegas, Nevada 89119
 Dan Laliberte phone 702.798.1133 fax 702.798.2944 email dan.laliberte@ribeirocorp.com

5. Address of Lease property: 2505 Chandler Avenue, Suite 1
 Las Vegas, Nevada 89120

a. Square Footage: Rentable
 Usable 10,502

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$19,009.00	12	\$228,108.00	Months 1 - 12 Anticipated November 1, 2013	\$1.81
\$19,009.00	12	\$228,108.00	Months 13 - 24	\$1.81
3% \$19,579.27	12	\$234,951.24	Months 25 - 36	\$1.86
3% \$19,579.27	12	\$234,951.24	Months 37 - 48	\$1.86
3% \$20,166.65	12	\$241,999.80	Months 49 - 60	\$1.92
3% \$20,166.65	12	\$241,999.80	Months 61 - 72	\$1.92
3% \$20,771.65	12	\$249,259.80	Months 73 - 84 Anticipated October 31, 2020	\$1.98

c. Total Lease Consideration: 84 \$1,659,377.88

d. Option to renew: Yes No Renewal terms: One identical term

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

f. Term: Seven (7) Years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.64 - \$2.45

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

o. Lease will be paid for by Agency Budget Account Number: 3233

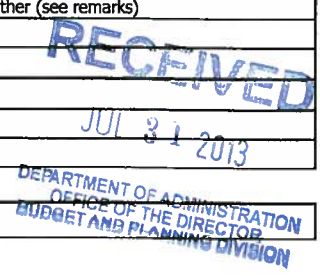
6. Purpose of the lease: To house the Division of Welfare and Supportice Services

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: \$160,146.00 Data/Phones: \$297,569.00

Remarks: This new administrative office location is necessary as a result of mandates by the Affordable Care Act.

Exceptions/ Special notes:



10/22/13


STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20121177805</u>			
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"/>	LLP <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				
Is the Legal Entity active and in good standing with the Nevada Secretary of States				
f. Office?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		
g. State of Nevada Vendor number:	<u>TBD</u>			

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, Buildings and Grounds Section
 Date 7.31.13



 Authorized Signature - Agency
 Date 7/31/13

II
 For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by: <i>[Signature]</i>	6/25/13
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency: Office of the Military
SSG Ben Pagni (775) 887-7339; benjamin.j.pagni.mil@mail.mil
Jennifer McEntee (775) 884-8458; jmcentee@govmail.state.nv.us

2. Name of Landlord (Lessor): North Carson LLC
Jarad Chao, Manager

3. Address of Landlord: 2527 Brickfield Court
Thousand Oaks, California 91362

4. Property contact: Property Manager: John Uhart (775) 884-1896; Fax (775) 884-4896; jfuhart@ccim.net
301 West Washington Street #1
Carson City, Nevada 89703

5. Address of Lease property: 1951 N. Carson Street
Carson City, Nevada 89701

a. Square Footage: Rentable 1,250
 Usable

b. Cost

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$1,550.00	12	\$18,600.00	August 1, 2013 - July 31, 2014	\$ 1.24

c. Total Lease Consideration: 12 \$18,600.00

d. Option to renew: Yes No Renewal terms: 1 identical lease term with 90 days written notice

e. Holdover notice: # of Days required, 90 Holdover terms: 5%/90

f. Term: Twelve (12) months

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.20 - \$1.50

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

o. Lease will be paid for by Agency Budget Account Number: 3650

6. Purpose of the lease: To house the National Guard Recruitment office.

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: N/A Furnishings: N/A Data/Phones: N/A

Remarks: Leasing Services negotiated this extension of a full service lease at the current rental rate of \$1,550.00 per month. The Tenant specified a one year lease term.

Exceptions/Special notes:

10000#B

RECEIVED

JUN 24 2013

DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

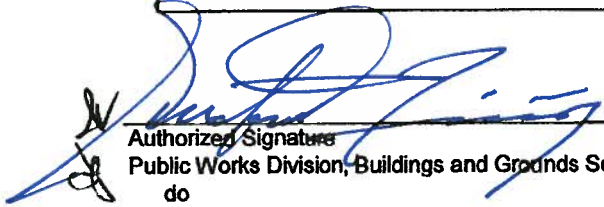
STATEWIDE LEASE INFORMATION

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20041274649</u>				
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"/>	LLP <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					
Is the Legal Entity active and in good standing with the Nevada Secretary of States					
f. Office?		<input checked="" type="checkbox"/> YES			<input type="checkbox"/> NO
g. State of Nevada Vendor number:	<u>T27010077</u>				

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

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


Authorized Signature _____ Date 6-21-13
Public Works Division, Buildings and Grounds Section
do


Authorized Signature - Agency _____ Date 6/13/13

For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by:	Jo 7-30-13
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
 contact: Imran Hyman 775-684-4413; fax: (775) 684-4455; lhyman@dcfs.nv.gov

2. Name of Landlord (Lessor): Douglas & S. JoAnn Roderick
 Contact: Douglas Roderick
 roderickdr1@yahoo.com

3. Address of Landlord: 61 Giorgi Lane
 Yerington, Nevada 89447

4. Property contact: Phone: 775-315-0303
 Fax: 775-463-0154

5. Address of Lease property: 215 West Bridge Street, Suite 4
 Yerington, Nevada 89447

a. Square Footage: Rentable 877
 Usable

b. Cost:	cost per month	# of months in time frame	cost per year	time frame	cost per square foot
	\$1,192.72	7	\$8,349.04	September 1, 2013 - March 31, 2014	\$ 1.36
Increase %	0%	12	\$14,312.64	April 1, 2014 - March 31, 2015	\$ 1.36
	3%	12	\$14,733.60	April 1, 2015 - March 31, 2016	\$ 1.40
	0%	12	\$14,733.60	April 1, 2016 - March 31, 2017	\$ 1.40

c. Total Lease Consideration: 43 \$52,128.88

d. Option to renew: Yes No Renewal terms: One identical lease term

e. Holdover notice: # of Days required 30 Holdover terms: 5% after 90 days

f. Term: Three (3) years nine (7) months

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: After every effort to obtain this information the Market Rate is Not Available for this rural area.

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

o. 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: N/A Furnishings: N/A Data/Phones: N/A

RECEIVED Remarks: This lease was re-negotiated to full service, specifically to include janitorial services. When comparing total cost for all services plus rent, this lease saves the agency 18.91% over the 43 month term.

JUL 29 2013

STATEWIDE LEASE INFORMATION

In order to take advantage of the economies of scale, 4 of 5 leases at this facility were renegotiated at the same time.

**Exceptions/
Special
notes:**

Lessor is Sole Proprietor and is exempt from having a State Business License .
NV Business ID #: NV 20111382072.

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV20111382072</u>				
b. The Contractor is registered with the Nevada Secretary of State's Office as a:		LLC <input type="checkbox"/>	INC <input type="checkbox"/>	CORP <input type="checkbox"/>	LLP <input type="checkbox"/>
<u>Sole Proprietor</u>					
c. Is the Contractor Exempt from obtaining a Business License:		<input checked="" type="checkbox"/> YES		<input 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 type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If no please explain in exceptions section					
Is the Legal Entity active and in good standing with the Nevada Secretary of States					
f. Office?		<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	<u>T81090047</u>				

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, Buildings and Grounds Section
do

7.24.13
Date



Authorized Signature Agency

7/16/13
Date

For Board of Examiners YES NO

For Budget Division Use Only	
Reviewed by:	JO 7-30-13
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency: Department of Business and Industry
Industrial Relations Division
Lori Myer 775-684-7073; lmyer@business.nv.gov; Fax: 775-684-2998
Pramila Verma 775-684-7078; pverma@business.nv.gov; Fax 775-684-2998

2. Name of Landlord (Lessor): The Trust for Methodist Development of the First United Methodist Church

3. Address of Landlord: c/o Carson Properties
187 Sonoma Street
Carson City, Nevada 89701

4. Property contact: Terry Yeager 775-882-3211

5. Address of Lease property: 400 West King Street, Suites 200, 210 and 400
Carson City, Nevada 89703

a. Square Footage: Rentable Usable 11,697

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$15,206.10	12	\$182,473.20	September 1, 2013 - August 31, 2014	\$ 1.30
\$15,206.10	12	\$182,473.20	September 1, 2014 - August 31, 2015	\$ 1.30
\$15,557.01	12	\$186,684.12	September 1, 2015 - August 31, 2016	\$ 1.33
\$15,557.01	12	\$186,684.12	September 1, 2016 - August 31, 2017	\$ 1.33
\$15,907.92	12	\$190,895.04	September 1, 2017 - August 31, 2018	\$ 1.36

Increase % 0% 2% 0% 2%

c. Total Lease Consideration: 60 \$929,209.68

d. Option to renew: Yes No Renewal terms: 1 option with 90 days

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

f. Term: Five (5) years

g. Pass-thrus & CAMS: None

h. Utilities: Landlord Tenant

i. Janitorial: Landlord Tenant 3 day 5 day Rural 3 day Rural 5 day Other (see remarks)

j. Major repairs: Landlord Tenant

k. Minor repairs: Landlord Tenant

l. Taxes: Landlord Tenant

m. Comparable Market Rate: \$1.30-\$1.50

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

o. Lease will be paid for by Agency Budget Account Number: 4680

6. Purpose of the lease: To house the Division of Industrial Relations.

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: N/A Furnishings: N/A Data/Phones: N/A

Remarks: This full service lease renewal represents both a reduction in cost per square foot and total space leased, resulting in savings to the State of \$122,233.32 (or 5.81%). The square footage was reduced by 1,329 square feet or approximately 10%.

RECEIVED
JUL 29 2013
DEPARTMENT OF ADMINISTRATION
OFFICE OF THE DIRECTOR
BUDGET AND PLANNING DIVISION

100 north 11

STATEWIDE LEASE INFORMATION

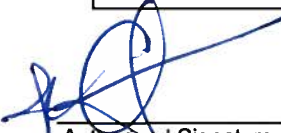
Exceptions/Special notes:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>NV19861025336</u>			
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/>	INC <input type="checkbox"/>	CORP <input type="checkbox"/>	LLP <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				
Is the Legal Entity active and in good standing with the Nevada Secretary of States				
f. Office?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		
g. State of Nevada Vendor number:	<u>T29000736</u>			

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, Buildings and Grounds Section
do

7-26-13

Date



Authorized Signature - Agency

7/19/13

Date

For Board of Examiners YES NO

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14669**

Agency Name: NUCLEAR PROJECTS OFFICE	Legal Entity Name: Nevada Division of Emergency Management
Agency Code: 012	Contractor Name: Nevada Division of Emergency Management
Appropriation Unit: 1005-14	Address: 2478 Fairview Dr.
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89701
If "No" please explain: Not Applicable	Contact/Phone: Judith Lyman 775-687-0300
	Vendor No.:
	NV Business ID: NA

To what State Fiscal Year(s) will the contract be charged? **2014**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **DEM-2014**

5. Purpose of contract:

This is a new interlocal agreement that provides federal funds specifically for Nevada Division of Emergency Management activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governor's Association.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Other basis for payment: Reimbursement of actual expenses

II. JUSTIFICATION

7. What conditions require that this work be done?

U.S. Department of Energy plans to transport transuranic waste through Nevada.

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

The Nevada Division of Emergency Management is a state agency.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slync1	07/03/2013 09:31:23 AM
Division Approval	slync1	07/03/2013 09:31:26 AM
Department Approval	slync1	07/03/2013 09:31:29 AM
Contract Manager Approval	slync1	07/03/2013 09:31:32 AM
Budget Analyst Approval	cwatson	07/12/2013 08:51:08 AM
BOE Agenda Approval	cwatson	07/12/2013 08:51:14 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14667**

Agency Name: **NUCLEAR PROJECTS OFFICE**
 Agency Code: **012**
 Appropriation Unit: **1005-14**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: Nevada Highway Patrol
 Contractor Name: **Nevada Highway Patrol**
 Address: **555 Wright Way**
 City/State/Zip: **Carson City, NV 89711**
 Contact/Phone: Lt. Bill Bainter 775-687-5300
 Vendor No.:
 NV Business ID: NA

To what State Fiscal Year(s) will the contract be charged? **2014**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **NHP-2014**

5. Purpose of contract:

This is a new interlocal agreement that provides federal funds specifically for Nevada Highway Patrol activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governor's Association.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Other basis for payment: Reimbursement of actual expenses

II. JUSTIFICATION

7. What conditions require that this work be done?

U.S. Department of Energy plans to transport transuranic waste shipments through Nevada

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

Nevada Highway Patrol is a State Agency

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

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

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

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

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

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slync1	07/03/2013 09:26:26 AM
Division Approval	slync1	07/03/2013 09:26:31 AM
Department Approval	slync1	07/03/2013 09:26:34 AM
Contract Manager Approval	slync1	07/03/2013 09:26:39 AM
Budget Analyst Approval	cwatson	07/12/2013 08:49:57 AM
BOE Agenda Approval	cwatson	07/12/2013 08:50:02 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: **14668**

Agency Name: NUCLEAR PROJECTS OFFICE	Legal Entity Name: State Health Division Radiation Control Program
Agency Code: 012	Contractor Name: State Health Division Radiation Control Program
Appropriation Unit: 1005-14	Address: 4150 Technology Way
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89706
If "No" please explain: Not Applicable	Contact/Phone: Karen Beckley 775-684-4200
	Vendor No.:
	NV Business ID: NA

To what State Fiscal Year(s) will the contract be charged? **2014**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **State Health-2014**

5. Purpose of contract:

This is a new interlocal agreement to provide federal funds specifically for Nevada State Health Division activities required for planning and operations associated with shipments of transuranic waste from the Nevada National Security Site to New Mexico and from out-of-state locations passing through Nevada. Federal funds for these activities are provided through a grant from the Western Governors Association.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: Reimbursement of actual expenses

II. JUSTIFICATION

7. What conditions require that this work be done?

U.S. Department of Energy plans to transport transuranic waste through Nevada

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

Nevada State Health Division Radiation Control Program is a state agency.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	slync1	07/03/2013 09:35:35 AM
Division Approval	slync1	07/03/2013 09:35:37 AM
Department Approval	slync1	07/03/2013 09:35:40 AM
Contract Manager Approval	slync1	07/03/2013 09:35:43 AM
Budget Analyst Approval	cwatson	07/12/2013 08:50:29 AM
BOE Agenda Approval	cwatson	07/12/2013 08:50:33 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14605**

Agency Name: **ATTORNEY GENERAL'S OFFICE**
Agency Code: **030**
Appropriation Unit: **1030-00**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: Nye County District Attorney
Contractor Name: **Nye County District Attorney**
Address: **PO Box 39**
City/State/Zip: **Pahrump , NV 89041**
Contact/Phone: null775-751-7080
Vendor No.: T80044560
NV Business ID: governmental agency

To what State Fiscal Year(s) will the contract be charged? **2013-2015**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

The services provided by the Office of the Attorney General on behalf of Nye County were needed immediately and were needed prior to the time frames allowed in getting this contract approved.

3. Termination Date: **06/30/2015**

Contract term: **2 years and 48 days**

4. Type of contract: **Revenue Contract**

Contract description: **Prosecution contract**

5. Purpose of contract:

This is a new revenue contract to provide prosecution services on behalf of the Office of the District Attorney, Nye County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,000.00**

Other basis for payment: per services provided on behalf of Nye County

II. JUSTIFICATION

7. What conditions require that this work be done?

Nye County District Attorney has a conflict in the prosecution of one of their cases and has requested the services of the Office of the Attorney General to prosecute this case.

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

This is a revenue contract where the State is providing the service on behalf of a County agency.

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

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

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

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

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

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

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcallens	06/17/2013 09:06:55 AM
Division Approval	chowle	06/21/2013 13:05:02 PM
Department Approval	chowle	06/21/2013 13:05:05 PM
Contract Manager Approval	ngarci1	06/28/2013 13:43:02 PM
Budget Analyst Approval	myoun3	07/05/2013 09:31:21 AM
BOE Agenda Approval	sbrown	07/08/2013 08:04:46 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **14646**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: City of Henderson
Agency Code: 030	Contractor Name: City of Henderson
Appropriation Unit: 1042-00	Address: 223 Lead Street
Is budget authority available?: No	City/State/Zip: Henderson , NV 89015
If "No" please explain: A work program is being completed to bring in this revenue.	Contact/Phone: null702-267-4632
	Vendor No.: T41033300
	NV Business ID: governmental agency
To what State Fiscal Year(s) will the contract be charged?	2014-2017

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

General Funds	0.00 %	X	Fees	100.00 % Revenue contract for cost sharing of the VINE system
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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This service is going live on July 1, 2013. Due to the time in getting the contract approved with the City of Henderson, the deadline to get this on the June or July 2103 BOE agenda was not met. Contract approval is being requested retroactive to July 1, 2013 upon approval at the August 2013 BOE agenda.

3. Termination Date: **06/30/2017**Contract term: **4 years**4. Type of contract: **Revenue Contract**Contract description: **Automated VINE syst.**

5. Purpose of contract:

This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System (VINE). The public safety entities that utilize this system will cost share with the Office of the Attorney General.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Payment for services will be made at the rate of \$1,041.66 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

For several years the Office of the Attorney General has been in the process of implementing, through grant funding, an automated Victim Information and Notification System. This system will be utilized by several counties and public safety entities. Through this contract, the users will share in the operational costs of the system.

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

This is a revenue contract where the users are sharing in the operational costs. There is no work being required by State employees.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

All using counties and public safety organizations will be involved.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcallens	07/01/2013 10:30:52 AM
Division Approval	clesli1	07/01/2013 12:19:31 PM
Department Approval	chowle	07/01/2013 16:59:49 PM
Contract Manager Approval	ngarci1	07/08/2013 09:13:33 AM
Budget Analyst Approval	myoun3	07/11/2013 13:08:13 PM
BOE Agenda Approval	sbrown	07/15/2013 12:52:24 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14644**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: Department of Corrections
Agency Code: 030	Contractor Name: Department of Corrections
Appropriation Unit: 1042-00	Address: PO Box 7011
Is budget authority available?: No	City/State/Zip: Carson City , NV 89702
If "No" please explain: A work program is being completed to bring in this revenue.	Contact/Phone: null775-887-3393
	Vendor No.: D44000026
	NV Business ID: governmental agency
To what State Fiscal Year(s) will the contract be charged?	2014-2017
What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.	
General Funds 0.00 %	X Fees 100.00 % Revenue contract for cost sharing of the VINE system
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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This service is going live on July 1, 2013. Due to the time in getting the contract approved with the NDOC, the deadline to get this on the June or July 2103 BOE agenda was not met. Contract approval is being requested retroactive to July 1, 2013 upon approval at the August 2013 BOE agenda.

3. Termination Date: **06/30/2017**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Automated VINE syst**

5. Purpose of contract:

This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System (VINE). the public safety entities that utilize this system will cost share with the Office of the Attorney General.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$140,000.00**

Payment for services will be made at the rate of \$2,916.66 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

For several years the Office of the Attorney General has been in the process of implementing, through grant funding, an automated Victim Information and Notification System. This system will be utilized by several counties and public safety entities. Through this contract, the users will share in the operational costs of the system.

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

This is a revenue contract where the users are sharing in the operational costs. There is no work being required by State employees.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

All using counties and public safety organizations will be involved.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcallens	07/01/2013 10:30:11 AM
Division Approval	clesli1	07/01/2013 12:18:16 PM
Department Approval	chowle	07/01/2013 16:58:52 PM
Contract Manager Approval	ngarci1	07/08/2013 09:02:50 AM
Budget Analyst Approval	myoun3	07/11/2013 14:15:07 PM
BOE Agenda Approval	sbrown	07/15/2013 12:53:43 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14645**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: Las Vegas Metro Police Department
Agency Code: 030	Contractor Name: Las Vegas Metro Police Department
Appropriation Unit: 1042-00	Address: 400 S Martin Luther King Blvd
Is budget authority available?: No	City/State/Zip: Las Vegas, NV 89106
If "No" please explain: A work program is being completed to bring in this revenue.	Contact/Phone: null702-671-3913
	Vendor No.: T81026920
	NV Business ID: governmental agency

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

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

General Funds	0.00 %	X	Fees	100.00 % Revenue contract for cost sharing of the VINE system
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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This service is going live on July 1, 2013. Due to the time in getting the contract approved with the LV Metro Police Dept, the deadline to get this on the June or July 2103 BOE agenda was not met. Contract approval is being requested retroactive to July 1, 2013 upon approval at the August 2013 BOE agenda.

3. Termination Date: **06/30/2017**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Automated VINE syst.**

5. Purpose of contract:

This is a new revenue interlocal contract to provide for the newly implemented Automated Victim Information and Notification System (VINE). the public safety entities that utilize this system will cost share with the Office of the Attorney General.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$180,000.00**

Payment for services will be made at the rate of \$3,750.00 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

For several years the Office of the Attorney General has been in the process of implementing, through grant funding, an automated Victim Information and Notification System. This system will be utilized by several counties and public safety entities. Through this contract, the users will share in the operational costs of the system.

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

This is a revenue contract where the users are sharing in the operational costs. There is no work being required by State employees.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

All using counties and public safety organizations will be involved.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcallens	07/01/2013 10:30:38 AM
Division Approval	clesli1	07/01/2013 12:19:12 PM
Department Approval	chowle	07/01/2013 16:59:28 PM
Contract Manager Approval	ngarci1	07/08/2013 09:20:08 AM
Budget Analyst Approval	myoun3	07/11/2013 13:18:38 PM
BOE Agenda Approval	sbrown	07/15/2013 12:51:18 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14604**

Agency Name: **ATTORNEY GENERAL'S OFFICE**
Agency Code: **030**
Appropriation Unit: **1042-00**

Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **Nye County Sheriff's Office**
Contractor Name: **Nye County Sheriff's Office**
Address: **PO Box 831**
City/State/Zip: **Tonopah, NV 89049**
Contact/Phone: **null775-751-7000**
Vendor No.: **T80044560AF**
NV Business ID: **governmental entity**

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue contract for cost sharing of the VINE system

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**
Anticipated BOE meeting date **08/2013**

Retroactive? **Yes**

If "Yes", please explain

This service is going live on July 1, 2013. Due to the time in getting the contract approved at the county level, the deadline to get this on the June or July 2013 BOE agenda was not met. Contract approval is being requested retroactive to July 1, 2013 upon approval at the August 2013 BOE agenda.

3. Termination Date: **06/30/2017**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Automated VINE system**

5. Purpose of contract:

This is a new revenue interlocal contract for new revenue to provide for the newly implemented Automated Victim Information and Notification System (VINE). The public safety entities that utilize this system will cost share with the Office of the Attorney General.

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 \$208.33 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

For several years the Office of the Attorney General has been in the process of implementing, through grant funding, an automated Victim Information and Notification System. This system will be utilized by several counties and public safety entities. Through this contract, the users will share in the operational costs of the system.

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

This is a revenue contract where the users are sharing in the operational costs. There is no work being required by State employees.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

All using counties and public safety organizations will be involved.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcallens	06/17/2013 09:06:39 AM
Division Approval	chowle	06/21/2013 13:04:30 PM
Department Approval	chowle	06/21/2013 13:04:33 PM
Contract Manager Approval	ngarci1	06/28/2013 13:33:07 PM
Budget Analyst Approval	myoun3	07/03/2013 16:05:42 PM
BOE Agenda Approval	sbrown	07/08/2013 07:57:59 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14769**

Agency Name: **ADMIN - DIRECTOR'S OFFICE**
Agency Code: **080**

Legal Entity Name: **AERIS ENTERPRISES, INC.**
Contractor Name: **AERIS ENTERPRISES, INC.**
Address: **59 DAMONTE RANCH PKWY STE B292**

Appropriation Unit: **1340-04**

Is budget authority available?: **Yes**

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

If "No" please explain: Not Applicable

Contact/Phone: null775/23308930

Vendor No.: T81082046A

NV Business ID: NV20011516008

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

X General Funds	50.00 %	X Fees	50.00 % Personnel Assessment
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

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

Anticipated BOE meeting date: 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Technical Support**

5. Purpose of contract:

This is a new contract for ongoing programming & analysis of enterprise computer applications existing in the Dept of Administration during fiscal years 2014 & 2015. The programs include the Nevada Executive Budget System (NEBS), Nevada Employee Action and Timekeeping System (NEATS), Nevada Project Accounting System (NPAS), Nevada Applicant Tracking System (NVAPPS), Human Resource Data Warehouse (HRDW), Contract Entry and Tracking System (CETS), Nevada Open Government, and Priorities/Performance Based Budgeting (PPBB). Typical activities include general analysis or troubleshooting of problems, programming to correct problems, design, development and deployment of new modules to enhance existing programs or improve functionality of the platforms, upgrading source code programming, infrastructure, middleware, or any other component as requested to resolve issues, improve functionality, or improve performance, and modifications to maintain browsers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$322,514.00**

Payment for services will be made at the rate of \$225.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

This vendor is the primary developer of the software the state depends on for budget, HR, contracts and open government applications. This contract ensures adequate support is provided for these applications. This contract supports state employees who manage and determine the work to be completed by the vendor.

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

This contract provides supplemental support to state employees and the vendor possesses knowledge of the applications necessary to provide detailed analysis and maintenance support including solutions when issues arise involving the core code of each program.

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

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**
Approval #: 130705
Approval Date: 07/23/2013

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

Primary designer of current application.

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

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

2011-2013 Dept of Administration - satisfactory
Also performed on contracts for the former Department of Personnel and the Legislature. All were completed satisfactorily.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/30/2013 10:40:22 AM
Division Approval	wsalisp1	07/30/2013 10:40:24 AM
Department Approval	wsalisp1	07/30/2013 10:40:26 AM
Contract Manager Approval	csweeney	07/30/2013 10:47:59 AM
DoIT Approval	lmuelle1	07/30/2013 13:10:21 PM
Budget Analyst Approval	ekin4	07/31/2013 08:04:37 AM
BOE Agenda Approval	jborrowm	08/02/2013 08:58:23 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14655**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89102-7819
If "No" please explain: Not Applicable	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Belrose building located at 620/628 Belrose Street, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$169,055.00**

Other basis for payment: Yr 1: \$3,074 per month, Call back \$25 per hr, VCT & Linoleum \$451 per request, Window \$271 per request, Carpet \$2,465 per request, Blinds \$21.95 per blind; Yr 2: \$3,105 per month, Call back \$25.25 per hr, VCT & Linoleum \$456 per request, Window \$274 per request, Carpet \$2,489 per request, Blinds \$22 per blind; Yr 3: \$3,136 per month, Call back \$25.50 per hr, VCT & Linoleum \$460 per request, Window \$276 per request, Carpet \$5,415 per request, Blinds \$22.22 per blind; Yr 4: \$3,167 per month, Call back \$25.75 per hr, VCT & Linoleum \$465 per request, Window \$279 per request, Carpet \$2,539 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

15. a. Is the Contractor Name the same as the legal Entity Name?
Yes

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

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

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:09:38 AM
Division Approval	wsalisp1	07/02/2013 07:09:41 AM
Department Approval	wsalisp1	07/02/2013 07:09:43 AM
Contract Manager Approval	csweeney	07/02/2013 08:09:53 AM
Budget Analyst Approval	jrodrig9	07/11/2013 19:09:36 PM
BOE Agenda Approval	cwatson	07/12/2013 08:28:37 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: **14656**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89102-7819
If "No" please explain: Not Applicable	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Bradley building located at 2501 East Sahara Avenue, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$115,970.60**

Other basis for payment: Yr 1: \$2,051.80 per month, Call back \$25 per hr, VCT & Linoleum \$150 per request, Window \$271 per request, Carpet \$1,374 per request, Blinds \$21.95 per blind; Yr 2: \$2,072 per month, Call back \$25.25 per hr, VCT & Linoleum \$152 per request, Window \$273 per request, Carpet \$1,388 per request, Blinds \$22 per blind; Yr 3: \$2,093 per month, Call back \$25.50 per hr, VCT & Linoleum \$153 per request, Window \$276 per request, Carpet \$1,402 per request, Blinds \$22.22 per blind; Yr 4: \$2,114 per month, Call back \$25.75 per hr, VCT & Linoleum \$156 per request, Window \$279 per request, Carpet \$1,416 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:19:58 AM
Division Approval	wsalisp1	07/02/2013 07:20:00 AM
Department Approval	wsalisp1	07/02/2013 07:20:02 AM
Contract Manager Approval	csweeney	07/02/2013 08:10:44 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:53:06 PM
BOE Agenda Approval	cwatson	07/12/2013 08:28:05 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14657**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	3062 SHERIDAN ST STE 1
If "No" please explain: Not Applicable	LAS VEGAS, NV 89102-7819
	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Department of Motor Vehicles located at 2701 East Sahara Avenue, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$320,572.00**

Other basis for payment: Yr 1: \$6,366 per month, Call back \$25 per hr, VCT & Linoleum \$282 per request, Window \$190 per request, Carpet \$696 per request, Blinds \$21.95 per blind; Yr 2: \$6,430 per month, Call back \$25.25 per hr, VCT & Linoleum \$284 per request, Window \$192 per request, Carpet \$703 per request, Blinds \$22 per blind; Yr 3: \$6,494 per month, Call back \$25.50 per hr, VCT & Linoleum \$287 per request, Window \$194 per request, Carpet \$710 per request, Blinds \$22.22 per blind; Yr 4: \$6,559 per month, Call back \$25.75 per hr, VCT & Linoleum \$290 per request, Window \$196 per request, Carpet \$717 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

15. a. Is the Contractor Name the same as the legal Entity Name?
Yes

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

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

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:28:03 AM
Division Approval	wsalisp1	07/02/2013 07:28:06 AM
Department Approval	wsalisp1	07/02/2013 07:28:08 AM
Contract Manager Approval	csweeney	07/02/2013 08:11:33 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:45:28 PM
BOE Agenda Approval	cwatson	07/12/2013 08:25:20 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14658**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	3062 SHERIDAN ST STE 1
If "No" please explain: Not Applicable	LAS VEGAS, NV 89102-7819
	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Grant Sawyer building located at 555 East Washington Avenue, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$978,629.60**

Other basis for payment: Yr 1: \$18,275.05 per month, Call back \$25 per hr, VCT & Linoleum \$675 per request, Window \$5,520 per request, Carpet \$6,720 per request, Blinds \$21.95 per blind; Yr 2: \$18,458 per month, Call back \$25.25 per hr, VCT & Linoleum \$682 per request, Window \$5,575 per request, Carpet \$6,787 per request, Blinds \$22 per blind; Yr 3: \$18,642 per month, Call back \$25.50 per hr, VCT & Linoleum \$689 per request, Window \$5,631 per request, Carpet \$6,855 per request, Blinds \$22.22 per blind; Yr 4: \$18,829 per month, Call back \$25.75 per hr, VCT & Linoleum \$695 per request, Window \$5,687 per request, Carpet \$6,924 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

15. a. Is the Contractor Name the same as the legal Entity Name?
Yes

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

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

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:37:10 AM
Division Approval	wsalisp1	07/02/2013 07:37:13 AM
Department Approval	wsalisp1	07/02/2013 07:37:14 AM
Contract Manager Approval	csweeney	07/02/2013 08:12:16 AM
Budget Analyst Approval	jrodrig9	07/11/2013 19:08:16 PM
BOE Agenda Approval	cwatson	07/12/2013 08:29:07 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14659**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89102-7819
If "No" please explain: Not Applicable	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for Welfare - Henderson Building located at 520 South Boulder Highway, Henderson, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$115,432.20**

Other basis for payment: Yr 1: \$1,960.35 per month, Call back \$25 per hr, VCT & Linoleum \$953 per request, Window \$312 per request, Carpet \$963 per request, Blinds \$21.95 per blind; Yr 2: \$1,980 per month, Call back \$25.25 per hr, VCT & Linoleum \$963 per request, Window \$316 per request, Carpet \$972 per request, Blinds \$22 per blind; Yr 3: \$1,999 per month, Call back \$25.50 per hr, VCT & Linoleum \$973 per request, Window \$319 per request, Carpet \$982 per request, Blinds \$22.22 per blind; Yr 4: \$2,020 per month, Call back \$25.75 per hr, VCT & Linoleum \$982 per request, Window \$322 per request, Carpet \$992 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

15. a. Is the Contractor Name the same as the legal Entity Name?
Yes

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

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

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:45:43 AM
Division Approval	wsalisp1	07/02/2013 07:45:45 AM
Department Approval	wsalisp1	07/02/2013 07:45:47 AM
Contract Manager Approval	csweeney	07/02/2013 08:12:56 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:50:29 PM
BOE Agenda Approval	cwatson	07/12/2013 08:24:50 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: **14660**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCURATE BUILDING MAINTENANCE
Agency Code: 082	Contractor Name: ACCURATE BUILDING MAINTENANCE
Appropriation Unit: 1349-12	Address: LLC
Is budget authority available?: Yes	3062 SHERIDAN ST STE 1
If "No" please explain: Not Applicable	LAS VEGAS, NV 89102-7819
	Contact/Phone: null702/220-8180
	Vendor No.: T81039103
	NV Business ID: NV19991074849

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for Welfare - Owens located at 1040 West Owens Avenue, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$179,863.40**

Other basis for payment: Yr 1: \$2,997.95 per month, Call back \$25 per hr, VCT & Linoleum \$2,743 per request, Window \$200 per request, Carpet \$912 per request, Blinds \$21.95 per blind; Yr 2: \$3,028 per month, Call back \$25.25 per hr, VCT & Linoleum \$2,770 per request, Window \$202 per request, Carpet \$921 per request, Blinds \$22 per blind; Yr 3: \$3,058 per month, Call back \$25.50 per hr, VCT & Linoleum \$2,798 per request, Window \$204 per request, Carpet \$930 per request, Blinds \$22.22 per blind; Yr 4: \$3,089 per month, Call back \$25.75 per hr, VCT & Linoleum \$2,826 per request, Window \$206 per request, Carpet \$939 per request, Blinds \$22.44 per blind

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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?

Pursuant to RFP #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for multiple buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

15. a. Is the Contractor Name the same as the legal Entity Name?
Yes

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

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

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 07:54:44 AM
Division Approval	wsalisp1	07/02/2013 07:54:46 AM
Department Approval	wsalisp1	07/02/2013 07:54:48 AM
Contract Manager Approval	csweeney	07/02/2013 08:13:42 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:48:17 PM
BOE Agenda Approval	cwatson	07/12/2013 08:32:16 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14511**

Agency Name: STATE PUBLIC WORKS DIVISION	Legal Entity Name: JEROD INC DBA FASTSIGNS LAS VEGAS
Agency Code: 082	Contractor Name: JEROD INC DBA FASTSIGNS LAS VEGAS
Appropriation Unit: 1349-12	Address: 3973 S. MARYLAND PARKWAY
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89119
If "No" please explain: Not Applicable	Contact/Phone: null702-792-9225
	Vendor No.: T81085362
	NV Business ID: NV20011124176

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

What is the source of funds that will be used to 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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **77526**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2017**

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

4. Type of contract: **Contract**

Contract description: **Sign Services**

5. Purpose of contract:

This is a new contract that continues ongoing sign installation and removal for various state buildings in the Las Vegas area, to be used upon the written request and approval of a Buildings and Grounds designee.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$35,000.00**

Other basis for payment: Regular rate \$75 per man, per hour; Overtime rate \$112.50 per man, per hour; Crew hours are Monday thru Friday, 9am-5pm (Winter), 8am-4pm (Summer); Crews can be available on Saturday at a premium of 1.5 times rates listed above; Materials will be charged at cost +35%

II. JUSTIFICATION

7. What conditions require that this work be done?

Signs must be installed and removed in a safe manner.

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

Lack of manpower and expertise.

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 is one of multiple sign 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: 04/30/2013 Anticipated re-bid date: 04/30/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	06/25/2013 10:58:14 AM
Division Approval	wsalisp1	06/25/2013 10:58:16 AM
Department Approval	wsalisp1	06/25/2013 10:58:18 AM
Contract Manager Approval	csweeney	06/25/2013 11:01:34 AM
Budget Analyst Approval	jrodrig9	06/25/2013 16:40:02 PM
BOE Agenda Approval	cwatson	07/11/2013 08:51:03 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14639**

Agency Name: **STATE PUBLIC WORKS DIVISION**
Agency Code: **082**
Appropriation Unit: **1349-12**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **RENO TAHOE FRANCHISING INC**
Contractor Name: **RENO TAHOE FRANCHISING INC**
Address: **DBA JANI KING OF RENO
164 HUBBARD WAY STE C
RENO, NV 89502-3778**
City/State/Zip: **RENO, NV 89502-3778**
Contact/Phone: null775/323-1600
Vendor No.: T29026876
NV Business ID: NV20051738893

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP #3050

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Tourism building (more commonly known as the LAXALT building) located at 401 N. Carson Street, Carson City, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$77,904.00**

Payment for services will be made at the rate of \$1,398.00 per month

Other basis for payment: Extra services and call back \$11.50 per hour; Semi-Annual cleaning (when requested) VCT/Linoleum \$350.00

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? 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 #3050, 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: 04/16/2013 Anticipated re-bid date: 04/16/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently for Department of Motor Vehicles (Carson City)
Quality of service provided has been satisfactory

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	06/27/2013 11:01:45 AM
Division Approval	wsalisp1	06/27/2013 11:01:47 AM
Department Approval	wsalisp1	06/27/2013 11:01:49 AM
Contract Manager Approval	csweeney	06/27/2013 11:06:58 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:06:24 PM
BOE Agenda Approval	cwatson	07/12/2013 08:27:05 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: 14591	Amendment Number: 1
Agency Name: STATE PUBLIC WORKS DIVISION	Legal Entity Name: RENO TAHOE FRANCHISING INC
Agency Code: 082	Contractor Name: RENO TAHOE FRANCHISING INC
Appropriation Unit: 1349-12	Address: DBA JANI KING OF RENO 164 HUBBARD WAY STE C
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-3778
If "No" please explain: Not Applicable	Contact/Phone: null775/323-1600
	Vendor No.: T29026876
	NV Business ID: NV20051738893

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that will be used to 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 % Building rent income 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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/31/2013**

Contract term: **122 days**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is the first amendment to the original contract, which continues ongoing janitorial services to the Nevada State Library and Archives building located at 100 N. Stewart Street, Carson City, Nevada. This amendment extends the termination date from August 31, 2013 to October 31, 2013 and increases the maximum amount from \$8,349.66 to \$20,789.66. The increased amount includes \$7,394.66 for the extension and \$5,000 for extra services to be provided on an as needed basis and as approved by the Buildings and Grounds Division.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$8,394.66
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$12,394.66
4. New maximum contract amount:	\$20,789.32
and/or the termination date of the original contract has changed to:	10/31/2013

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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):

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

This is an emergency contract, 4 vendors were contacted to submit bids, only 2 vendors submitted a bid. Jani King of Reno was the lowest bidder. This contract will only be effective until an RFP can be completed.

d. Last bid date: 06/03/2013 Anticipated re-bid date: 10/31/2013

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

2012-2013, Buildings and Grounds, Service Satisfactory.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/09/2013 13:15:24 PM
Division Approval	wsalisp1	07/09/2013 13:15:27 PM
Department Approval	wsalisp1	07/09/2013 13:15:29 PM
Contract Manager Approval	wsalisp1	07/09/2013 13:15:33 PM
Budget Analyst Approval	jrodrig9	07/11/2013 18:27:50 PM
BOE Agenda Approval	cwatson	07/12/2013 08:37:37 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14600**

Agency Name: STATE PUBLIC WORKS DIVISION	Legal Entity Name: SAVAGE & SON INC
Agency Code: 082	Contractor Name: SAVAGE & SON INC
Appropriation Unit: 1349-12	Address: 3101 YORI AVE
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502
If "No" please explain: Not Applicable	Contact/Phone: Len Savage 775/828-4193
	Vendor No.: PUR0000504
	NV Business ID: NV19341000063
To what State Fiscal Year(s) will the contract be charged?	2014-2018

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 % Buildings rent income 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 31 days**

4. Type of contract: **Contract**

Contract description: **Backflow Plumbing**

5. Purpose of contract:

This is a new contract that continues ongoing plumbing, wetside heating ventilation and air conditioning and backflow certification services to various state buildings in Northern Nevada at the written request of a Buildings and Grounds designee.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Other basis for payment: not to exceed \$95.00 per hour for a Foreman; not to exceed \$90.00 for a Journeyman from 7:00 a.m. to 3:30 p.m. or from 8:00 a.m. to 4:30 p.m. Overtime rates are not to exceed \$142.50 per hour for a Foreman; not to exceed \$135.00 per hour for a Journeyman. Overtime rates occur for the first two hours after an eight (8) hour period and on Saturdays. Double Time are not to exceed \$190.00 per hour for a Foreman; not to exceed \$180.00 per hour for a Journeyman. Double time rates occur on Holidays, Sundays, and anytime exceeding a ten (10) hour period. Actual material invoice with copies submitted at the time of monthly billing plus 15%. Rentals are not to exceed cost plus 15% (invoiced copies at time of billing). Subcontractors are not to exceed cost plus 5% (invoiced copies at time of billing). Equipment /Tools (large, power, hand) are not to exceed 10% of labor. Backflow Certification not to exceed a flat fee of \$150.00 plus hourly labor.

II. JUSTIFICATION

7. What conditions require that this work be done?

It is necessary for plumbing in State buildings to be in 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:

Lack of manpower and expertise.

9. Were quotes or proposals solicited? **Yes**

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

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

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

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

This is one of multiple contracts for plumbing and backflow services on file. Per SAM 0338.0, each contractor will be contacted to submit bids for available jobs.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 05/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

2009-2013, Buildings and Grounds, service satisfactory

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	06/24/2013 13:08:25 PM
Division Approval	wsalisp1	06/24/2013 13:08:28 PM
Department Approval	wsalisp1	06/24/2013 13:08:30 PM
Contract Manager Approval	csweeney	06/24/2013 13:29:17 PM
Budget Analyst Approval	jrodrig9	06/25/2013 10:10:16 AM
BOE Agenda Approval	cwatson	07/11/2013 08:50:07 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14724**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: THOMPSON GARAGE DOORS
Agency Code: 082	Contractor Name: THOMPSON GARAGE DOORS
Appropriation Unit: 1349-12	Address: 171 S 18TH ST
Is budget authority available?: Yes	City/State/Zip: SPARKS, NV 89431-5581
If "No" please explain: Not Applicable	Contact/Phone: Kenneth Reyman 775/356-6601
	Vendor No.: T80929952
	NV Business ID: NV199310381124

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Buildings and Grounds rent income 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **09/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Garage Maintenance**

5. Purpose of contract:

This is a new contract that continues ongoing repair, install, service and replacement of all types of overhead garage doors and openers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: not to exceed \$108.00 per hour, one-hour minimum, for one person; not to exceed \$148.00 per hour, one-hour minimum, for two people. Normal rates apply during the hours of 7:00 a.m. to 5:00 p.m. Monday through Friday; Overtime rates are time and a half and apply after 5:00 p.m. Commercial Spring Job (estimate only) not to exceed \$350.00 - \$550.00 (price varies by cone diameter, duplex spring or not, etc.). Shop Repairs are not to exceed \$80.00 per hour; Gear and sprocket (In shop) not to exceed \$139.00 per hour. Materials are priced at cost plus 20%.

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings need maintenance, repair and replacement of overhead doors.

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

Lack of manpower and equipment

9. Were quotes or proposals solicited? **Yes**

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

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

b. Solicitation Waiver: **Not Applicable**

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

This is one of multiple contracts for garage door maintenance on file. Per SAM 0338.0, each contractor will be contacted to submit bids for available jobs.

d. Last bid date: 05/31/2013 Anticipated re-bid date: 05/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

2009-2013, Buildings and Grounds, Service Satisfactory

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tgalvan	07/16/2013 09:50:05 AM
Division Approval	tgalvan	07/16/2013 09:50:08 AM
Department Approval	tgalvan	07/16/2013 09:50:10 AM
Contract Manager Approval	csweeney	07/16/2013 09:59:58 AM
Budget Analyst Approval	jrodrig9	07/18/2013 12:51:11 PM
BOE Agenda Approval	sbrown	07/19/2013 09:23:51 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14653**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: XCEL MAINTENANCE SERVICES INC
Agency Code: 082	Contractor Name: XCEL MAINTENANCE SERVICES INC
Appropriation Unit: 1349-12	Address: 8920 COLORFUL PINES AVE
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89143-4403
If "No" please explain: Not Applicable	Contact/Phone: null702/341-9235
	Vendor No.: T81103343
	NV Business ID: NV20021426879

To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 % Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP#3017**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2017**

Contract term: **4 years and 1 day**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for Buildings and Grounds located at 2621 E. Sahara Avenue, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$46,960.00**

Payment for services will be made at the rate of \$875.00 per month

Other basis for payment: Extra Services \$2,500; Call back \$18 per hour; Semi Annual VCT & Linoleum Cleaning \$120.00 per request; Annual Window Cleaning \$50.00; Annual Carpet Cleaning \$75.00 per request; Annual Blind Cleaning \$8 per blind.

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for five buildings in Las Vegas for Buildings and Grounds and has provided satisfactory service.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 06:36:34 AM
Division Approval	wsalisp1	07/02/2013 06:36:36 AM
Department Approval	wsalisp1	07/02/2013 06:36:38 AM
Contract Manager Approval	csweeney	07/02/2013 08:08:01 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:42:16 PM
BOE Agenda Approval	cwatson	07/12/2013 08:25:47 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: **14654**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION Agency Code: 082 Appropriation Unit: 1349-12 Is budget authority available?: Yes If "No" please explain: Not Applicable	Legal Entity Name: XCEL MAINTENANCE SERVICES INC Contractor Name: XCEL MAINTENANCE SERVICES INC Address: 8920 COLORFUL PINES AVE City/State/Zip: LAS VEGAS, NV 89143-4403 Contact/Phone: null702/341-9235 Vendor No.: T81103343 NV Business ID: NV20021426879
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To what State Fiscal Year(s) will the contract be charged? **2014-2018**

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 %	Building rent income fees
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: RFP#3017

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/31/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/17/2017**

Contract term: **3 years and 352 days**

4. Type of contract: **Contract**

Contract description: **Janitorial Services**

5. Purpose of contract:

This is a new contract that continues ongoing janitorial services for the Department of Motor Vehicles located at 8250 West Flamingo Road, Las Vegas, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$421,980.00**

Payment for services will be made at the rate of \$8,100.00 per month

Other basis for payment: Extra Services \$2,500; Call back \$18 per hour; Semi Annual VCT & Linoleum Cleaning \$1,900.00 per request; Annual Window Cleaning \$1,670.00; Annual Carpet Cleaning \$1,200.00 per request; Annual Blind Cleaning \$8 per blind.

II. JUSTIFICATION

7. What conditions require that this work be done?

State buildings must be kept clean for the safety of the public and State employees.

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? **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 #3017, 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: 03/01/2013 Anticipated re-bid date: 03/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This is the current vendor for janitorial services for five buildings in Las Vegas and has provided satisfactory service.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	wsalisp1	07/02/2013 06:46:30 AM
Division Approval	wsalisp1	07/02/2013 06:46:32 AM
Department Approval	wsalisp1	07/02/2013 06:46:34 AM
Contract Manager Approval	csweeney	07/02/2013 08:08:53 AM
Budget Analyst Approval	jrodrig9	07/11/2013 18:40:18 PM
BOE Agenda Approval	cwatson	07/12/2013 08:26:34 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: **13192** Amendment Number: **1**

Agency Name: **STATE PUBLIC WORKS DIVISION** Legal Entity Name: **GEOTECHNICAL & ENVIRONMENTAL**

Agency Code: **082** Contractor Name: **GEOTECHNICAL & ENVIRONMENTAL SERVICES INC**

Appropriation Unit: **1551-07** Address: **7150 PLACID ST**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89119-4203**

If "No" please explain: Not Applicable Contact/Phone: null702/365-1001

Vendor No.: T81085017

NV Business ID: NV19921050120

To what State Fiscal Year(s) will the contract be charged? **2012-2015**

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

Agency Reference #: 25074

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2012**

Anticipated BOE meeting date 08/2013

Retrospective? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2015**Contract term: **3 years and 88 days**4. Type of contract: **Contract**Contract description: **MISC SERV AGR**

5. Purpose of contract:

This is the first amendment to the original contract; which provides provide construction material testing services for the Southern Desert Correctional Center, Core Expansion; Project No. 11-C01; Contract No. 25074. This amendment reduces the maximum amount from \$98,700 to \$80,678 due to the project being complete and thus eliminating the need for any additional construction and material testing services.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$98,700.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	-\$18,022.00
4. New maximum contract amount:	\$80,678.00

II. JUSTIFICATION

7. What conditions require that this work be done?

2011 CIP

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

Professional Services are provided by SPWB 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 on this project

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 14:29:40 PM
Division Approval	dgrimm	07/09/2013 14:29:43 PM
Department Approval	dgrimm	07/09/2013 14:29:46 PM
Contract Manager Approval	dgrimm	07/09/2013 16:15:52 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:43:25 PM
BOE Agenda Approval	cwatson	07/12/2013 08:44:13 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: **13094** Amendment Number: **4**
 Legal Entity Name: **CORE CONSTRUCTION SERVICES OF NEVADA INC DBA CORE CONSTRUCTION**
 Agency Name: **STATE PUBLIC WORKS DIVISION** Contractor Name: **CORE CONSTRUCTION SERVICES OF NEVADA INC DBA CORE CONSTRUCTION**
 Agency Code: **082** Address: **7150 CASCADE VALLEY CT**
 Appropriation Unit: **1566-18**
 Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89128**
 If "No" please explain: **Not Applicable** Contact/Phone: **null702/794-0550**
 Vendor No.: **T81092744**
 NV Business ID: **NV19861002524**
 To what State Fiscal Year(s) will the contract be charged? **2012-2015**

What is the source of funds that will be used to pay the contractor? 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	91.00 %	X Bonds	4.00 %
Highway Funds	0.00 %	X Other funding	5.00 % transfer from capital project funds
Agency Reference #:	7604		

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/08/2012**
 Anticipated BOE meeting date **08/2013**
 Retroactive? **No**
 If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/17/2013**
 Contract term: **3 years and 53 days**

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

5. Purpose of contract:
This is the fourth amendment to the original contract; which provides Construction Manager at Risk services for the Field Maintenance Shop, Las Vegas, NV; Project No. 09-C13; Contract No. 7604. This amendment increases the maximum amount from \$21,931,054 to \$21,990,963 for photovoltaic infrastructure construction costs for the covered military vehicle parking structures at the field maintenance shop project.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$21,633,554.00
2. Total amount of any previous contract amendments:	\$297,500.00
3. Amount of current contract amendment:	\$59,909.00
4. New maximum contract amount:	\$21,990,963.00
and/or the termination date of the original contract has changed to:	06/30/2015

II. JUSTIFICATION

7. What conditions require that this work be done?
2009 CIP

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

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 11:35:09 AM
Division Approval	dgrimm	07/09/2013 11:35:13 AM
Department Approval	dgrimm	07/09/2013 11:35:15 AM
Contract Manager Approval	dgrimm	07/16/2013 15:40:19 PM
Budget Analyst Approval	jrodrig9	07/18/2013 12:26:30 PM
BOE Agenda Approval	sbrown	07/19/2013 09:17:30 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: **14676**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ACCESS TECHNOLOGIES SERVICES
Agency Code: 082	Contractor Name: ACCESS TECHNOLOGIES SERVICES
Appropriation Unit: All Appropriations	Address: INC
Is budget authority available?: Yes	10225 BUTTON WILLOW DR
If "No" please explain: Not Applicable	LAS VEGAS, NV 89134-7595
	Contact/Phone: null702/649-7575
	Vendor No.: T29000869
	NV Business ID: NV20111263576

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: 74660

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **Access PI Chk**

5. Purpose of contract:

This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74660.

6. NEW CONTRACT

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

Other basis for payment: Progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

Accessibility plan checking required to ensure building safety and code compliance.

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

Professional Plan Checking 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 09:03:12 AM
Division Approval	dgrimm	07/09/2013 09:03:15 AM
Department Approval	dgrimm	07/09/2013 09:03:17 AM
Contract Manager Approval	dgrimm	07/09/2013 16:21:39 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:35:37 AM
BOE Agenda Approval	cwatson	07/12/2013 13:31:53 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14677**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ARCHITECTS + LLC
Agency Code: 082	Contractor Name: ARCHITECTS + LLC
Appropriation Unit: All Appropriations	Address: 35 MARTIN ST
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89509
If "No" please explain: Not Applicable	Contact/Phone: null775/329-8001
	Vendor No.: T80870250
	NV Business ID: NV20001117428

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **74658**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **Access PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74658

6. NEW CONTRACT

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

Other basis for payment: **Progress payments based on services provided**

II. JUSTIFICATION

7. What conditions require that this work be done?

Accessibility plan checking services to ensure building safety and code compliance.

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

Professional Plan Checking 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 09:04:24 AM
Division Approval	dgrimm	07/09/2013 09:04:26 AM
Department Approval	dgrimm	07/09/2013 09:04:28 AM
Contract Manager Approval	dgrimm	07/09/2013 16:22:04 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:38:13 AM
BOE Agenda Approval	cwatson	07/12/2013 13:32:27 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **14687**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: CHARLES ABBOTT ASSOCIATES INC
Agency Code: 082	Contractor Name: CHARLES ABBOTT ASSOCIATES INC
Appropriation Unit: All Appropriations	Address: 27401 LOS ALTOS STE 220
Is budget authority available?: Yes	City/State/Zip: MISSION VIEJO, CA 92691-6316
If "No" please explain: Not Applicable	Contact/Phone: null949/367-2850
	Vendor No.: T29031774
	NV Business ID: NV20071306494

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **74471**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **08/2013**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Open Term**Contract description: **PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74471

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00**Other basis for payment: **Progress payments based on services provided.****II. JUSTIFICATION**

7. What conditions require that this work be done?

Code Plan checking services to ensure building safety and code compliance.

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

Professional Plan Checking 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 Applicableb. 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 this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 15:15:00 PM
Division Approval	dgrimm	07/09/2013 15:15:02 PM
Department Approval	dgrimm	07/09/2013 15:15:04 PM
Contract Manager Approval	dgrimm	07/09/2013 16:13:49 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:27:04 PM
BOE Agenda Approval	cwatson	07/12/2013 08:47:12 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **14675**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	CSG Consultants, Inc.
Agency Code:	082	Contractor Name:	CSG Consultants, Inc.
Appropriation Unit:	All Appropriations	Address:	1247 MAIN ST
Is budget authority available?:	Yes	City/State/Zip:	NEWMAN, CA 95360
If "No" please explain:	Not Applicable	Contact/Phone:	null209/862-9511
		Vendor No.:	T27009757
		NV Business ID:	NV20111353297

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: 74475

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Contract**Contract description: **CODE PL CHK**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74475

6. NEW CONTRACT

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

Other basis for payment: progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

Code plan checking services as required to ensure building and safety code compliance.

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

Professional 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 Applicableb. 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 this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 09:01:09 AM
Division Approval	dgrimm	07/09/2013 09:01:12 AM
Department Approval	dgrimm	07/09/2013 09:01:15 AM
Contract Manager Approval	dgrimm	07/09/2013 16:21:14 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:11:51 AM
BOE Agenda Approval	cwatson	07/12/2013 13:31:16 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14693**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: ENGINEERING PARTNERS LLC
Agency Code: 082	Contractor Name: ENGINEERING PARTNERS LLC
Appropriation Unit: All Appropriations	Address: 4775 W. Teco Ave., Suite 230
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89118
If "No" please explain: Not Applicable	Contact/Phone: null702-442-0862
	Vendor No.: T27032644
	NV Business ID: NV20121610178

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **77534**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional mechanical/electrical plan checking services as required. SPWD Contract No. 77534

6. NEW CONTRACT

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

Other basis for payment: **Progress payments based on services provided**

II. JUSTIFICATION

7. What conditions require that this work be done?

Mechanical/Electrical Plan Checking services required to ensure building safety and code compliance.

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

Professional Plan Checking 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 14:15:40 PM
Division Approval	dgrimm	07/09/2013 14:15:42 PM
Department Approval	dgrimm	07/09/2013 14:15:44 PM
Contract Manager Approval	dgrimm	07/09/2013 16:16:39 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:04:31 AM
BOE Agenda Approval	cwatson	07/12/2013 13:28:26 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 CONTRACT1. Contract Number: **14680**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	GARY GUY WILSON PROFESSNL CORP
Agency Code:	082	Contractor Name:	GARY GUY WILSON PROFESSNL CORP
Appropriation Unit:	All Appropriations	Address:	4945 W PATRICK LN
Is budget authority available?:	Yes	City/State/Zip:	LAS VEGAS, NV 89118
If "No" please explain:	Not Applicable	Contact/Phone:	null702/876-0668
		Vendor No.:	T81107521
		NV Business ID:	NV19741002629

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: 74472

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Open Term**Contract description: **Code PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74472

6. NEW CONTRACT

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

Other basis for payment: progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

Code Plan Checking Services as required to ensure building safety and code compliance.

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

Professional Plan Checking 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 Applicableb. 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 this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 10:07:06 AM
Division Approval	dgrimm	07/09/2013 10:07:08 AM
Department Approval	dgrimm	07/09/2013 10:07:10 AM
Contract Manager Approval	dgrimm	07/09/2013 16:23:53 PM
Budget Analyst Approval	jrodrig9	07/12/2013 12:16:53 PM
BOE Agenda Approval	cwatson	07/12/2013 13:33:48 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14684**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: GARY GUY WILSON PROFESSNL CORP
Agency Code: 082	Contractor Name: GARY GUY WILSON PROFESSNL CORP
Appropriation Unit: All Appropriations	Address: 4945 W PATRICK LN
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89118
If "No" please explain: Not Applicable	Contact/Phone: null702/876-0668
	Vendor No.: T81107521
	NV Business ID: NV19741002629

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **74669**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **Access PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional accessibility plan checking services as required. SPWD Contract No. 74669

6. NEW CONTRACT

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

Other basis for payment: **Progress payments based on services provided**

II. JUSTIFICATION

7. What conditions require that this work be done?

Accessibility Plan Checking services to ensure building safety and code compliance.

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

Professional 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/08/2013 10:28:47 AM
Division Approval	dgrimm	07/08/2013 10:28:50 AM
Department Approval	dgrimm	07/08/2013 10:28:55 AM
Contract Manager Approval	dgrimm	07/09/2013 16:22:28 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:40:26 AM
BOE Agenda Approval	cwatson	07/12/2013 13:33:03 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: **14709**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	HYYTINEN, ROGER DBA HYYTINEN ENGINEERING
Agency Code:	082	Contractor Name:	HYYTINEN, ROGER DBA HYYTINEN ENGINEERING
Appropriation Unit:	All Appropriations	Address:	5458 LONGLEY LN STE B
Is budget authority available?:	Yes	City/State/Zip:	RENO, NV 89511
If "No" please explain:	Not Applicable	Contact/Phone:	null775/826-3019
		Vendor No.:	T80814890
		NV Business ID:	NV20111782953

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **PI Ck Serv**

5. Purpose of contract:

This is a new contract to provide professional structural plan checking services as required. SPWD Contract No. 73029

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00**

Other basis for payment: Progress payments

II. JUSTIFICATION

7. What conditions require that this work be done?

Structural Plan Checking Services to ensure building safety and code compliance.

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

Professional 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 16:06:31 PM
Division Approval	dgrimm	07/09/2013 16:06:34 PM
Department Approval	dgrimm	07/09/2013 16:06:37 PM
Contract Manager Approval	dgrimm	07/09/2013 16:13:05 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:21:53 PM
BOE Agenda Approval	cwatson	07/12/2013 08:48:01 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: **14678**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	INTERWEST CONSULTING GROUP INC
Agency Code:	082	Contractor Name:	INTERWEST CONSULTING GROUP INC
Appropriation Unit:	All Appropriations	Address:	1076 LINCOLN PL
Is budget authority available?:	Yes	City/State/Zip:	BOULDER, CO 80302-7236
If "No" please explain:	Not Applicable	Contact/Phone:	null303/444-0524
		Vendor No.:	T29030819
		NV Business ID:	NV20071166199

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: 74473

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **Code PI Chk**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74473.

6. NEW CONTRACT

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

Other basis for payment: progress payments based on services provided

II. JUSTIFICATION

7. What conditions require that this work be done?

Code Plan Checking services to ensure building safety and code compliance.

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

Professional Plan Checking 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 09:05:23 AM
Division Approval	dgrimm	07/09/2013 09:05:25 AM
Department Approval	dgrimm	07/09/2013 09:05:28 AM
Contract Manager Approval	dgrimm	07/09/2013 16:14:44 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:30:01 PM
BOE Agenda Approval	cwatson	07/12/2013 08:45:19 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14690**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: NAFFA INTERNATIONAL INC
Agency Code: 082	Contractor Name: NAFFA INTERNATIONAL INC
Appropriation Unit: All Appropriations	Address: 7571 N REMINGTON AVE STE 101
Is budget authority available?: Yes	City/State/Zip: FRESNO, CA 93711
If "No" please explain: Not Applicable	Contact/Phone: null559/448-9839
	Vendor No.: T29007503
	NV Business ID: NV20111370940

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **74648**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Open Term**

Contract description: **PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74648.

6. NEW CONTRACT

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

Other basis for payment: **Progress payments based on services provided**

II. JUSTIFICATION

7. What conditions require that this work be done?

Code Plan checking services required to ensure building safety and code compliance.

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

Professional Plan Checking 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: **Professional Service (As defined in NAC 333.150)**

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

Demonstrated the required expertise for this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/08/2013 14:48:27 PM
Division Approval	dgrimm	07/08/2013 14:48:30 PM
Department Approval	dgrimm	07/08/2013 14:48:33 PM
Contract Manager Approval	dgrimm	07/09/2013 16:20:05 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:06:15 AM
BOE Agenda Approval	cwatson	07/12/2013 13:29:39 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **14685**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	PLAN CHECK ASSOCIATES INC
Agency Code:	082	Contractor Name:	PLAN CHECK ASSOCIATES INC
Appropriation Unit:	All Appropriations	Address:	PC ASSOCIATES 3419 E CHAPMAN AVE # 480
Is budget authority available?:	Yes	City/State/Zip:	ORANGE, CA 92869-3812
If "No" please explain:	Not Applicable	Contact/Phone:	null714/730-0933
		Vendor No.:	T29005352
		NV Business ID:	NV20051421893

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: 74474

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retrospective? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Open Term**Contract description: **Code PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74474

6. NEW CONTRACT

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

Other basis for payment: Progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

Professional Code Plan Checking services as required to ensure building safety and code compliance.

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

Professional Plan Checking 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 Applicableb. 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 this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/08/2013 10:55:06 AM
Division Approval	dgrimm	07/08/2013 10:55:08 AM
Department Approval	dgrimm	07/08/2013 10:55:12 AM
Contract Manager Approval	dgrimm	07/09/2013 16:14:19 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:27:56 PM
BOE Agenda Approval	cwatson	07/12/2013 08:46:17 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14707**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: PURCELL KROB ELECTRICAL PROFESSIONAL
Agency Code: 082	Contractor Name: PURCELL KROB ELECTRICAL PROFESSIONAL
Appropriation Unit: All Budget Accounts - Category 10	Address: PK ELECTRICAL INC 681 SIERRA ROSE DR STE B RENO, NV 89511
Is budget authority available?: No	City/State/Zip: RENO, NV 89511
If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD, but all funding and contractor payment responsibilities will remain with the initiating agency. For this contract the funding and expenditure authority will be the Account 3650, Military; expenditure category 10, Weekend Training site.	Contact/Phone: null775/826-9010
	Vendor No.: T81016802
	NV Business ID: NV19961128650

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

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

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

Agency Reference #: **80451**

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2017**

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

4. Type of contract: **Contract**

Contract description: **Arch/Eng Serv**

5. Purpose of contract:

This is a new contract to provide a lightning system design for the Nevada Army National guard Munitions Bunker in Carson City, NV. SPWD Project No. 13-A026; Contract No. 80451

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,500.00**

Other basis for payment: **monthly progress payments on services provided**

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency requested

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

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/09/2013 15:36:34 PM
Division Approval	dgrimm	07/09/2013 15:36:36 PM
Department Approval	dgrimm	07/09/2013 15:36:39 PM
Contract Manager Approval	dgrimm	07/09/2013 16:13:30 PM
Budget Analyst Approval	jrodrig9	07/11/2013 19:25:08 PM
BOE Agenda Approval	cwatson	07/12/2013 08:43:06 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **14686**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: WILLDAN ENGINEERING INC
Agency Code: 082	Contractor Name: WILLDAN ENGINEERING INC
Appropriation Unit: All Appropriations	Address: 2401 E KATELLA AVE STE 300
Is budget authority available?: Yes	City/State/Zip: ANAHEIM, CA 92806-5909
If "No" please explain: Not Applicable	Contact/Phone: null714/940-6300
	Vendor No.: T27029860
	NV Business ID: NV19901017345

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Varies depending on project

Agency Reference #: **74477**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **08/2013**Retrospective? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Open Term**Contract description: **PI Chk Serv**

5. Purpose of contract:

This is a new contract to provide professional code plan checking services as required. SPWD Contract No. 74477

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00**Other basis for payment: **Progress payments based on services provided.****II. JUSTIFICATION**

7. What conditions require that this work be done?

Code Plan Checking services required to ensure building safety and code compliance.

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

Professional Plan Checking 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 Applicableb. 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 this type of work.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

SPWD, currently and/or in the past for various amounts with satisfactory results.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgrimm	07/08/2013 11:45:18 AM
Division Approval	dgrimm	07/08/2013 11:45:21 AM
Department Approval	dgrimm	07/08/2013 11:45:24 AM
Contract Manager Approval	dgrimm	07/09/2013 16:20:40 PM
Budget Analyst Approval	jrodrig9	07/12/2013 11:08:33 AM
BOE Agenda Approval	cwatson	07/12/2013 13:30:28 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14708**

Agency Name: GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name: BOARD OF REGENTS-UNR
Agency Code: 102	Contractor Name: BOARD OF REGENTS-UNR
Appropriation Unit: 1526-19	Address: UNR CONTROLLERS OFFICE MAIL STOP 0124
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89557-0025
If "No" please explain: Not Applicable	Contact/Phone: Sandy Haslem 775/784-4062
	Vendor No.: D35000816
	NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? **2014**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % DETR (State Career Enhancement Prg Funds)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **Yes**

If "Yes", please explain

Although GOED's contract with DETR was completed to facilitate the continuation of this training program, relatively new GOED staff members were unaware of this contract with NVIE to reimburse training actual training costs.

3. Termination Date: **06/30/2014**

Contract term: **364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Training Program**

5. Purpose of contract:

This is a new interlocal agreement that continues to provide pass-through funding from DETR to NSHE Nevada Industry Excellence for training programs for Nevada businesses.

6. NEW CONTRACT

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

Other basis for payment: **Per training session as they are approved and initiated.**

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate.

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

GOED does not have the expertise to provide this type of training.

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

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 Interlocal Contracts

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Currently, work is satisfactory.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:55:29 PM
Division Approval	swoodbur	07/11/2013 15:55:31 PM
Department Approval	swoodbur	07/11/2013 15:55:32 PM
Contract Manager Approval	ckiser	07/16/2013 10:20:18 AM
Budget Analyst Approval	ekin4	07/16/2013 16:08:45 PM
BOE Agenda Approval	jborrowm	07/16/2013 16:45:00 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14695**

Agency Name:	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name:	ECONOMIC DEVELOPMENT AUTHORITY
Agency Code:	102	Contractor Name:	ECONOMIC DEVELOPMENT AUTHORITY
Appropriation Unit:	1526-15	Address:	OF WESTERN NEVADA / EDAWN 5190 NEIL RD STE 110
Is budget authority available?:	Yes	City/State/Zip:	RENO, NV 89502-8533
If "No" please explain:	Not Applicable	Contact/Phone:	mIKE kAZMIERSKI 775/829-3727
		Vendor No.:	T80657720
		NV Business ID:	NV19821008939

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,200,000.00**

Payment for services will be made at the rate of \$150,000.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

9. Were quotes or proposals solicited? **Yes**

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

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

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:49:10 PM
Division Approval	swoodbur	07/11/2013 15:49:11 PM
Department Approval	swoodbur	07/11/2013 15:49:13 PM
Contract Manager Approval	swoodbur	07/11/2013 15:49:14 PM
Budget Analyst Approval	ekin4	07/15/2013 16:09:37 PM
BOE Agenda Approval	jborrowm	07/16/2013 09:50:11 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: **14714**

Agency Name:	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name:	HUMBOLDT, COUNTY OF
Agency Code:	102	Contractor Name:	HUMBOLDT, COUNTY OF
Appropriation Unit:	1526-15	Address:	HUMBOLDT COUNTY TREASURER 50 W 5TH ST RM 203
Is budget authority available?:	Yes	City/State/Zip:	WINNEMUCCA, NV 89445
If "No" please explain:	Not Applicable	Contact/Phone:	null775/623-6444
		Vendor No.:	T40139500
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

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

Payment for services will be made at the rate of \$12,500.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal received that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:56:45 PM
Division Approval	swoodbur	07/11/2013 15:56:46 PM
Department Approval	swoodbur	07/11/2013 15:56:48 PM
Contract Manager Approval	ckiser	07/19/2013 08:00:54 AM
Budget Analyst Approval	ekin4	07/19/2013 08:33:19 AM
BOE Agenda Approval	sbrown	07/19/2013 09:25:38 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: **14696**

Agency Name: **GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT**

Agency Code: **102**
Appropriation Unit: **1526-15**

Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: Highway 95 Regional Development Authority
Contractor Name: **Highway 95 Regional Development Authority**
Address:
City/State/Zip: **Fallon, NV 89406**
Contact/Phone: Ken Tedford 775-423-0167
Vendor No.: T40266600
NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
Anticipated BOE meeting date: 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**
Contract term: **1 year and 333 days**

4. Type of contract: **Contract**
Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$230,000.00**
Payment for services will be made at the rate of \$28,750.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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

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

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal that was responsive to RFP 13-03

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 11:59:49 AM
Division Approval	swoodbur	07/11/2013 11:59:51 AM
Department Approval	swoodbur	07/11/2013 11:59:54 AM
Contract Manager Approval	ckiser	07/17/2013 12:46:29 PM
Budget Analyst Approval	ekin4	07/17/2013 15:51:02 PM
BOE Agenda Approval	jborrowm	07/18/2013 08:52:37 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: **14689**

Agency Name:	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name:	LINCOLN COUNTY REGIONAL DEVELOPMENT AUTHORITY
Agency Code:	102	Contractor Name:	LINCOLN COUNTY REGIONAL DEVELOPMENT AUTHORITY
Appropriation Unit:	1526-15	Address:	PO BOX 90
Is budget authority available?:	Yes	City/State/Zip:	PIOCHE, NV 89043
If "No" please explain:	Not Applicable	Contact/Phone:	null775-315-3544
		Vendor No.:	T81032726
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$110,000.00**

Payment for services will be made at the rate of \$13,750.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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?

Contractor's proposal was the only proposal that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 03/01/2013

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 11:48:27 AM
Division Approval	swoodbur	07/11/2013 11:48:31 AM
Department Approval	swoodbur	07/11/2013 11:48:35 AM
Contract Manager Approval	swoodbur	07/11/2013 11:48:38 AM
Budget Analyst Approval	ekin4	07/15/2013 16:11:46 PM
BOE Agenda Approval	jborrowm	07/16/2013 09:39:00 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14694**

Agency Name: **GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT**

Agency Code: **102**
Appropriation Unit: **1526-15**

Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **NORTHERN NEVADA DEVELOPMENT**

Contractor Name: **NORTHERN NEVADA DEVELOPMENT**

Address: **AUTHORITY
704 W NYE LN STE 201
CARSON CITY, NV 89703**

Contact/Phone: **Robert C. Hooper 775/883-4413**

Vendor No.: **T80433460**

NV Business ID: **NV19811008120**

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$470,000.00**

Payment for services will be made at the rate of \$58,750.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:47:42 PM
Division Approval	swoodbur	07/11/2013 15:47:44 PM
Department Approval	swoodbur	07/11/2013 15:47:46 PM
Contract Manager Approval	swoodbur	07/11/2013 15:47:47 PM
Budget Analyst Approval	ekin4	07/15/2013 16:10:49 PM
BOE Agenda Approval	jborrowm	07/16/2013 09:46:48 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14692**

Agency Name: GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name: NYE, COUNTY OF
Agency Code: 102	Contractor Name: NYE, COUNTY OF
Appropriation Unit: 1526-15	Address: NYE COUNTY TREASURER PO BOX 473
Is budget authority available?: Yes	City/State/Zip: TONOPAH, NV 89049
If "No" please explain: Not Applicable	Contact/Phone: null775/482-8194
	Vendor No.: T80044560X
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding to regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

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

Payment for services will be made at the rate of \$20,000.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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?

Contractor's proposal was the only one submitted/received in response to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 11:51:06 AM
Division Approval	swoodbur	07/11/2013 11:51:08 AM
Department Approval	swoodbur	07/11/2013 11:51:11 AM
Contract Manager Approval	ckiser	07/17/2013 14:30:54 PM
Budget Analyst Approval	ekin4	07/17/2013 16:04:24 PM
BOE Agenda Approval	jborrowm	07/18/2013 08:50:59 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14700**

Agency Name: **GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT**

Agency Code: **102**
Appropriation Unit: **1526-15**

Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **Northeastern Nevada Regional Development Authority**
Contractor Name: **Northeastern Nevada Regional Development Authority**

Address:
City/State/Zip: **ELKO, NV 89801**

Contact/Phone: **null775/738-2100**
Vendor No.: **T81072742**
NV Business ID: **NV198221008939**

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
Anticipated BOE meeting date: **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**
Contract term: **1 year and 333 days**

4. Type of contract: **Contract**
Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$160,000.00**
Payment for services will be made at the rate of \$20,000.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible.

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

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

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 provider; satisfactory work.

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:51:33 PM
Division Approval	swoodbur	07/11/2013 15:51:35 PM
Department Approval	swoodbur	07/11/2013 15:51:36 PM
Contract Manager Approval	swoodbur	07/11/2013 15:51:38 PM
Budget Analyst Approval	ekin4	07/15/2013 16:06:56 PM
BOE Agenda Approval	jborrowm	07/16/2013 09:57:00 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14713**

Agency Name: GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	Legal Entity Name: Great Basin Rural Development Authority
Agency Code: 102	Contractor Name: WHITE PINE COUNTY ECONOMIC DIVERSIFICATION PROGRAM
Appropriation Unit: 1526-15	Address: 953 CAMPTON
Is budget authority available?: Yes	City/State/Zip: ELY, NV 89301
If "No" please explain: Not Applicable	Contact/Phone: Don Vetter 775-425-9271
	Vendor No.: T80950311
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new contract that continues funding for regional development authorities to aid, promote, and encourage the economic development of Nevada. Contract amounts include funding for all associated costs, including, but not limited to, the dissemination of program information, marketing, grant writing, accounting services, legal services, travel and training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$220,000.00**

Payment for services will be made at the rate of \$27,500.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory mandate to diversify Nevada's economy.

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

Not feasible

9. Were quotes or proposals solicited? **Yes**

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

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

b. Solicitation Waiver: **Not Applicable**

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

Vendor's proposal was the only proposal that was responsive to RFP 13-03.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 04/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

Yes If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Current provider; satisfactory work.

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	swoodbur	07/11/2013 15:58:25 PM
Division Approval	swoodbur	07/11/2013 15:58:26 PM
Department Approval	swoodbur	07/11/2013 15:58:31 PM
Contract Manager Approval	ckiser	07/16/2013 12:33:47 PM
Budget Analyst Approval	ekin4	07/16/2013 12:43:48 PM
BOE Agenda Approval	jborrowm	07/16/2013 17:04:18 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14766**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: NATIONAL ASSN OF STATE AUDITOR
Agency Code: 180	Contractor Name: NATIONAL ASSN OF STATE AUDITOR
Appropriation Unit: 1365-26	Address: COMPTROLLERS & TREASURER
Is budget authority available?: Yes	449 LEWIS HARGETT CIR STE 290
If "No" please explain: Not Applicable	City/State/Zip: LEXINGTON, KY 40503-3590
	Contact/Phone: null859/276-1147
	Vendor No.: T80856960
	NV Business ID: NA
To what State Fiscal Year(s) will the contract be charged? 2014	

What is the source of funds that will be used to 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Contract**

Contract description: **Benchmark Study**

5. Purpose of contract:

This is a new contract to provide evaluation and benchmarking of state functions in finance, human resources, procurement and information technology. This benchmark study will provide analysis to determine where deficiencies exist, where the state is doing a good job and provide comparisons with other states.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$349,685.00**

Other basis for payment: Payments will be made according to the payment schedule in the contract

II. JUSTIFICATION

7. What conditions require that this work be done?

The Advantage HR and Advantage Financial systems were developed in the 1980's and implemented in Nevada in the late 1990's. Many perceived deficiencies exist and this study will establish where there are real deficiencies in the systems and processes used in Nevada.

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

State employees are not trained or have the time to perform this type of analysis

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

Was the solicitation (RFP) done by the 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 #: 130702

Approval Date: 07/17/2013

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other **Per the Secretary of State's Office, NASACT is exempt as it is a national association of state auditors, comptrollers and treasurers.**

No work is done in Nevada

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

Yes

16. 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.

Not applicable

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

No b. If "NO", please explain.

Not applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	csweeney	07/29/2013 15:13:30 PM
Division Approval	csweeney	07/29/2013 15:13:34 PM
Department Approval	csweeney	07/29/2013 15:13:36 PM
Contract Manager Approval	csweeney	07/29/2013 15:13:40 PM
Budget Analyst Approval	ekin4	07/30/2013 07:53:56 AM
BOE Agenda Approval	jborrowm	07/30/2013 10:20:24 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14523**

Agency Name: **ENTERPRISE IT SERVICES**
 Agency Code: **180**
 Appropriation Unit: **1373-26**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER INC**
 Contractor Name: **GARTNER INC**
 Address: **56 TOP GALLANT RD**
 City/State/Zip: **STAMFORD, CT 06902**
 Contact/Phone: null239/561-4839
 Vendor No.: T80976121
 NV Business ID: NV19941112701

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to 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 **07/01/2013**
 Anticipated BOE meeting date 08/2013

Retroactive? **Yes**
 If "Yes", please explain

Due to contract revisions, negotiations and joining in the City of Las Vegas contract, the June or July BOE deadlines could not be met.

3. Termination Date: **06/30/2015**
 Contract term: **1 year and 364 days**

4. Type of contract: **Other (include description): Joinder per NRS 332.195**
 Contract description: **Research Services**

5. Purpose of contract:

This is a new contract that continues subscription-based research and related services for the Division of Enterprise Information Technology Service's (EITS) professional staff, including providing information about best practices related to cloud email services, document production, mobile application development, enterprise software replacement, network design, and systems strategy. Pursuant to NRS 332.195, the vendor has authorized EITS to join or use the City of Las Vegas' contract with the Gartner Corporation.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$160,900.00**
 Other basis for payment: Year 1 annual fee is \$78,000; Year 2 annual fee is \$82,000; Invoiced in advance and payable 30 days from date of invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

First, both Executive and Legislative branches recently have expressed interest in Information Technology consolidation beyond that recommended in the Governor's Budget (now approved by relevant Legislative Committees). During hearings, Gartner was identified as a continuing source of expertise on IT consolidation in both the government and private sectors. Second, technology continues to develop rapidly. Gartner's breadth of expertise will continue to avoid false starts as the State implements email cloud and document production, commences development of mobile applications, contemplates replacement of key enterprise software, and considers the most efficient design of future networks.

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

State employees do not have the expertise.

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 332.195 which allows the State of Nevada to join or use contracts of local governments located within or outside the State with the authorization of the contracting vendor.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	csweeney	06/03/2013 14:56:50 PM
Division Approval	csweeney	06/03/2013 14:56:58 PM
Department Approval	csweeney	06/03/2013 14:57:02 PM
Contract Manager Approval	csweeney	07/15/2013 07:42:38 AM
Budget Analyst Approval	ekin4	07/16/2013 15:12:12 PM
BOE Agenda Approval	jborrowm	07/17/2013 10:55:46 AM
BOE Final Approval	Pending	

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This contractor is currently under a revenue contract with EITS with satisfactory results

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	capple	07/01/2013 08:50:46 AM
Division Approval	capple	07/01/2013 08:50:50 AM
Department Approval	capple	07/01/2013 08:50:53 AM
Contract Manager Approval	bbohm	07/08/2013 06:26:23 AM
Budget Analyst Approval	ekin4	07/12/2013 11:59:49 AM
BOE Agenda Approval	jborrowm	07/16/2013 10:11:34 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: **14650**

Agency Name: **ADMIN - ENTERPRISE IT SERVICES**
Agency Code: **180**
Appropriation Unit: **1388-00**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **LAS VEGAS METROPOLITAN POLICE**
Contractor Name: **LAS VEGAS METROPOLITAN POLICE**
Address: **DEPT
PO BOX 98554**
City/State/Zip: **LAS VEGAS, NV 89193-8554**
Contact/Phone: Sergio Garcia 702 828-3870
Vendor No.: T80036040
NV Business ID: Not Applicable

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: 5572

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2013**

Anticipated BOE meeting date 08/2014

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2017**

Contract term: **3 years and 273 days**

4. Type of contract: **Revenue Contract**

Contract description: **Rack Space Lease**

5. Purpose of contract:

This is a new revenue contract for two new rack spaces at Apex Peak in Clark County with the Las Vegas Metro Police Department.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,248.48**

Other basis for payment: FY 2014, \$3,049.70; FY 2015, \$4,066.26; FY 2016, \$4,066.26; FY 2017, \$4,066.26

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue generating contract

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

This is a revenue generating contract

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

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

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

Not Applicable

b. Solicitation Waiver: **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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	capple	07/10/2013 09:43:45 AM
Division Approval	capple	07/10/2013 09:43:52 AM
Department Approval	capple	07/10/2013 09:43:55 AM
Contract Manager Approval	bbohm	07/17/2013 12:05:33 PM
Budget Analyst Approval	ekin4	07/18/2013 10:36:43 AM
BOE Agenda Approval	sbrown	07/18/2013 16:22:45 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14652**

Agency Name: ADMIN - ENTERPRISE IT SERVICES	Legal Entity Name: ITS Partners, LLC
Agency Code: 180	Contractor Name: ITS Partners, LLC
Appropriation Unit: 1389-40	Address: 4079 Park East Court
Is budget authority available?: Yes	City/State/Zip: Grand Rapids, MI 49546
If "No" please explain: Not Applicable	Contact/Phone: null877-258-4747
	Vendor No.:
	NV Business ID: NV20101675922
To what State Fiscal Year(s) will the contract be charged?	2014

What is the source of funds that will be used to 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Contract**

Contract description: **Integration Services**

5. Purpose of contract:

This is a new contract to provide configuration and integration services for the Altiris Endpoint Security and Management Solution. Contractor will also provide certified training in the state's Altiris deployment. Both services are a requirement of the state's deployment of Altiris.

6. NEW CONTRACT

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

Payment for services will be made at the rate of \$10,000.00 per week

II. JUSTIFICATION

7. What conditions require that this work be done?

Agencies' security and reporting. Vendor will provide configuration and integration services for the Altiris Endpoint Security and Management Solution, as well as provide certified training in the state's Altiris deployment.

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

State employees do not have the knowledge or experience and are not certified in the implementation or training of this system.

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

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

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 130602

Approval Date: 06/04/2013

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	csweeney	07/03/2013 09:01:53 AM
Division Approval	csweeney	07/03/2013 09:01:57 AM
Department Approval	csweeney	07/03/2013 09:02:00 AM
Contract Manager Approval	csweeney	07/03/2013 09:02:04 AM
Budget Analyst Approval	ekin4	07/12/2013 16:07:42 PM
BOE Agenda Approval	jborrowm	07/16/2013 10:07:49 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: **14610**

Agency Name: OFFICE OF VETERAN'S SERVICES Agency Code: 240 Appropriation Unit: 2561-04 Is budget authority available?: Yes If "No" please explain: Not Applicable To what State Fiscal Year(s) will the contract be charged? 2014	Legal Entity Name: G. Brent Dennis, Inc. Contractor Name: Brent Dennis Address: 555 California St. City/State/Zip: Boulder City, NV 89005 Contact/Phone: Brent Dennis 702-293-5945 Vendor No.: NV Business ID: NV20011501973
---	--

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

General Funds	0.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	66.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	34.00 % Patient Medical Services Fees

2. Contract start date:

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

Anticipated BOE meeting date: 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **04/30/2014**

Contract term: **272 days**

4. Type of contract: **Contract**

Contract description: **Psychologist**

5. Purpose of contract:

This is a new contract to provide ongoing psychologist services to the Nevada State Veterans Home (NSVH). The Home has determined that the services of a psychologist are necessary to provide consulting on psychological issues, training for staff on handling residents, and to assist staff to coordinate treatment of residents.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,000.00**

Payment for services will be made at the rate of \$125.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

NSVH has residents who need additional psychological services and NSVH staff need additional training on how to care for these residents.

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

The State does not have psychologists available to assist NSVH staff.

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

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

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

Not Applicable

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

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

Knowledge of veterans problems and familiarity with residents and staff at NSVH.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

No b. If "No", please explain:

Incorporated name used for legal purposes.

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

Yes

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

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jpalm5	07/02/2013 17:42:08 PM
Division Approval	jpalm5	07/02/2013 17:42:18 PM
Department Approval	jpalm5	07/02/2013 17:42:23 PM
Contract Manager Approval	mnobles	07/03/2013 08:38:48 AM
Budget Analyst Approval	jrodrig9	07/03/2013 14:05:58 PM
BOE Agenda Approval	cwatson	07/12/2013 08:48:52 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14649**

Agency Name: NDE - DEPARTMENT OF EDUCATION	Legal Entity Name: WestEd
Agency Code: 300	Contractor Name: WestEd
Appropriation Unit: 2612-04	Address: 730 Harrison St
Is budget authority available?: Yes	City/State/Zip: San Francisco, CA 84107
If "No" please explain: Not Applicable	Contact/Phone: null415-615-3105
	Vendor No.: T81012500
	NV Business ID: NV20111743662

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

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

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

2. Contract start date:

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

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Field Testing**

5. Purpose of contract:

This is a new contract to design and conduct a field test, develop, conduct and report on a validation study of the Nevada Educator Performance Framework.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$320,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

SB407 provides for a validation study of the statewide performance evaluation system.

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

This is a state performance evaluation framework and is not appropriate for the validation study to be conducted by the Department of Education or by any State agency. As the technical assistance arm of the West Comprehensive Center's Educator Effectiveness Initiative, West-Ed has experience and deep content expertise to conduct a validation study that is technically sound and legally defensible.

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#3057, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 05/08/2013 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

They have been engaged under contract since 1998 with the Nevada Department of Education. The quality of service has been excellent.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jteska	07/02/2013 16:04:05 PM
Division Approval	jteska	07/02/2013 16:04:08 PM
Department Approval	jteska	07/02/2013 16:04:11 PM
Contract Manager Approval	dembro	07/03/2013 08:58:40 AM
Budget Analyst Approval	sbrown	07/08/2013 14:30:39 PM
BOE Agenda Approval	sbrown	07/08/2013 14:32:01 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14665**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2676-78**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Career and Technical Education Consortium of States, Inc.

Contractor Name: **Career and Technical Education Consortium of States, Inc.**Address: **1866 Southern Ln**City/State/Zip: **Decatur, GA 30033-4033**

Contact/Phone: null404-679-4501

Vendor No.: T27027121

NV Business ID: NV20131384237

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2014**Contract term: **333 days**4. Type of contract: **Contract**Contract description: **Skill Standards**

5. Purpose of contract:

This is a new contract to provide analysis, review and development services to fully implement Nevada's state system of student career and technical skill standards and assessments. Develop and pilot assessments for each of the sets of validated state standards.

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?

Nevada must implement end-of-program assessments to bring Nevada students into compliance with Nevada's Carl D. Perkins IV Federal Plan for State reporting. End-of-program assessments are also used to measure skill attainment for the purposes of program improvement

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies or employees do not have the experience or resources to develop and maintain secure third-party online assessment systems.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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 #: 130403

Approval Date: 04/10/2013

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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. Not Applicable

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jteska	07/02/2013 16:03:38 PM
Division Approval	jteska	07/02/2013 16:03:42 PM
Department Approval	jteska	07/02/2013 16:03:46 PM
Contract Manager Approval	dembro	07/03/2013 08:58:15 AM
Budget Analyst Approval	sbrown	07/11/2013 09:45:50 AM
BOE Agenda Approval	sbrown	07/11/2013 09:48:29 AM
BOE Final Approval	Pending	

This emergency arose when the Authority learned on Thursday, May 9, 2013 that we have been deemed to be a Local Education Agency (LEA) beginning July 1, 2013 for purposes of directing the proportionate share of federal special education funds (IDEA) to charter schools it sponsors. The complexity of the compliance, internal controls and reporting for special education requires us to engage a contractor with extensive expertise in federal and state laws governing the education of pupils with a disability and the implementation of special education programming within a school district or other local education agency (LEA). The contractor will assist the Authority, in accordance with state and federal law, in the implementation of monitoring and enforcement activities to support positive outcomes for students with disabilities. The contractor will work collaboratively with Authority staff and schools to provide legal analysis, a memorandum of understanding, and ensuring the Authority meet the program requirements under Part B of the Individuals with Disability Education Act (IDEA).

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of knowledge of federal Special Education law.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

The contractor has extensive expertise in federal laws governing the education of pupils with a disability and the implementation of special education programming for charter schools.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bflanner	07/19/2013 10:33:04 AM
Division Approval	bflanner	07/19/2013 10:33:09 AM

Department Approval	bflanner	07/19/2013 10:33:15 AM
Contract Manager Approval	bflanner	07/19/2013 10:33:19 AM
Budget Analyst Approval	sbrown	07/19/2013 13:38:29 PM
BOE Agenda Approval	sbrown	07/19/2013 13:38:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14445**

Agency Name:	HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	Legal Entity Name:	TEACHING STRATEGIES LLC
Agency Code:	400	Contractor Name:	TEACHING STRATEGIES LLC
Appropriation Unit:	3150-17	Address:	7101 WISCONSIN AVENUE, STE 700
Is budget authority available?:	No	City/State/Zip	BETHESDA, MD 20814-4814
If "No" please explain: Pending work program C27269 approval at the August IFC meeting. Senate Bill 486 provides for \$1,500,000 to the Department of Administration. The funds will subgrant in full to the Department of Health and Human Services, Director's Office. A new expenditure category will be created; however, one does not exist at this time to properly reflect in CETS. The Director's Office will rename Category 18 and use it to isolate these funds.		Contact/Phone:	Jonah Stuart 301/634-0818

Vendor No.: T32002305
NV Business ID: NV20131281933

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2015**Contract term: **1 year and 333 days**4. Type of contract: **Contract**Contract description: **Licensing & Training**

5. Purpose of contract:

This is a new contract to implement a program to pilot Teaching Strategies Gold (TSG) as Nevada's Kindergarten Inventory of Development Statewide (Silver State Kids). TSG will be used by licensed kindergarten teachers in the first four to six weeks of the school year. The contract provides for the per-child portfolio licensing fees, implementation support fees, and training of trainers. Publicly funded programs serving children from birth to age five will also be included allowing tracking of data linked to the state longitudinal data system. Senate Bill 486 provides the appropriations for a pilot program for the assessment of school readiness. This contract will satisfy the first stage of the requirements in the bill.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$686,625.00**

Other basis for payment: Upon receipt and approval of invoices as submitted at a cost of \$9.25 per child portfolio with 21,500 portfolios in SFY14 for \$198,875 and 43,000 portfolios in SFY15 for \$397,750; \$12,000 for licensing fees in SFY14 and \$18,000 for licensing fees in SFY15; and \$60,000 to provide training in SFY15 with a total not-to-exceed amount of \$686,625.

II. JUSTIFICATION

7. What conditions require that this work be done?

Senate Bill 486 provides appropriations for a pilot program for the assessment of school readiness. This contract will satisfy the initial stage of the requirements of the bill.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not able to provide the needed per-child licensing for the pilot program, nor are they able to provide implementation support or training.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 332.195 Joinder or mutual use of contracts by governmental entities.

1. A governing body or its authorized representative and the State of Nevada may join or use the contracts of local governments located within or outside this State with the authorization of the contracting vendor. The originally contracting local government is not liable for the obligations of the governmental entity which joins or uses the contract.

2. A governing body or its authorized representative may join or use the contracts of the State of Nevada or another state with the authorization of the contracting vendor. The State of Nevada or other state is not liable for the obligations of the local government which joins or uses the contract.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

bvale1

05/24/2013 14:22:58 PM

Division Approval	bvale1	07/30/2013 18:16:32 PM
Department Approval	ecreceli	07/31/2013 11:57:22 AM
Contract Manager Approval	bvale1	08/01/2013 14:40:13 PM
Budget Analyst Approval	nhovden	08/01/2013 14:41:06 PM
BOE Agenda Approval	nhovden	08/01/2013 14:41:23 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14585**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	PGAL LLC
Agency Code:	402	Contractor Name:	PGAL LLC
Appropriation Unit:	3279-07	Address:	3379 OQUENDO RD
Is budget authority available?:	Yes	City/State/Zip:	LAS VEGAS, NV 89118-3197
If "No" please explain:	Not Applicable	Contact/Phone:	null702/435-4448
		Vendor No.:	T29003284
		NV Business ID:	NV20021118384

To what State Fiscal Year(s) will the contract be charged? **2014-2016**

What is the source of funds that 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? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2015**Contract term: **2 years and 152 days**4. Type of contract: **Contract**Contract description: **Engineering Services**

5. Purpose of contract:

This is a new contract to provide architectural and engineering design services for various renovations of the Administration Building and Building 1306 at Desert Regional Center. The contract also provides for the possibility of future projects as needs are identified.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00**

Other basis for payment: Payable upon invoice per 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. Several existing buildings and offices at Desert Regional Center need to be reconfigured in order to accommodate changing needs of the agency.

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? **No**Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

2009 - Desert Regional Center
2013 - College of Southern Nevada

The quality of service is verified to be satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dhanse6	06/06/2013 14:22:46 PM
Division Approval	rhage1	06/10/2013 15:50:02 PM
Department Approval	ecreceli	06/25/2013 16:52:49 PM
Contract Manager Approval	dhanse6	06/27/2013 14:36:22 PM
Budget Analyst Approval	eobrien	07/01/2013 09:43:09 AM
BOE Agenda Approval	nhovden	07/22/2013 15:26:28 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14080**

Agency Name: HEALTH CARE FINANCING & POLICY	Legal Entity Name: CLARK, COUNTY OF
Agency Code: 403	Contractor Name: CLARK, COUNTY OF
Appropriation Unit: 3157-00	Address: CLARK COUNTY TREASURER 500 S GRAND CENTRAL PKWY
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89155-1220
If "No" please explain: Not Applicable	Contact/Phone: null702/455-4326
	Vendor No.: T40087800
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Intergovernmental Transfer

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **Yes**

If "Yes", please explain

The previous contract expired on 6/30/13. Clark County and the State were negotiating the voluntary contribution share and did not come to an agreement until after the expiration of the previous contract.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Voluntary Cont.**

5. Purpose of contract:

This is a new contract that continues ongoing Inter-Governmental Transfers (IGT) from Clark County to the Division of Health Care Financing and Policy for the voluntary contributions which is calculated on the inpatient, outpatient, and Graduate Medical Education (GME) hospital services for the non-state publically owned and operated hospitals.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$25,201,536.00**

Other basis for payment: **Payments to be made quarterly**

II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state, government owned or operated hospitals. This agreement provides for the receipt of voluntary contributions from Clark County to pay the nonfederal 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:

This is a revenue contract between Clark County and the Division.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

With DHCFP during 2012-13 biennium. Service has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cmoriart	02/12/2013 11:04:43 AM
Division Approval	trooker	07/08/2013 17:21:31 PM
Department Approval	ecreceli	07/09/2013 14:45:14 PM
Contract Manager Approval	cmoriart	07/17/2013 15:42:55 PM
Budget Analyst Approval	sbrown	07/18/2013 16:22:06 PM
BOE Agenda Approval	sbrown	07/18/2013 16:22:10 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: 11049	Amendment Number: 2
Agency Name: HEALTH CARE FINANCING & POLICY	Legal Entity Name: CAPTIONS UNLIMITED OF NEVADA
Agency Code: 403	Contractor Name: CAPTIONS UNLIMITED OF NEVADA
Appropriation Unit: 3158-04	Address: INC
Is budget authority available?: Yes	PO BOX 20905
If "No" please explain: Not Applicable	RENO, NV 89515
	Contact/Phone: null775/746-3534
	Vendor No.: T81082135
	NV Business ID: NV19971149411

To what State Fiscal Year(s) will the contract be charged? **2011-2014**

What is the source of funds that 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 **07/01/2010**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2014**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Real Time Captioning**

5. Purpose of contract:

This is the second amendment to the original contract, which provides ongoing real time captioning services for staff that are hearing impaired. This amendment increases the maximum amount from \$140,000.00 to \$195,789.00 due to the increase in staff utilizing the services and also adds a Business Associate Addendum and contract budget to the attachments.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$80,000.00
2. Total amount of any previous contract amendments:	\$60,000.00
3. Amount of current contract amendment:	\$55,789.00
4. New maximum contract amount:	\$195,789.00

II. JUSTIFICATION

7. What conditions require that this work be done?

This service provides assistance to DHC FP employees who are hearing impaired and mandated by federal requirements for the Americans with Disabilities Act (ADA) to provide reasonable accommodations to employees with disabilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not qualified or certified to provide these services pursuant to NRS 656A.084 and NRS 656A.400.

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 has a longstanding contractual relationship with DHCFP since 2002. Their real-time captioning services are specialized and they're the only vendor who provide these services in the local area. Additionally, this vendor has an extensive macro dictionary of acronyms they developed over the years unique to our agency.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has been under contract with DHCFP since 2002. The quality of their service provided has been professional and satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a: Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cmoriart	05/23/2013 10:33:41 AM
Division Approval	trooker	07/02/2013 16:08:09 PM
Department Approval	ecreceli	07/02/2013 16:11:41 PM
Contract Manager Approval	cmoriart	07/08/2013 13:19:24 PM
Budget Analyst Approval	bberry	07/16/2013 10:38:45 AM
BOE Agenda Approval	jborrowm	07/17/2013 11:37:11 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14228**

Agency Name: HEALTH CARE FINANCING & POLICY	Legal Entity Name: Health Division, Family & Community Wellness Immunization Program
Agency Code: 403	Contractor Name: Health Division, Family & Community Wellness Immunization Program
Appropriation Unit: 3178-14	Address: 4150 Technology Way Suite 101
Is budget authority available?: Yes	City/State/Zip: Carson City, NV 89706
If "No" please explain: Not Applicable	Contact/Phone: null775-684-4229
	Vendor No.:
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

Negotiation of this contract was more time consuming than anticipated.

3. Termination Date: **06/30/2017**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **Immunizations**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing reimbursement to the Health Division for the indirect cost of/and Title XXI share of vaccines purchased for Nevada Checkup recipients. This reimbursement ensures uninsured and underinsured children of the state of Nevada are provided necessary immunizations.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,768,448.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada provides health coverage to children who are uninsured or underinsured. Immunizations are included in this health coverage. The Nevada Check Up program is administered by the Division of Health Care Financing and Policy.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Health Division is a State agency.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cmoriart	03/26/2013 16:17:40 PM
Division Approval	trooker	06/19/2013 18:23:36 PM
Department Approval	ecreceli	06/28/2013 11:31:13 AM
Contract Manager Approval	cmoriart	07/02/2013 12:04:57 PM
Budget Analyst Approval	nhovden	07/23/2013 13:51:02 PM
BOE Agenda Approval	nhovden	07/23/2013 13:51:07 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14393**Agency Name: **DHHS - PUBLIC HEALTH**Agency Code: **406**Appropriation Unit: **3162-08**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Board of Regents-UNSOM

Contractor Name: **Board of Regents-UNSOM**Address: **1664 N Virginia Street
M/S 1332**City/State/Zip: **Reno, NV 89557-1332**

Contact/Phone: Gail Smith 775-784-6003

Vendor No.: D35000816

NV Business ID: NV19981273600

To what State Fiscal Year(s) will the contract be charged? **2013-2015**

What is the source of funds that 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 #: C14045

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/18/2013**

Anticipated BOE meeting date 06/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was to start upon approval, however, these services were needed beginning March 18, 2013. We have several vacancies and current staff are spread very thin covering inpatient, patient observation unit POU, and medication clinic. The residency program assists in providing training and enables certain services to be performed on a 24-hour basis. As a result, services were provided prior to the approval of the contract to ensure continuity of care.

3. Termination Date: **06/30/2015**Contract term: **2 years and 104 days**4. Type of contract: **Interlocal Agreement**Contract description: **Psych Residency**

5. Purpose of contract:

This is a new interlocal agreement that continues ongoing psychiatric services outside regular operating hours to the Northern Nevada Adult Mental Health Services (NNAMHS) and Southern Nevada Adult Mental Health Services (SNAMHS). It provides a valuable training program for residents and enables services such as on-call, patient observation unit (POU), high risk rounds and psychiatric evaluations to be performed on a 24-hour basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,025,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency operates outpatient/inpatient programs requiring the services of psychiatrists. Pursuant to NRS 433.344 and NRS 436.123, when vacancies occur in the medical staff, contract psychiatrists are needed for adequate coverage.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Staff psychiatrists typically perform these functions. When vacancies occur, adequate coverage is required by the Joint Commission. In addition, the function provides valuable training experience to medical school residents.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

In accordance with NRS 277.180, the Division is authorized to contract with other governmental entities for the provision of services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with Southern Nevada Adult Mental Health Services and is providing satisfactory service.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a: Non-profit Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. Not Applicable

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	07/12/2013 08:35:30 AM
Division Approval	valpers	07/12/2013 08:35:35 AM
Department Approval	ecreceli	07/12/2013 12:15:47 PM
Contract Manager Approval	cschmid2	07/12/2013 13:17:52 PM
Budget Analyst Approval	bberry	07/16/2013 09:53:08 AM
BOE Agenda Approval	jborrowm	07/17/2013 11:31:19 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **12199** Amendment Number: **2**
 Agency Name: **HEALTH DIVISION** Legal Entity Name: **Access to Healthcare Network**
 Agency Code: **406** Contractor Name: **Access to Healthcare Network**
 Appropriation Unit: **3215-24** Address: **4001 S. Virginia St., Suite F**
 Is budget authority available?: **Yes** City/State/Zip: **Reno, NV 89502**
 If "No" please explain: **Not Applicable** Contact/Phone: **Sherri Rice 775-284-9079**
 Vendor No.: **T29014671**
 NV Business ID: **NV20061133335**

To what State Fiscal Year(s) will the contract be charged? **2012-2016**

What is the source of funds that will be used to pay the contractor? 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 #: **HD 11223**

2. Contract start date:
 a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2011**
 Anticipated BOE meeting date **07/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **07/31/2015**
 Contract term: **4 years**

4. Type of contract: **Contract**
 Contract description: **Ryan White Eligibili**

5. Purpose of contract:
This is the second amendment to the original contract, which provides processing of Health Insurance Continuation Program (HICP) claims to eligible Ryan White Part B clients. This amendment increases the maximum amount from \$874,472 to \$1,891,703 to cover the increase in Ryan White Part B clients in Southern Nevada.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$874,472.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$1,017,231.00
4. New maximum contract amount:	\$1,891,703.00

II. JUSTIFICATION

7. What conditions require that this work be done?
The State receives funding for the Ryan White CARE Act Program which mandates the funding be used to provide eligibility screening, and Health Insurance Continuation Program processing in Southern Nevada, for new and existing clients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
The State does not have the resources to perform this function.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

[Empty text box]

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: 01/28/2011 Anticipated re-bid date: 10/01/2104

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Access has been, and is currently, under contract to the Health Division, with satisfactory results.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a: Non-profit Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. Not Applicable

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	07/08/2013 13:23:39 PM
Division Approval	valpers	07/08/2013 13:23:41 PM
Department Approval	ecrecli	07/09/2013 08:58:31 AM
Contract Manager Approval	cschmid2	07/09/2013 09:37:59 AM
Budget Analyst Approval	bberry	07/10/2013 15:33:16 PM
BOE Agenda Approval	jborrowm	07/16/2013 14:54:00 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14672**

Agency Name: DHHS - PUBLIC HEALTH	Legal Entity Name: National Association of Chronic Disease Directors
Agency Code: 406	Contractor Name: National Association of Chronic Disease Directors
Appropriation Unit: 3219-00	Address: 2200 Century Parkway Suite 250
Is budget authority available?: Yes	City/State/Zip: Atlanta, GA 30345
If "No" please explain: Not Applicable	Contact/Phone: Slavomira Lacinova 770-458-7400
	Vendor No.:
	NV Business ID: NV20131223643

To what State Fiscal Year(s) will the contract be charged? **2013-2014**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 14072

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

There was a great deal of difficulty in negotiating the language of Nevada's contract document with the National Association of Chronic Disease Directors (NACDD), which was not helped by their reluctance to have to do any type of contractual document beyond their Memorandum of Understanding (Attachment AA).

3. Termination Date: **12/31/2013**

Contract term: **364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Conduct Survey**

5. Purpose of contract:

This is a new contract to incorporate questions about social determinants in the Nevada 2013 Behavioral Risk Factor Surveillance System (BRFSS).

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,500.00**

Payment for services will be made at the rate of \$13,500.00 per year

Other basis for payment: In full, no later than December 31, 2013

II. JUSTIFICATION

7. What conditions require that this work be done?

The NACDD requires that a survey be done to address the issue of how social determinants affect individual health. The State Biostatistician has the ability to perform the survey.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The work is being done 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: **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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. Not Applicable

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	07/08/2013 13:30:53 PM
Division Approval	valpers	07/08/2013 13:30:55 PM
Department Approval	ecrecli	07/11/2013 11:16:40 AM
Contract Manager Approval	cschmid2	07/11/2013 11:24:10 AM
Budget Analyst Approval	bberry	07/16/2013 13:23:20 PM
BOE Agenda Approval	jborrowm	07/17/2013 11:22:10 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14634**Agency Name: **HEALTH DIVISION**Agency Code: **406**Appropriation Unit: **3224-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Esmeralda County**Contractor Name: **Esmeralda County**Address: **233 Crook Street**City/State/Zip: **Goldfield, NV 89013**Contact/Phone: **null775-485-3406**Vendor No.: **T40277800**NV Business ID: **governmental entity**To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: **HD 14003**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**Anticipated BOE meeting date **08/2013**Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.
--

3. Termination Date: **06/30/2015**Contract term: **1 year and 364 days**4. Type of contract: **Revenue Contract**Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue contract for the state to promote individual and family health in the county utilizing the state's community health nurses.
--

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,554.00**

Payment for services will be made at the rate of \$4,788.00 per year

Other basis for payment: An estimated \$989 per State Fiscal Year (SFY) for TB and STD services, as required.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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?

Not Applicable

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/28/2013 15:59:16 PM
Division Approval	valpers	06/28/2013 15:59:18 PM
Department Approval	ecreceli	07/01/2013 11:55:08 AM
Contract Manager Approval	cschmid2	07/03/2013 08:29:12 AM
Budget Analyst Approval	eobrien	07/03/2013 08:36:44 AM
BOE Agenda Approval	nhovden	07/22/2013 15:33:44 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: **14691**

Agency Name: **DHHS - PUBLIC HEALTH**
 Agency Code: **406**
 Appropriation Unit: **3224-00**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **LANDER, COUNTY OF**
 Contractor Name: **LANDER, COUNTY OF**
 Address: **LANDER COUNTY FINANCE**
315 S HUMBOLDT ST
 City/State/Zip: **BATTLE MOUNTAIN, NV 89820**
 Contact/Phone: null775/635-2573
 Vendor No.: T40262000E
 NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: C14006

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 09/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue interlocal contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$96,060.00**

Payment for services will be made at the rate of \$3,801.00 per month

Other basis for payment: An estimated \$2,418 per State Fiscal Year (SFY) for TB and STD services, as required.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 county has been under a constant agreement with the Community Health Nursing Program, to provide family health services in the county. The county has consistently paid as agreed for services provided.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	07/14/2013 12:07:23 PM
Division Approval	valpers	07/14/2013 12:07:25 PM
Department Approval	ecreceli	07/16/2013 10:15:50 AM
Contract Manager Approval	cschmid2	07/16/2013 10:54:00 AM
Budget Analyst Approval	bberry	07/18/2013 13:07:41 PM
BOE Agenda Approval	sbrown	07/19/2013 13:43:55 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14546**Agency Name: **HEALTH DIVISION**Agency Code: **406**Appropriation Unit: **3224-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: LYON, COUNTY OF

Contractor Name: **LYON, COUNTY OF**Address: **LYON COUNTY TREASURER
27 S MAIN ST**City/State/Zip: **YERINGTON, NV 89447**

Contact/Phone: null775/463-6501

Vendor No.: T40156600

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: HD 14009

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.
--

3. Termination Date: **06/30/2015**Contract term: **1 year and 364 days**4. Type of contract: **Revenue Contract**Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue contract that continues ongoing provision for the Health Division to promote individual and family health in the county utilizing the state's community health nurses. Services will include testing, screening and treatment of tuberculosis and sexually transmitted diseases, as necessary.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$282,282.00**

Payment for services will be made at the rate of \$11,532.75 per null

Other basis for payment: An estimated \$2,748 per State Fiscal Year (SFY) for TB and STD services, as required.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/20/2013 11:20:09 AM
Division Approval	valpers	06/20/2013 11:20:12 AM
Department Approval	ecreceli	06/28/2013 11:25:50 AM
Contract Manager Approval	cschmid2	06/28/2013 12:49:20 PM
Budget Analyst Approval	eobrien	07/02/2013 09:07:30 AM
BOE Agenda Approval	nhovden	07/22/2013 15:20:02 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: **14632**

Agency Name: **HEALTH DIVISION**
Agency Code: **406**

Appropriation Unit: **3224-00**

Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MINERAL, COUNTY OF**
Contractor Name: **MINERAL, COUNTY OF**
Address: **MINERAL COUNTY SOCIAL SERVICES**
PO BOX 1450
City/State/Zip: **HAWTHORNE, NV 89415**
Contact/Phone: null775/945-2446
Vendor No.: T40291300J
NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: HD 14010

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$51,984.00**

Payment for services will be made at the rate of \$1,992.00 per month

Other basis for payment: An estimated \$2,088 per State Fiscal Year (SFY) for TB and STD services, as required.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/28/2013 15:59:35 PM
Division Approval	valpers	06/28/2013 15:59:38 PM
Department Approval	ecreceli	07/01/2013 11:55:56 AM
Contract Manager Approval	cschmid2	07/01/2013 13:03:07 PM
Budget Analyst Approval	eobrien	07/02/2013 14:56:06 PM
BOE Agenda Approval	nhovden	07/22/2013 13:48:33 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14544**

Agency Name: **HEALTH DIVISION**
 Agency Code: **406**
 Appropriation Unit: **3224-00**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **NYE, COUNTY OF**
 Contractor Name: **NYE, COUNTY OF**
 Address: **NYE COUNTY CLERK
 PO BOX 1031
 TONOPAH, NV 89049**
 City/State/Zip: **TONOPAH, NV 89049**
 Contact/Phone: null775-482-8127
 Vendor No.: T80044560T
 NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: HD 14011

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.

3. Termination Date: **06/30/2015**
 Contract term: **1 year and 364 days**

4. Type of contract: **Revenue Contract**
 Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the state's community health nurses. Services will include testing, screening and treatment of tuberculosis and sexually transmitted diseases, as necessary.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$245,398.00**
 Payment for services will be made at the rate of \$7,917.00 per month
 Other basis for payment: TB and STD will be billed upon occurrence, estimated to be \$27,695 per State Fiscal Year.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/20/2013 11:20:20 AM
Division Approval	valpers	06/20/2013 11:20:22 AM
Department Approval	ecreceli	06/28/2013 11:16:44 AM
Contract Manager Approval	cschmid2	06/28/2013 12:48:18 PM
Budget Analyst Approval	eobrien	07/02/2013 09:25:16 AM
BOE Agenda Approval	nhovden	07/22/2013 15:17:43 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14688**

Agency Name: **DHHS - PUBLIC HEALTH**
 Agency Code: **406**
 Appropriation Unit: **3224-00**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **WHITE PINE COUNTY**
 Contractor Name: **WHITE PINE COUNTY**
 Address: **801 CLARK ST**
 City/State/Zip: **ELY, NV 89301**
 Contact/Phone: null775/289-4783
 Vendor No.: T40262600
 NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: C14013

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 09/2013

Retroactive? **Yes**

If "Yes", please explain

This contract was not able to be submitted to the Board of Examiners in a timely fashion pending the outcome of potential legislative actions, and review and approval by the county.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Revenue Contract**

Contract description: **Family Health**

5. Purpose of contract:

This is a new revenue interlocal contract that is ongoing and provides for the Health Division to promote individual and family health in the county utilizing the State's community health nurses.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$57,866.00**

Payment for services will be made at the rate of \$2,118.00 per month

Other basis for payment: An estimated \$3,517 per State Fiscal Year (SFY) for TB and STD services, as required.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada State Health Division, Public Health and 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 county has been under a constant agreement with the Community Health Nursing Program, to provide family health services in the county. The county has consistently paid as agreed for services provided.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	07/14/2013 12:08:29 PM
Division Approval	valpers	07/14/2013 12:08:34 PM
Department Approval	ecreceli	07/16/2013 10:43:11 AM
Contract Manager Approval	cschmid2	07/16/2013 10:53:44 AM
Budget Analyst Approval	bberry	07/18/2013 13:09:53 PM
BOE Agenda Approval	sbrown	07/19/2013 13:45:01 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14615**

Agency Name: WELFARE AND SUPPORT SERVICES	Legal Entity Name: IBM CORPORATION
Agency Code: 407	Contractor Name: IBM CORPORATION
Appropriation Unit: 3228-50	Address: IBM STATE CONTRACTS TEAM 7100 HIGHLANDS PKWY SMYRNA, GA 30082
Is budget authority available?: Yes	City/State/Zip: SMYRNA, GA 30082
If "No" please explain: Not Applicable	Contact/Phone: null770/863-1671
	Vendor No.: PUR0000395X
	NV Business ID: NV19371000083

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that 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	4.00 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	96.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2013**

Contract term: **152 days**

4. Type of contract: **Contract**

Contract description: **Information Services**

5. Purpose of contract:

This is a new contract for installation and configuration of the SmartCloud software, which is necessary to enable new functionality of the new PureFlex hardware platform. PureFlex is a complex multiplatform computing platform that includes: networking, storage and computing power into a single rack with a single management interface for all components. This will be the platform that houses all UNIX computing going forward for the agency, and is required to meet growing demand for resources.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$17,860.00**

Other basis for payment: As specified in Attachment B.

II. JUSTIFICATION

7. What conditions require that this work be done?

Installation and configuration of the SmartCloud software is necessary to enable new functionality of the new PureFlex hardware platform, which will in turn provide additional resources for 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 resources or expertise to provide this service.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Competitive bids were not required because the hardware was purchased direct from IBM as part of the State's WSCA Master Agreement with IBM. The participating addendum states that all on site services require the implementation of a contract.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Administration, EITS at various times throughout the last twenty years. DWSS at various times in the last several years and provided satisfactory service.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdufresn	06/27/2013 17:48:41 PM
Division Approval	msmit5	07/15/2013 09:55:46 AM
Department Approval	ecreceli	07/16/2013 09:29:45 AM
Contract Manager Approval	afrancis	07/16/2013 11:51:14 AM
DoIT Approval	lmuelle1	07/18/2013 07:08:11 AM
Budget Analyst Approval	sjohnso9	07/18/2013 12:19:05 PM
BOE Agenda Approval	sbrown	07/19/2013 09:06:15 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: 13619	Amendment Number: 2
Agency Name: WELFARE AND SUPPORT SERVICES	Legal Entity Name: HOUSING DIVISION
Agency Code: 407	Contractor Name: HOUSING DIVISION
Appropriation Unit: 4862-16	Address: DEPT OF BUSINESS & INDUSTRY 1535 OLD HOT SPRINGS RD STE 50 CARSON CITY, NV 89706
Is budget authority available?: Yes	City/State/Zip: DEPT OF BUSINESS & INDUSTRY 1535 OLD HOT SPRINGS RD STE 50 CARSON CITY, NV 89706
If "No" please explain: Not Applicable	Contact/Phone: null775/687-2049
	Vendor No.: D74426000
	NV Business ID: Gov't Entity

To what State Fiscal Year(s) will the contract be charged? **2013-2017**

What is the source of funds that will be used to pay the contractor? 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 **10/01/2012**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **09/30/2016**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **LIHEAP**

5. Purpose of contract:

This is the second amendment to the interlocal agreement to provide the Department of Business and Industry, Housing Division Weatherization Assistance Program (WAP) with 5% of the Low Income Home Energy Assistance Program (LIHEAP) Block Grant funds awarded to the Division of Welfare and Supportive Services to help fund WAP for low income families. WAP encourages and enables households to reduce their home energy needs by providing for various energy conservation measures, which decreases the need for energy assistance. This amendment increases the maximum amount from \$1,935,922.70 to \$1,975,287 due to the release of remaining federal fiscal year 2013 grant funds.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$1,902,800.00
2. Total amount of any previous contract amendments:	\$33,122.70
3. Amount of current contract amendment:	\$39,364.30
4. New maximum contract amount:	\$1,975,287.00

II. JUSTIFICATION

7. What conditions require that this work be done?

DWSS is responsible for the administration of the Low Income Home Energy Assistance Program (LIHEAP) Block Grant. Authorization for this grant is provided under CFR 45 Part 96 and CFR 10 Part 440. DWSS provides the Housing Division with 5% of this grant to help fund the Weatherization Assistance Program for low income families.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Department of Business and Industry, Housing Division is a state agency, which provides weatherization assistance to low income families.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contracted with DWSS from October 14, 2008 to September 30, 2010 and provided satisfactory service.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdufresn	07/10/2013 15:03:46 PM
Division Approval	msmit5	07/15/2013 09:54:39 AM
Department Approval	ecreceli	07/16/2013 09:00:12 AM
Contract Manager Approval	afrancis	07/16/2013 11:50:58 AM
Budget Analyst Approval	sjohnso9	07/17/2013 14:58:22 PM
BOE Agenda Approval	sbrown	07/18/2013 11:08:06 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **12384** Amendment Number: **1**

Agency Name: **MENTAL HEALTH AND DEVELOPMENTAL SERVICES** Legal Entity Name: **EXECUTIVE PEST SERVICES LLC**

Agency Code: **408** Contractor Name: **EXECUTIVE PEST SERVICES LLC**

Appropriation Unit: **3161-07** Address: **2120 JARDINE AVE**

Is budget authority available?: **Yes** City/State/Zip: **NORTH LAS VEGAS, NV 89032-0640**

If "No" please explain: **Not Applicable** Contact/Phone: **Brian Holmes 702/321-9547**

Vendor No.: **T27020890**

NV Business ID: **NV20061525544**

To what State Fiscal Year(s) will the contract be charged? **2012-2016**

What is the source of funds that 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 **08/15/2011**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **08/31/2013**

Termination Date:

Contract term: **4 years and 17 days**

4. Type of contract: **Contract**

Contract description: **Pest Control**

5. Purpose of contract:

This is the first amendment to the original contract, which continues ongoing pest control at Southern Nevada Adult Mental Health Services' campuses. This amendment extends the termination date from August 15, 2013 to August 31, 2015 and increases the maximum amount from \$12,600 to \$30,000 to fund the additional two years and add a contingency fund for unforeseen events.

6. CONTRACT AMENDMENT

1.	The maximum amount of the original contract:	\$12,600.00
2.	Total amount of any previous contract amendments:	\$0.00
3.	Amount of current contract amendment:	\$17,400.00
4.	New maximum contract amount:	\$30,000.00
	and/or the termination date of the original contract has changed to:	08/31/2015

II. JUSTIFICATION

7. What conditions require that this work be done?

The conditions that require this work to be done include the infestation into the facility of roaches, spiders and ants. Pursuant to NRS 555.100 and 555.110, to not control these insects could create a health risk to the client as well as the employees of the facility.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Currently there are not any state employees available that have the training or certification to use the chemicals needed to eliminate these pests in a commercial environment.

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?

Executive Pest Services gave us a very competitive price and is providing all of the services we requested when we looked for quotes.

d. Last bid date: 05/16/2011 Anticipated re-bid date: 08/01/2013

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/20/2013 11:21:15 AM
Division Approval	valpers	06/20/2013 11:21:17 AM
Department Approval	ecreceli	06/28/2013 11:20:58 AM
Contract Manager Approval	tpollar2	06/28/2013 12:49:58 PM
Budget Analyst Approval	bberry	07/16/2013 10:12:41 AM
BOE Agenda Approval	jborrowm	07/17/2013 11:09:59 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **13254** Amendment Number: **1**

Agency Name: **MENTAL HEALTH AND DEVELOPMENTAL SERVICES** Legal Entity Name: **FAMILY FIRST MEDICAL LLC**

Agency Code: **408** Contractor Name: **FAMILY FIRST MEDICAL LLC**

Appropriation Unit: **3161-12** Address: **6725 S EASTERN AVE STE 3**

Is budget authority available?: **No** City/State/Zip: **LAS VEGAS, NV 89119-3949**

If "No" please explain: Pending work program #C26698 approval Contact/Phone: null702/260-0577

Vendor No.: T27014630

NV Business ID: NV20051238818

To what State Fiscal Year(s) will the contract be charged? **2012-2014**

What is the source of funds that 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 #: RFP #2013

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/08/2012**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This memorandum requests that the above referenced Health Division Contract be approved for a retroactive start date effective June 3, 2013. The contract requires a retroactive start date because of requirements for history and physical evaluations of Psychiatric Observation Unit patients, to meet CMS and Joint Commission standards. These new requirements involve increased processing times, and were required to be put in place immediately.

3. Previously Approved Termination Date: **12/31/2013**Contract term: **1 year and 237 days**4. Type of contract: **Contract**Contract description: **General Medical Ser.**

5. Purpose of contract:

This is the first amendment to the original contract, which continues ongoing physician level general medical services for the Rawson-Neal Psychiatric Hospital. This amendment increases the maximum amount from \$1,240,000.00 to \$1,507,083.60 due to an increase in hours from 100 per week to 156 per week for the provision of history and physical evaluations to Psychiatric Observation Unit patients to meet CMS and Joint Commission requirements

6. CONTRACT AMENDMENT

1.	The maximum amount of the original contract:	\$1,240,000.00
2.	Total amount of any previous contract amendments:	\$0.00
3.	Amount of current contract amendment:	\$267,083.60
4.	New maximum contract amount:	\$1,507,083.60

II. JUSTIFICATION

7. What conditions require that this work be done?

Pursuant to NRS 433.344 and 436.123 agencies are authorized to contract with qualified professionals for delivery of services. Southern Nevada Adult Mental Health Services operates inpatient services at the Rawson-Neal Hospital requiring the services of physicians and internists. This is required to ensure adequate coverage for consumers.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

As of July 1, 2012 we no longer have any people on staff to perform these jobs. They have either been eliminated through attrition or retirement and adequate staffing is required by the Joint Commission. We will be able to save a minimum of \$ 200,000.00 per year by using contracted labor to fill these positions.

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?

The contractor has the experience in providing physician level general medical services and was the 2nd highest scoring vendor selected by the evaluation committee. The original contracted vendor (Wexford Health) was released from their contract by mutual agreement.

d. Last bid date: 08/24/2011 Anticipated re-bid date: 05/01/2014

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

See the attached Authorization to Contract form for details.

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Family First Medical has been working under this contract at Southern Nevada Adult Mental Health Services and have performed satisfactorily.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	valpers	06/20/2013 11:20:47 AM
Division Approval	valpers	06/20/2013 11:20:50 AM
Department Approval	ecreceli	06/28/2013 11:11:48 AM

Contract Manager Approval

tpollar2

06/28/2013 12:50:25 PM

Budget Analyst Approval

bberry

07/17/2013 12:06:06 PM

BOE Agenda Approval

jborrowm

07/18/2013 08:48:32 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: **14630**

Agency Name: DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name: Public Consulting Group Inc
Agency Code: 409	Contractor Name: Public Consulting Group Inc
Appropriation Unit: 3143-26	Address: 148 State St 10th Flr
Is budget authority available?: Yes	City/State/Zip: Boston, MA 02109
If "No" please explain: Not Applicable	Contact/Phone: null617-426-2026
	Vendor No.: t32000898a
	NV Business ID: nv20021466314

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that 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	51.60 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	48.40 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **333 days**

4. Type of contract: **Contract**

Contract description: **software services**

5. Purpose of contract:

This is a new contract to convert the current AlloCAP system from Microsoft Access to a web-based cost allocation plan for the division. This software is used to process the quarterly cost allocation for Title IV-E foster care and adoption administrative expenses and children's mental health's year end cost settlement with the Division of Health Care Financing and Policy with the Certified Public Expenditure Report.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$96,140.00**

Payment for services will be made at the rate of \$78,410.00 per project completion

Other basis for payment: hosting fees \$450/month/system*12 months*2 systems=\$10800, \$1555 optional additional online training, \$5375 optional additional onsite training

II. JUSTIFICATION

7. What conditions require that this work be done?

Conversion of the existing Microsoft Access based system is necessary to implement the web-based tool to process quarterly cost allocation plans to support claiming efforts.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The original AlloCAP software is proprietary to the vendor.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the 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 #: 130601

Approval Date: 05/28/2013

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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

With DCFS and service was satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pcolegro	07/01/2013 15:37:50 PM
Division Approval	jmorro5	07/08/2013 09:49:13 AM
Department Approval	ecreceli	07/09/2013 14:58:31 PM
Contract Manager Approval	ihyman	07/09/2013 17:34:55 PM
DoIT Approval	bbohm	07/15/2013 06:09:36 AM
Budget Analyst Approval	eobrien	07/17/2013 11:42:27 AM
BOE Agenda Approval	jborrowm	07/18/2013 11:32:09 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: **13243** Amendment Number: **2**

Agency Name: **DIVISION OF CHILD AND FAMILY SERVICES** Legal Entity Name: **ROITMAN, NORTON A MD**

Agency Code: **409** Contractor Name: **ROITMAN, NORTON A MD**

Appropriation Unit: **3179-04** Address: **2340 PASEO DEL PRADO STE D307**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89102**

If "No" please explain: **Not Applicable** Contact/Phone: **null702/222-1812**

Vendor No.: **T80922564**

NV Business ID: **nv20101539575**

To what State Fiscal Year(s) will the contract be charged? **2012-2014**

What is the source of funds that 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 **06/05/2012**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2014**Contract term: **2 years and 25 days**4. Type of contract: **Contract**Contract description: **Counseling**

5. Purpose of contract:

This is the second amendment to the original contract, which continues ongoing psychiatric services for youth at Caliente Youth Center. This amendment increases the contract maximum from \$24,120.00 to \$48,240.00 to provide contract authority to cover FY14.**6. CONTRACT AMENDMENT**

1.	The maximum amount of the original contract:	\$24,120.00
2.	Total amount of any previous contract amendments:	\$0.00
3.	Amount of current contract amendment:	\$24,120.00
4.	New maximum contract amount:	\$48,240.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Assessment of youth is a highly specialized service. Recommendations are needed to guide treatment planning, placement decisions and reunification with family if out of home placement is needed.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is no state employees in the region qualified to provide this type of assessment.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 was the only one to submit a bid.

d. Last bid date: 03/01/2012 Anticipated re-bid date: 01/01/2014

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with the Department of Health and Human Services, Division of child and Family Services. Service has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Sole Proprietor

[Empty text box]

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jmorro5	07/08/2013 09:50:16 AM
Division Approval	jmorro5	07/08/2013 09:50:19 AM
Department Approval	ecreceli	07/09/2013 14:51:41 PM
Contract Manager Approval	ihyman	07/09/2013 17:34:12 PM
Budget Analyst Approval	eobrien	07/11/2013 10:13:21 AM
BOE Agenda Approval	jborrowm	07/16/2013 14:20:12 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14625**

Agency Name:	DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Douglas, County of
Agency Code:	409	Contractor Name:	Douglas, County of
Appropriation Unit:	3229-00	Address:	1594 Esmeralda Ave
Is budget authority available?:	Yes	City/State/Zip:	Minden, NV 89423
If "No" please explain:	Not Applicable	Contact/Phone:	null775-782-9821
		Vendor No.:	t40174400g
		NV Business ID:	government

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This intralocal contract is retroactive due to the need for Legislative progress before determination of the correct assessment amount to add to the contract and the subsequent need for the County Board of Commissioners to review and approve the contract.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **CPS assessment**

5. Purpose of contract:

This is a new revenue interlocal agreement for ongoing assessment payment each fiscal year by the county to the Division of Child and Family Services pursuant to NRS 432B.326 for child protective services assessments to Douglas County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$478,006.00**

Other basis for payment: quarterly upon submission of invoice to the County

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract.

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: **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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pcolegro	07/01/2013 15:41:24 PM
Division Approval	jmorro5	07/08/2013 09:48:11 AM
Department Approval	ecreceli	07/09/2013 14:17:41 PM
Contract Manager Approval	ihyman	07/09/2013 17:35:18 PM
Budget Analyst Approval	eobrien	07/11/2013 12:22:12 PM
BOE Agenda Approval	jborrowm	07/16/2013 14:49:48 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14602**

Agency Name:	DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Lyon, County of
Agency Code:	409	Contractor Name:	Lyon, County of
Appropriation Unit:	3229-00	Address:	27 S Main St
Is budget authority available?:	Yes	City/State/Zip:	Yerington, NV 89447
If "No" please explain:	Not Applicable	Contact/Phone:	null775-463-6531
		Vendor No.:	t40156600ah
		NV Business ID:	government

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

This intralocal contract is retroactive due to the need for Legislative progress before determination of the correct assessment amount to add to the contract and the subsequent need for the County Board of Commissioners to review and approve the contract.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **CPS assessment**

5. Purpose of contract:

This is a new revenue interlocal agreement for ongoing assessment payment each fiscal year by the county to the Division of Child and Family Services pursuant to NRS 432B.326 for child protective services assessments to Lyon County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$700,581.00**

Other basis for payment: quarterly upon submission of invoice to the County

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract.

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: **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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

Lyon County

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

With DCFS and service has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pcolegro	07/01/2013 15:40:14 PM
Division Approval	jmorro5	07/08/2013 09:47:54 AM
Department Approval	ecreceli	07/09/2013 14:48:01 PM
Contract Manager Approval	ihyman	07/09/2013 17:33:31 PM
Budget Analyst Approval	eobrien	07/11/2013 10:35:24 AM
BOE Agenda Approval	jborrowm	07/16/2013 14:44:19 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14637**

Agency Name:	COLORADO RIVER COMMISSION	Legal Entity Name:	SARA A. PRICE, ESQ.
Agency Code:	690	Contractor Name:	SARA A. PRICE, ESQ.
Appropriation Unit:	4490-04	Address:	9820 GLENROCK DR
Is budget authority available?:	Yes	City/State/Zip:	LAS VEGAS, NV 89134
If "No" please explain:	Not Applicable	Contact/Phone:	null702/296-3990
		Vendor No.:	T29005016
		NV Business ID:	NV20111095278
To what State Fiscal Year(s) will the contract be charged?	2014-2017		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Water and Power Revenues

Agency Reference #: RFP MSCP2013

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2017**Contract term: **3 years and 334 days**4. Type of contract: **Contract**Contract description: **Sara Price**

5. Purpose of contract:

This is a new contract to provide professional services related to the 50 year Lower Colorado River Multi-Species Conservation Program (LCRMSCP or MSCP). Service to include advice and assistance on policy development, and implementation of the program. Work to include transactional work, on-going review, oversight and participation in all applicable on-going technical, financial and work plan documents; and to assist in the interfacing of the MSCP with the new requirements under the Hoover Power Allocation Act of 2011 to include the MSCP requirements in potential contracts with new hydropower allottees; and to provide advice and oversight on other environmental, water and power matters as directed.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$270,000.00**

Other basis for payment: Hourly rate schedule as provided in attachment AA

II. JUSTIFICATION

7. What conditions require that this work be done?

The MSCP is a 50 year program that requires implementation oversight including the development of financial and transactional agreements (land purchases, vendor agreements), committee meetings and involvement, and program document review and legal research to ensure compliance with environmental law and regulations. This program ensures continued water deliveries to southern Nevada and restoration of the Colorado River ecosystem.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Staff lacks specific historical background and expertise to oversee the program implementation at the transactional level. This contractor has been involved with the MSCP since inception and was part of the group that developed the program; no current staff has this level of experience. Program involvement is not enough to justify an additional staff member, however, there is a significant need for travel, meeting attendance and document review that current staff cannot accommodate.

9. Were quotes or proposals solicited? Yes
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Only respondent to the RFP. Due to the narrow scope of experience, the agency was unable to specifically identify additional potential vendors with MSCP experience not already under contract with one of the other state/federal/stakeholder participants. The RFP was advertised broadly in anticipation of fielding any possible bidders that have expertise.

d. Last bid date: 04/05/2013 Anticipated re-bid date: 04/05/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current Vendor for the Colorado River Commission and the services have been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbeatty	06/26/2013 16:05:28 PM
Division Approval	dbeatty	06/26/2013 16:05:30 PM
Department Approval	dbeatty	06/26/2013 16:05:33 PM
Contract Manager Approval	jsalo	06/27/2013 08:41:48 AM
Budget Analyst Approval	jborrowm	07/02/2013 13:45:27 PM
BOE Agenda Approval	jborrowm	07/02/2013 13:45:31 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14627**

Agency Name: COLORADO RIVER COMMISSION	Legal Entity Name: BURNS & MCDONNELL ENGINEERING CO., INC.
Agency Code: 690	Contractor Name: BURNS & MCDONNELL ENGINEERING CO., INC.
Appropriation Unit: 4501-10	Address: 9400 WARD PKWY
Is budget authority available?: Yes	City/State/Zip: KANSAS CITY, MO 64114-3319
If "No" please explain: Not Applicable	Contact/Phone: John E. Olander 816/333-9400
	Vendor No.: T29015276
	NV Business ID: NV19781006834

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Power Sales Revenue

Agency Reference #: **RFP # 3041**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 321 days**

4. Type of contract: **Contract**

Contract description: **Burns and McDonnell**

5. Purpose of contract:

This is a new contract to provide engineering services for the Colorado River Commission on an as needed basis for projects associated with the operation and maintenance of its high-voltage electrical transmission and distribution system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$450,000.00**

Other basis for payment: **Payment to contractor based on hourly rate schedule provided in attachment CC**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency is responsible for the operation and maintenance of the high voltage power system that provides electrical power to the water purveyors in southern Nevada (SNWA, City of Henderson, Boulder City, etc.) for water treatment and pumping needs. These responsibilities require engineering services of professionally licensed external engineers for technical drawings, review, testing and other services outside the capability of agency personnel. The system must be maintained in excellent condition to ensure adequate and timely water deliveries to allow end users in the Las Vegas valley.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the staffing capacity, technical expertise or resources to fulfill this work.

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 #3041, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 02/15/2013 Anticipated re-bid date: 02/15/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbeatty	06/21/2013 15:35:52 PM
Division Approval	dbeatty	06/21/2013 15:35:55 PM
Department Approval	dbeatty	06/21/2013 15:35:59 PM
Contract Manager Approval	jsalo	06/24/2013 08:25:33 AM
Budget Analyst Approval	jborrowm	07/02/2013 12:24:50 PM
BOE Agenda Approval	jborrowm	07/02/2013 12:24:55 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14590**

Agency Name: DCNR - FORESTRY DIVISION	Legal Entity Name: Washoe County
Agency Code: 706	Contractor Name: Washoe County
Appropriation Unit: 4194-00	Address: PO Box 11130
Is budget authority available?: Yes	1001 E. 9th Street
If "No" please explain: Not Applicable	City/State/Zip: Reno, NV 89520-0027
	Contact/Phone: null775-328-2000
	Vendor No.:
	NV Business ID: NA
To what State Fiscal Year(s) will the contract be charged?	2014-2015

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % County Funds

Agency Reference #: NDF14-002

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

The Division of Forestry and Washoe County have been in negotiation for participation in the Wildland Fire Protection Program for several months. However, review of the agreement by legal counsel of both parties delayed the submission of the contract resulting in a retroactive request. It is of cirical importance that the Division implements this revenue contract in order to procure resources that will provide protection of life and property to the citizens of Nevada.

3. Termination Date: **06/30/2015**Contract term: **1 year and 364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Wildland Fire Protec**

5. Purpose of contract:

This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and Washoe County will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$100,000.00**

Payment for services will be made at the rate of \$12,500.00 per quarter

Other basis for payment: Payable in advance on the first of each quarter starting July 1 of each state fiscal year.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Division of Forestry and Washoe County will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which Washoe County will make payment to the division.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

Washoe County is a political subdivision of the State of Nevada.

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gleiss	07/15/2013 13:13:56 PM
Division Approval	dprather	07/15/2013 13:26:39 PM
Department Approval	dprather	07/15/2013 13:26:47 PM
Contract Manager Approval	ldunn	07/15/2013 14:17:20 PM
Budget Analyst Approval	jrodrig9	07/18/2013 12:50:54 PM
BOE Agenda Approval	sbrown	07/19/2013 09:08:36 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: **14629**

Agency Name: FORESTRY DIVISION	Legal Entity Name: North Lyon County Fire Protection District
Agency Code: 706	Contractor Name: North Lyon County Fire Protection District
Appropriation Unit: All Budget Accounts - Category 00	Address: 195 East Main Street
Is budget authority available?: Yes	City/State/Zip: Fernley, NV 89408
If "No" please explain: Not Applicable	Contact/Phone: null775-575-3310
	Vendor No.:
	NV Business ID: N/A

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Fire Protection District Funds

Agency Reference #: NDF13-025

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

Nevada Division of Forestry and North Lyon County Fire Protection District have been in negotiation for participation in the Wildland Fire Protection Program for several months. However, review of the agreement by legal counsel of both parties delayed the submission, resulting in a retroactive request. It is of critical importance that the Division implements this revenue contract in order to procure resources that will provide protection of life and property to the citizens of Nevada.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Wildland Fire Protec**

5. Purpose of contract:

This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and North Lyon County Fire Protection District will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

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 \$1,875.00 per quarter

Other basis for payment: Payable in advance on the first of each quarter starting July 1 of each state fiscal year.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Division of Forestry and the North Lyon County Fire Protection District will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which the county fire protection district will make payment to the division.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

North Lyon County Fire Protection District is a political subdivision of the State of Nevada.

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gleiss	06/24/2013 14:39:04 PM
Division Approval	dprather	06/24/2013 14:39:31 PM
Department Approval	dprather	06/24/2013 14:39:35 PM
Contract Manager Approval	ldunn	06/24/2013 14:42:33 PM
Budget Analyst Approval	jrodrig9	06/25/2013 10:07:57 AM
BOE Agenda Approval	cwatson	07/11/2013 08:47:51 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14588**

Agency Name: FORESTRY DIVISION	Legal Entity Name: Truckee Meadows Fire Protection District
Agency Code: 706	Contractor Name: Truckee Meadows Fire Protection District
Appropriation Unit: All Budget Accounts - Category 00	Address: PO Box 11130
Is budget authority available?: Yes	1001 East 9th Street
If "No" please explain: Not Applicable	Reno, NV 89520-0027
	Contact/Phone: null775-328-6000
	Vendor No.:
	NV Business ID: NA

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Fire Protection District Funds

Agency Reference #: NDF13-022

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

The Division of Forestry and Truckee Meadows Fire Protection District have been in negotiation for participation in the Wildland Fire Protection Program for several months. However, review of the agreement by legal counsel of both parties delayed the submission of the contract resulting in a retroactive request. It is of critical importance that this contract is implemented in order to procure resources that will provide protection of life and property to the citizens of Nevada.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Wildland Fire Protec**

5. Purpose of contract:

This is a new interlocal agreement to provide new services under the Wildland Fire Protection Program, under which the Nevada Division of Forestry and Truckee Meadows Fire Protection District, on behalf of itself and Sierra Fire Protection District, will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$360,000.00**

Payment for services will be made at the rate of \$45,000.00 per quarter

Other basis for payment: Payable in advance on the first of each quarter starting July 1 of each state fiscal year. Amount due from Truckee Meadows Fire Protection District is \$20,000 per quarter; amount due from Sierra Fire Protection District is \$25,000/quarter.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Division of Forestry and Truckee Meadows Fire Protection District will work closely together to maintain effective wildfire management without duplication and coordinate efforts with federal cooperators to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which the fire protection district will make payment to the division.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

Truckee Meadows Fire Protection District is a political subdivision of the State of Nevada.

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dprather	06/18/2013 14:28:55 PM
Division Approval	dprather	06/18/2013 14:29:02 PM
Department Approval	dprather	06/18/2013 14:29:05 PM
Contract Manager Approval	ldunn	06/18/2013 15:40:48 PM
Budget Analyst Approval	jrodrig9	06/25/2013 10:08:42 AM
BOE Agenda Approval	cwatson	07/11/2013 08:49:36 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 CONTRACT1. Contract Number: **14603**Agency Name: **ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3173-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WEBSOFT DEVELOPERS INC**Contractor Name: **WEBSOFT DEVELOPERS INC**Address: **2020 RESEARCH PARK DR STE 140**City/State/Zip: **DAVIS, CA 95618-6150**

Contact/Phone: null530/759-8754

Vendor No.: PUR0004383

NV Business ID: NV20121454363

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: DEP 14-009

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2014**Contract term: **1 year and 152 days**4. Type of contract: **Contract**Contract description: **System Maintenance**

5. Purpose of contract:

This is a new contract to provide installation, maintenance and support of FacilityMap Framework powered by GeoCortex for the Nevada Division of Environmental Protection, the Division of State lands, the Division of Forestry, and Nevada State Historical Preservation Office GIS System application. The vendor will provide technical support in response to specific inquiries as well as software maintenance by way of patches, updates, and upgrades as applicable.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$17,985.00**

Other basis for payment: 30 days of receipt of invoice

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division of State Lands, Land Management System (LMS) was designed and developed by Websoft Developers during the 2009-2010 fiscal years. The new software application and development services requested in this contract will integrate directly into the LMS and provide Geographic Information System (GIS) mapping services, replacing the existing GIS components.

The Nevada Division of Environmental Protection current GIS system is inadequate to fill the needs of the public and internal staff. The new software application developed will directly link to the division's current mapping applications and provide enhanced GIS mapping services to the public and internal staff.

The State Historical Preservation Office, NVCRIS (Nevada Cultural Resource Information System) is a Web mapping application which displays confidential archaeological sites and inventory maps for the state of Nevada. The new software application will directly link to the division's current NVCRIS system and provide GIS mapping services.

The Division of Forestry current GIS system is inadequate to fill the needs of the public and internal staff. The new software application will directly link to the division's current mapping databases and provide GIS mapping services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Department of Conservation & Natural Resources does not have the in-house programming expertise or expert knowledge of the system that is required for installation and provide the ongoing maintenance.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the 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?

WSD is the developer and expert in the GeoCortex GIS Mapping software. WSD is also the developer and sole expert in the Division of State Lands, Land Management System (LMS).

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. 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

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sravenel	06/18/2013 14:41:47 PM
Division Approval	sneudaue	06/21/2013 09:11:42 AM
Department Approval	sneudaue	06/21/2013 09:11:45 AM
Contract Manager Approval	sneudaue	06/26/2013 09:09:23 AM
DoIT Approval	lmuelle1	06/27/2013 09:02:55 AM
Budget Analyst Approval	jrodrig9	07/02/2013 16:51:19 PM
BOE Agenda Approval	cwatson	07/11/2013 08:46:33 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14636**Agency Name: **BUSINESS AND INDUSTRY**Agency Code: **740**Appropriation Unit: **4681-16**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Applied Market Analysis LLC

Contractor Name: **Applied Analysis**Address: **6385 S. Rainbow Blvd
Suite 105**City/State/Zip: **Las Vegas, NV 89118**

Contact/Phone: Brian Gordon 702-967-3333

Vendor No.: T32002332

NV Business ID: NV2012076623

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Mortgage Settlement Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **Yes**

If "Yes", please explain

Due to the legal review and revision of the contract by all three entities involved in the contract the agency was unable to meet the deadline for a previous BOE.

3. Termination Date: **06/30/2015**Contract term: **1 year and 364 days**4. Type of contract: **Other (include description): Applied Analysis**Contract description: **Housing Index**

5. Purpose of contract:

This is a new contract to provide professional market research and analysis services to the Department of Business and Industry/University of Nevada Las Vegas-LIED Institute in collaboration with publishing a Housing Index to stakeholders within the State of Nevada. This proposal will provide for extensive analysis of the Nevada housing market which will be crucial as Nevada embarks on a path of housing recovery.

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 \$5,000.00 per Quarter

II. JUSTIFICATION

7. What conditions require that this work be done?

Subcontractor on Housing Index collaboration with UNLV-LIED Institute on Housing Index project.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Specialized professional services contract on Housing Index project. Project is a collaboration with UNLV-LIED Institute.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the 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?

Specialized marketing analysis services

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Business and Industry Fiscal Year 2013 - satisfactory

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Abbreviated form. Doing business as.

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	afrantz	07/10/2013 15:03:48 PM
Division Approval	afrantz	07/10/2013 15:03:58 PM
Department Approval	afrantz	07/10/2013 15:04:01 PM
Contract Manager Approval	afrantz	07/16/2013 09:46:38 AM
Budget Analyst Approval	sjohnso9	07/16/2013 09:53:45 AM
BOE Agenda Approval	sbrown	07/16/2013 16:11:48 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14718**

Agency Name: B&I - INDUSTRIAL RELATIONS DIV	Legal Entity Name: SIERRA NEVADA ADMINISTRATORS
Agency Code: 742	Contractor Name: SIERRA NEVADA ADMINISTRATORS
Appropriation Unit: All Appropriations	Address: INC
Is budget authority available?: Yes	2716 N TENAYA WAY FL 5
If "No" please explain: Not Applicable	City/State/Zip: LAS VEGAS, NV 89128-0424
	Contact/Phone: null702/838-8282
	Vendor No.: T81071694
	NV Business ID: NV19901024930
To what State Fiscal Year(s) will the contract be charged?	2014-2015

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Workers' Compensation and Safety Fund

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **Yes**

If "Yes", please explain

The prior CCM retired October 2012. The new CCM assumed those duties only until a new Education Research & Analysis Manager (ER&A) could be hired and certified (hired April 2013). The new ER&A Manager cannot achieve certification until a class is scheduled in the South. The planned Contract Amendment to extend the end of the current 2-year contract was not achieved timely by the current Contract Mgr+NRS.

3. Termination Date: **06/30/2015**

Contract term: **1 year and 364 days**

4. Type of contract: **Contract**

Contract description: **Retroactive UEA TPA**

5. Purpose of contract:

This is a new contract to provide ongoing workers' compensation claims administration services for the State of Nevada Uninsured Employer's Claims Account, as required by NRS 616C.220(1)

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$220,000.00**

Payment for services will be made at the rate of \$97,000.00 per Year

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division of Industrial Relations oversees the Uninsured Employer's Claim Account but does not have the staffing or resources to manage claims

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NRS 616C.220(1) requires the DIR to designate, via competitive bidding, a contractor to manage these claims

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?

A proposal evaluation committee scored proposals based on pre-set criteria (including cost) as established by the DIR administrator. Sierra Nevada Administrators, Inc. was judged to provide the best value for the State

d. Last bid date: 02/11/2011 Anticipated re-bid date: 02/17/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pverma	07/12/2013 15:05:59 PM
Division Approval	pverma	07/12/2013 15:06:03 PM
Department Approval	lkoehler	07/12/2013 15:09:48 PM
Contract Manager Approval	jestrad1	07/12/2013 15:10:41 PM
Budget Analyst Approval	sjohnso9	07/16/2013 09:37:12 AM
BOE Agenda Approval	sbrown	07/18/2013 16:23:37 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14712**

Agency Name: **B&I - REAL ESTATE DIVISION**
Agency Code: **748**
Appropriation Unit: **3826-10**

Is budget authority available?: **No**

If "No" please explain: Work program C27029 is in progress for the August Interim Finance Committee meeting.

Legal Entity Name: **Iron Data Solutions Inc**
Contractor Name: **Iron Data Solutions Inc**
Address: **PO Box 643845**
City/State/Zip: **Cincinnati, OH 45264-3845**
Contact/Phone: **Debbie Brown 314-744-7317**
Vendor No.: **T29027255B**
NV Business ID: **NV20111131791**

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	41.00 %	X	Fees	59.00 %	Real Estate Education Fund - fees from Real Estate Licensees
	Federal Funds	0.00 %		Bonds	0.00 %	
	Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: **Iron Data MidTerm**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **11/30/2013**

Contract term: **121 days**

4. Type of contract: **Contract**

Contract description: **Iron Data Mid-Term**

5. Purpose of contract:

This is a new contract to modify the Real Estate Division licensing application software and database to incorporate additional data fields and tracking for licensee compliance with new education and trust account filing requirements.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,800.00**

Payment for services will be made at the rate of \$175.00 per hour

Other basis for payment: \$150 per hour for management services

II. JUSTIFICATION

7. What conditions require that this work be done?

The Real Estate Division needs modification to its application software an database to incorporate additional data fields and tracking for licensee compliance with new education and trust account filing requirements.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The software application utilized by the Division is proprietary requiring customization be completed by the software designer/owner.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the 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 #: 130701

Approval Date: 07/08/2013

c. Why was this contractor chosen in preference to other?

The software application utilized by the Division is proprietary. Due to the proprietary nature of the software, a competitor cannot upgrade the system.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contract #13194 - Satisfactory
Contract #13195 - Satisfactory

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vleigh	07/10/2013 12:13:04 PM
Division Approval	vleigh	07/10/2013 12:13:09 PM
Department Approval	lkoehler	07/10/2013 12:39:01 PM
Contract Manager Approval	vleigh	07/10/2013 12:46:43 PM
DoIT Approval	lmuelle1	07/11/2013 12:49:35 PM
Budget Analyst Approval	sjohnso9	07/22/2013 12:08:00 PM
BOE Agenda Approval	nhovden	07/22/2013 15:51:25 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14025** Amendment Number: **1**
 Agency Name: **MANUFACTURED HOUSING DIV** Legal Entity Name: **Charles Abbott and Associates Inc**
 Agency Code: **754** Contractor Name: **Charles Abbott and Associates Inc**
 Appropriation Unit: **3814-04** Address: **27401 Los Altos, Suite 220**
 Is budget authority available?: **Yes** City/State/Zip: **Mission Viejo, CA 92691**
 If "No" please explain: **Not Applicable** Contact/Phone: **Buster Scholl 866-530-4980**
 Vendor No.: **T29031774**
 NV Business ID: **T29031774**

To what State Fiscal Year(s) will the contract be charged? **2013-2015**

What is the source of funds that will be used to 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 **01/23/2013**
 Anticipated BOE meeting date **07/2013**
 Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2014**
 Contract term: **2 years and 157 days**

4. Type of contract: **Contract**
 Contract description: **Inspection Services**

5. Purpose of contract:
This is the first amendment to the original contract, which provides inspections and required testing for the installation of manufactured/mobile homes and commercial coaches; inspections and tests for home repairs and the replacement of heat producing appliances with the home; and approval of plans/modifications of plans as requested by the division. The amendment extends the termination date from December 31, 2014 to June 30, 2015 and increases the maximum amount of the contract from \$9,999 to \$56,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$9,999.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$46,001.00
4. New maximum contract amount:	\$56,000.00
and/or the termination date of the original contract has changed to:	06/30/2015

II. JUSTIFICATION

7. What conditions require that this work be done?
NRS 489 and NRS 461 require inspections to be performed as noted in the contract.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division employs inspectors to perform these functions. However, there are occasions wherein the division has inspection requests and staff is unable to perform those inspections due to workload or the requirement for overtime related to inspections of rural areas. Utilizing the vendor for such cases will allow the division to meet statutory inspection requirements, serve constituents in a timely manner, and reduce wear and tear on agency owned vehicles.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the 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 #: 121202
Approval Date: 12/06/2012

c. Why was this contractor chosen in preference to other?

Sole Source

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Buildings and Grounds Division. Quality of service verified as satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lkoehler	07/11/2013 12:28:22 PM
Division Approval	lfiguero	07/11/2013 14:57:25 PM
Department Approval	lkoehler	07/11/2013 15:09:24 PM
Contract Manager Approval	afrantz	07/16/2013 08:24:13 AM
Budget Analyst Approval	sjohnso9	07/16/2013 12:40:00 PM
BOE Agenda Approval	sbrown	07/16/2013 15:49:19 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14612**

Agency Name: REHABILITATION DIVISION	Legal Entity Name: AFC Fire Company LLC
Agency Code: 901	Contractor Name: AFC Fire Company LLC
Appropriation Unit: 3253-10	Address: 2020 Western Avenue
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89102-4620
If "No" please explain: Not Applicable	Contact/Phone: David and Dawn Murdock 702.382.8254
	Vendor No.: T27002062
	NV Business ID: NV20011066450
To what State Fiscal Year(s) will the contract be charged?	2014-2017

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will 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 % Business Enterprise Set Aside Fund

Agency Reference #: **#1844-17-BEN**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **05/31/2017**

Contract term: **3 years and 304 days**

4. Type of contract: **Contract**

Contract description: **Fire System Service**

5. Purpose of contract:

This is a new contract that continues on-going annual inspection and testing of fire suppression systems and hood filter repair and maintenance (including ANSUL certification) at all existing Business Enterprises of Nevada locations in southern Nevada including the three sites located at the Hoover Dam.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Other basis for payment: Hourly rates are per person. Standard Hourly Rate: \$65.00 Monday-Friday, 7:30 a.m. - 5:00 p.m.; Overtime Rate: \$97.50/hour and \$130/hour for Sundays and Holidays, as outlined in Attachment AA. Immediate Response Rate (within 4 hours of notification): \$97.50/hour Monday-Friday, 7:30 a.m. - 5:00 p.m.. Parts and materials shall be itemized separately on each invoice. Costs for parking at the Hoover Dam will be reimbursed upon approval of submitted ORIGINAL parking receipts. Contract not to exceed \$45,000 for the term of the contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Bureau of Services to the Blind and Visually Impaired/Business Enterprises of Nevada has facilities containing ANSUL system, oven/fire hood and fire extinguishers which require mandatory regular inspections and periodic maintenance and repairs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State Employees do not have the necessary training required to perform these services.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?
Only qualified, responsive response to solicitation.

d. Last bid date: 05/01/2013 Anticipated re-bid date: 02/01/2017

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 providing satisfactory services for the Department of Employment, Training and Rehabilitation since August 2005.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	06/26/2013 16:37:30 PM
Division Approval	mmason	06/27/2013 14:53:55 PM
Department Approval	tnash	06/28/2013 12:21:37 PM
Contract Manager Approval	tnash	07/08/2013 09:26:42 AM
Budget Analyst Approval	knielsen	07/15/2013 13:32:42 PM
BOE Agenda Approval	sbrown	07/16/2013 17:26:07 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14355**

Agency Name: **REHABILITATION DIVISION**
 Agency Code: **901**
 Appropriation Unit: **3253-10**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **Alarmco, Inc.**
 Contractor Name: **Alarmco, Inc.**
 Address: **2007 South Las Vegas Boulevard**
 City/State/Zip: **Las Vegas, NV 89104-2555**
 Contact/Phone: **Gary Greenblott 702.382.5000**
 Vendor No.: **T12898700**
 NV Business ID: **NV19641000258**

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 Enterprises Set Aside

Agency Reference #: **1825-16-BEN**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2015**

Contract term: **1 year and 333 days**

4. Type of contract: **Contract**

Contract description: **Alarm/Key Services**

5. Purpose of contract:

This is a new contract to provide repair, replacement and maintenance services for security and surveillance equipment, key and digital locks and cameras, Closed Circuit TeleVision (CCTV), access control systems and locksmith services for all Business Enterprise of Nevada sites in Southern Nevada, including three sites at the Hoover Dam. Services include bi-annual inspections; monthly service for the 9-camera CCTV system and monitoring of the burglar alarm system at the Arizona Lookout Site at Hoover Dam; and monthly monitoring of the fire alarm system at the High Scaler Cafe and gift store at Hoover Dam.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Other basis for payment: \$80/hour for repair, replacement and maintenance services, to include labor and travel costs; 24/7. All repair and replacement parts/materials shall be itemized and will be paid upon approval of the submitted invoice. CCTV \$40/month, replacement cost of DVRs will be an additional charge; burglar system \$60/month and fire system monitoring \$65/month.

II. JUSTIFICATION

7. What conditions require that this work be done?

Security and safety of staff, customers and equipment at various Southern Nevada Business Enterprises of Nevada facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The work requires knowledge and training of security equipment installation and maintenance.

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?

Alarmco was the lowest responsive bidder.

d. Last bid date: 02/08/2013 Anticipated re-bid date: 02/27/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Alarmco has been under contract with DETR since 2009 and has performed satisfactorily. Alarmco also has current contracts with the Gaming Control Board, Department of Motor Vehicles, and Department of Health and Human Services - Mental Health Division. According to these departments, Alarmco's service has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a: Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	05/29/2013 13:16:01 PM
Division Approval	mcol1	06/10/2013 16:08:04 PM
Department Approval	tnash	06/14/2013 12:39:12 PM
Contract Manager Approval	tnash	06/24/2013 16:00:05 PM
Budget Analyst Approval	knielsen	07/15/2013 15:07:58 PM
BOE Agenda Approval	sbrown	07/16/2013 17:15:22 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: 13152	Amendment Number: 2
Agency Name: REHABILITATION DIVISION	Legal Entity Name: NEVADA BROADCASTERS ASSOCIATION
Agency Code: 901	Contractor Name: NEVADA BROADCASTERS ASSOCIATION
Appropriation Unit: 3265-04	Address: ASSOCIATION
Is budget authority available?: Yes	City/State/Zip: 1050 E FLAMINGO RD STE S102 LAS VEGAS, NV 89119
If "No" please explain: Not Applicable	Contact/Phone: Robert D Fisher 702/794-4994
	Vendor No.: T80990324
	NV Business ID: NV19941133658

To what State Fiscal Year(s) will the contract be charged? **2012-2014**

What is the source of funds that 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 #: 1706-13-Rehab

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/13/2012**
Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/31/2013**

Contract term: **2 years and 109 days**

4. Type of contract: **Contract**

Contract description: **NBA/NCSA**

5. Purpose of contract:

This is the second amendment to the original contract, which continues to provide radio public service announcements to promote employment opportunities for Nevadans with disabilities and to offer assistance to employers in making reasonable accommodations to applicants/employees with disabilities. This amendment extends the termination date from August 31, 2013 to June 30, 2014, increases the contract amount from \$99,500 to \$128,000 due to a continued need for these services and includes a modification to the Scope of Work extending the service term.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$90,000.00
2. Total amount of any previous contract amendments:	\$9,500.00
3. Amount of current contract amendment:	\$28,500.00
4. New maximum contract amount:	\$128,000.00
and/or the termination date of the original contract has changed to:	06/30/2014

II. JUSTIFICATION

7. What conditions require that this work be done?

The Rehabilitation Division is in need of the opportunity to promote employment opportunities for Nevadans with Disabilities and to offer assistance to employers and is pursuant to rules and regulations promulgated by the Federal Communications Commission (FCC).

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, time or the resources to provide these services.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 120206B

Approval Date: 06/28/2013

c. Why was this contractor chosen in preference to other?

Nevada Broadcasters Association is considered a "Sole Source" provider per Federal Communications Commission (FCC) rules regarding Non-Commercial Sustaining Announcements (NCSA).

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Broadcasters Association has partnered with Nevada State Agencies for the past 18 years. Current Non-Commercial Sustaining Announcement campaigns on the air in 2012 and 2013 include the Department of Employment, Training & Rehabilitation, the Nevada State Health Division, the Nevada Insurance Division and the Nevada Department of Transportation and performance has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	07/19/2013 13:18:59 PM
Division Approval	mmason	07/19/2013 13:46:50 PM
Department Approval	tnash	07/19/2013 14:10:04 PM
Contract Manager Approval	tnash	07/19/2013 14:10:07 PM
Budget Analyst Approval	knielsen	07/23/2013 07:15:28 AM
BOE Agenda Approval	sbrown	07/23/2013 09:29:06 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14663**

Agency Name: **EMPLOYMENT SECURITY DIVISION**
Agency Code: **902**
Appropriation Unit: **4770-11**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-CSN**
Contractor Name: **BOARD OF REGENTS-CSN**
Address: **CSN CONTROLLERS OFFICE
3200 E CHEYENNE AVE
NORTH LAS VEGAS, NV 89030**
City/State/Zip: **NORTH LAS VEGAS, NV 89030**
Contact/Phone: null702/651-4344
Vendor No.: D35000800
NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? 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 #: PY13-GR-CSN

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2014**

Contract term: **364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Apprentice Training**

5. Purpose of contract:

This is a new interlocal agreement to provide funds to the College of Southern Nevada Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$390,113.00**

Other basis for payment: State will process payment when request for funds from College of Southern Nevada is received and approved by the department, normally once a month, with the total Contract amount not to exceed \$390,113. These funds represent Program Year 2013 Workforce Investment Act Administration funds administered by the Nevada Department of Employment, Training, and Rehabilitation's Employment Security Division.

II. JUSTIFICATION

7. What conditions require that this work be done?

During the 2011 Nevada Legislature session the source of funding for apprenticeship programs was moved from the Department of Education to DETR in the Governor's budget. Workforce Investment Act (WIA) of 1998.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division does not employ staffs who are qualified to operate an apprenticeship 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: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Interlocal Cooperative Act (NRS per 277.080-277.180)

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of 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

Board of Regents-College of Southern Nevada has been contracted with the department since November of 2011 and performance has been satisfactory.

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mcost1	07/02/2013 13:16:03 PM
Division Approval	rolso1	07/02/2013 15:07:24 PM
Department Approval	tnash	07/02/2013 15:19:56 PM
Contract Manager Approval	tnash	07/08/2013 09:24:47 AM
Budget Analyst Approval	knielsen	07/15/2013 13:06:21 PM
BOE Agenda Approval	sbrown	07/15/2013 13:21:23 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14661**

Agency Name: DETR - EMPLOYMENT SECURITY DIVISION	Legal Entity Name: BOARD OF REGENTS-TMCC
Agency Code: 902	Contractor Name: BOARD OF REGENTS-TMCC
Appropriation Unit: 4770-11	Address: TMCC CONTROLLERS OFFICE 7000 DANDINI BLVD RENO, NV 89512-3999
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89512-3999
If "No" please explain: Not Applicable	Contact/Phone: null775/673-7155
	Vendor No.: D35000812
	NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? 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 #: **PY13-GR-TMCC**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2014**

Contract term: **364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Apprentice Training**

5. Purpose of contract:

This is a new interlocal agreement to provide funds to the Truckee Meadows Community College's Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,148.00**

Other basis for payment: State will process payment when request for funds from Truckee Meadows Community College is received and approved by the department, normally once a month, with the total Contract amount not to exceed \$50,148. These funds represent Program Year 2013 Workforce Investment Act Administration funds administered by the Nevada Department of Employment, Training, and Rehabilitation's Employment Security Division.

II. JUSTIFICATION

7. What conditions require that this work be done?

During the 2011 Nevada Legislature session the source of funding for apprenticeship programs was moved from the Department of Education to DETR in the Governor's budget. Workforce Investment Act (WIA) of 1998

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division does not employ staffs who are qualified to operate an apprenticeship 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: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Interlocal Cooperative Act-NRS 277.280 to NRS 277.180

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Board of Regents-Truckee Meadows Community College has been contracted with the department since October of 2011 and performance has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mcost1	07/02/2013 13:30:00 PM
Division Approval	rolso1	07/02/2013 15:03:41 PM
Department Approval	tnash	07/08/2013 09:23:58 AM
Contract Manager Approval	tnash	07/08/2013 09:24:00 AM
Budget Analyst Approval	sbrown	07/15/2013 13:22:07 PM
BOE Agenda Approval	sbrown	07/15/2013 13:22:13 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14662**

Agency Name: **EMPLOYMENT SECURITY DIVISION**
 Agency Code: **902**
 Appropriation Unit: **4770-11**
 Is budget authority available?: **Yes**
 If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS-WNC**
 Contractor Name: **BOARD OF REGENTS-WNC**
 Address: **WNC CONTROLLERS OFFICE**
2201 W COLLEGE PKWY
 City/State/Zip: **CARSON CITY, NV 89703-7316**
 Contact/Phone: null775/445-4229
 Vendor No.: D35000822
 NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? 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 #: PY13-GR-WNC

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2014**Contract term: **364 days**4. Type of contract: **Interlocal Agreement**Contract description: **Apprentice Training**

5. Purpose of contract:

This is a new interlocal agreement to provide funds to the Western Nevada College's Apprenticeship Programs, formerly funded by the Department of Education, now funded solely by the Department of Employment, Training, and Rehabilitation. These programs provide training to eligible participants in several occupations such as electrical and plumbing and funding is allocated toward each occupational program based on the number of students enrolled.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$19,188.00**

Other basis for payment: State will process payment when request for funds from Western Nevada College is received and approved by the department, normally once a month, with the total Contract amount not to exceed \$19,188. These funds represent Program Year 2013 Workforce Investment Act Administration funds administered by the Nevada Department of Employment, Training, and Rehabilitation's Employment Security Division.

II. JUSTIFICATION

7. What conditions require that this work be done?

During the 2011 Nevada Legislature session the source of funding for apprenticeship programs was moved from the Department of Education to DETR in the Governor's budget. Workforce Investment Act (WIA) of 1998

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division does not employ staffs who are qualified to operate an apprenticeship 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: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Interlocal Cooperative Act-NRS 277.280 to NRS 277.180

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Board of Regents-Western Nevada College has been contracted with the department since October of 2011 and performance has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mcost1	07/03/2013 07:44:26 AM
Division Approval	rolso1	07/03/2013 12:53:37 PM
Department Approval	tnash	07/09/2013 09:52:12 AM
Contract Manager Approval	tnash	07/09/2013 09:52:15 AM
Budget Analyst Approval	knielsen	07/15/2013 13:48:25 PM
BOE Agenda Approval	sbrown	07/16/2013 17:19:36 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14643**

Agency Name: **EMPLOYMENT SECURITY DIVISION**
Agency Code: **902**
Appropriation Unit: **4770-12**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Legal Entity Name: **GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT**
Contractor Name: **GOVERNORS OFFICE OF ECONOMIC DEVELOPMENT**
Address: **808 W NYE LN**
City/State/Zip: **CARSON CITY, NV 89703-1544**
Contact/Phone: null775/687-9900
Vendor No.: D10200000
NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Career Enhancement Program

Agency Reference #: **FY14-CEP-GOED**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2013**

Anticipated BOE meeting date **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2014**

Contract term: **302 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Economic Development**

5. Purpose of contract:

This is a new interlocal agreement to provide funding in support of the Governor's Office of Economic Development training program, Train Employees Now (TEN) and the Emerging Small Business Certification Program. The program was launched to upgrade the skills of potential employees of businesses relocating to or expanding into Nevada, which is anticipated to reduce dependence on the Nevada unemployment system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00**

Other basis for payment: Payments to be made upon approval of the request for funds from the Governor's Office of Economic Development, normally once a month, with the total contract amount not to exceed \$600,000.

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada Revised Statutes 231.068 grants for programs for occupational education; accounting of money appropriated for awarding grants.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The division does not employ staff whose responsibility is to provide training, only to connect workers to training opportunities.

9. Were quotes or proposals solicited? **No**

Was the solicitation (RFP) done by the 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 - Interlocal contract

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Governor's Office of Economic Development has been under contract with the Department of Employment, Training, and Rehabilitation since 1999 with satisfactory service.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a: Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mcost1	07/01/2013 13:27:28 PM
Division Approval	rolso1	07/01/2013 13:42:25 PM
Department Approval	tnash	07/01/2013 14:05:16 PM
Contract Manager Approval	tnash	07/03/2013 11:34:15 AM
Budget Analyst Approval	knielsen	07/15/2013 14:48:11 PM
BOE Agenda Approval	sbrown	07/16/2013 17:30:24 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **14611**

Agency Name: EMPLOYMENT SECURITY DIVISION	Legal Entity Name: Montana Department of Labor and Industry
Agency Code: 902	Contractor Name: Montana Department of Labor and Industry
Appropriation Unit: 4770-11	Address: Workforce Services Division
Is budget authority available?: Yes	P. O. Box 1728
If "No" please explain: Not Applicable	City/State/Zip: Helena, MT 59624
	Contact/Phone: null406-444-3293
	Vendor No.:
	NV Business ID: Government Entity
To what State Fiscal Year(s) will the contract be charged? 2014	

What is the source of funds that will be used to pay the contractor? 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 #: 1781-13-ESD

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2013**Contract term: **60 days**4. Type of contract: **Interlocal Agreement**Contract description: **Website Development**

5. Purpose of contract:

This is a new interlocal agreement, which provides for the update of Nevada's Workforce Informer website. The Montana Department of Labor and Industry, Workforce Services Division, has been designated by the U.S. Department of Labor to provide the hardware, software, infrastructure, and personnel necessary to update the operational functionality of the Labor Market Information Partnership consortium of states Workforce Informer websites. The Workforce Informer website provides up-to-date and important labor market information to Nevada's employer community and other key customers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: The Montana Department of Labor and Industry, Workforce Services Division, agrees to provide the services outlined in the scope of work at a cost not to exceed \$20,000 for the term of the contract. The Department of Employment, Training and Rehabilitation (DETR) will process payment upon receipt of a "Statement of Expenses," which details the services that were performed by the Montana Department of Labor and Industry, Workforce Services Division. The maximum amount of this contract shall not exceed \$20,000 for the term of the contract. DETR will reimburse for expenditures incurred to update the Workforce Informer website as allowable under this contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

The U.S. Department of Labor designated the Montana Department of Labor and Industry, Workforce Services Division to update the operational functionality of the Workforce Informer websites on behalf of the Labor Market Information Consortium, which consists of 15 states including Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not possess the hardware, software, infrastructure, or trained personnel to host this particular interactive web site.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

Interlocal agreement with another public entity.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 of Montana has been under contract with DETR since 2011 and has performed satisfactorily.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	06/18/2013 14:55:18 PM
Division Approval	lparven	06/18/2013 15:23:39 PM
Department Approval	tnash	06/18/2013 15:38:35 PM
Contract Manager Approval	tnash	06/20/2013 13:25:56 PM
DoIT Approval	lmuelle1	06/24/2013 10:02:10 AM
Budget Analyst Approval	knielsen	07/15/2013 14:41:15 PM
BOE Agenda Approval	sbrown	07/16/2013 17:17:59 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

<p>1. Contract Number: 13663</p> <p>Agency Name: EMPLOYMENT SECURITY DIVISION</p> <p>Agency Code: 902</p> <p>Appropriation Unit: 4770-11</p> <p>Is budget authority available?: Yes</p> <p>If "No" please explain: Not Applicable</p> <p>To what State Fiscal Year(s) will the contract be charged? 2013-2014</p> <p>What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.</p> <table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">General Funds</td> <td style="width: 10%;">0.00 %</td> <td style="width: 30%;">Fees</td> <td style="width: 10%;">0.00 %</td> </tr> <tr> <td>X Federal Funds</td> <td>100.00 %</td> <td>Bonds</td> <td>0.00 %</td> </tr> <tr> <td>Highway Funds</td> <td>0.00 %</td> <td>Other funding</td> <td>0.00 %</td> </tr> </table> <p>Agency Reference #: PY12-A-02</p>	General Funds	0.00 %	Fees	0.00 %	X Federal Funds	100.00 %	Bonds	0.00 %	Highway Funds	0.00 %	Other funding	0.00 %	<p>Amendment Number: 2</p> <p>Legal Entity Name: WORKFORCE CONNECTIONS</p> <p>Contractor Name: WORKFORCE CONNECTIONS</p> <p>Address: 7251 W LAKE MEAD BLVD STE 250</p> <p>City/State/Zip: LAS VEGAS, NV 89128-8365</p> <p>Contact/Phone: Maven Dano 702/638-8750</p> <p>Vendor No.: T81079028</p> <p>NV Business ID: Governmental Entity</p>
General Funds	0.00 %	Fees	0.00 %										
X Federal Funds	100.00 %	Bonds	0.00 %										
Highway Funds	0.00 %	Other funding	0.00 %										

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2012**

Anticipated BOE meeting date: 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2014**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Workforce WIA Adult**

5. Purpose of contract:

This is the second amendment to the original interlocal agreement, which continues ongoing employment and training services to adults in southern Nevada as required by the Workforce Investment Act (WIA) of 1998 (Code of Federal Regulations Part 652 et al). This amendment increases the maximum amount from \$8,316,715 to \$9,740,615 by transferring \$1,423,900 from the WIA Dislocated Worker funding allocation to the the WIA Adult funding allocation.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$6,316,715.00
2. Total amount of any previous contract amendments:	\$2,000,000.00
3. Amount of current contract amendment:	\$1,423,900.00
4. New maximum contract amount:	\$9,740,615.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Workforce Investment Act (WIA) of 1998

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Governor's Workforce Investment Board designated the local workforce investment boards to facilitate the required employment and training services in compliance with the Workforce Investment Act.

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the 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?

Governor's Designated Agency - Interlocal contract
 CFR Part 652 et al

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Workforce Connections has been under contract with the Department of Employment, Training and Rehabilitation since 2000 and has performed satisfactorily

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
 Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	06/12/2013 15:43:25 PM
Division Approval	lparven	06/12/2013 15:47:24 PM
Department Approval	tnash	06/12/2013 15:51:05 PM
Contract Manager Approval	tnash	06/14/2013 12:53:20 PM
Budget Analyst Approval	knielsen	06/18/2013 09:40:51 AM
BOE Agenda Approval	sbrown	06/25/2013 16:08:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number:	13664	Amendment Number:	2
		Legal Entity Name:	WORKFORCE CONNECTIONS
Agency Name:	EMPLOYMENT SECURITY DIVISION	Contractor Name:	WORKFORCE CONNECTIONS
Agency Code:	902	Address:	7251 W LAKE MEAD BLVD STE 250
Appropriation Unit:	4770-11	City/State/Zip:	LAS VEGAS, NV 89128-8365
Is budget authority available?:	Yes	Contact/Phone:	Maven Dano 702/638-8750
If "No" please explain:	Not Applicable	Vendor No.:	T81079028
		NV Business ID:	Governmental Entity
To what State Fiscal Year(s) will the contract be charged?			2013-2014
What is the source of funds that will be used to pay the contractor? 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 #:	PY12-DW-02		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2012**

 Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2014**

Contract term: **1 year and 364 days**

4. Type of contract: **Interlocal Agreement**

Contract description: **Workforce WIA DW**

5. Purpose of contract:

This is the second amendment to the original interlocal agreement, which continues ongoing employment and training services to dislocated workers in southern Nevada as required by the Workforce Investment Act (WIA) of 1998 (Code of Federal Regulations Part 652 et al). This amendment reduces the maximum amount from \$4,847,926 to \$3,424,026 by transferring \$1,423,900 from the WIA Dislocated Worker funding allocation to the WIA Adult funding allocation.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$6,847,926.00
2. Total amount of any previous contract amendments:	-\$2,000,000.00
3. Amount of current contract amendment:	-\$1,423,900.00
4. New maximum contract amount:	\$3,424,026.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Workforce Investment Act (WIA) of 1998

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Governor's Workforce Investment Board designated the local workforce investment boards to facilitate the required employment and training services in compliance with the Workforce Investment Act.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the 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?

Governor's Designated Agency - Interlocal contract
CFR Part 652 et al

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Workforce Connections has been under contract with the Department of Employment, Training and Rehabilitation since 2000 and has performed satisfactorily.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

15. Not Applicable

16. Not Applicable

17. Not Applicable

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	06/12/2013 15:44:28 PM
Division Approval	lparven	06/12/2013 15:47:36 PM
Department Approval	tnash	06/12/2013 15:51:44 PM
Contract Manager Approval	tnash	06/14/2013 12:52:40 PM
Budget Analyst Approval	knielsen	06/18/2013 09:48:09 AM
BOE Agenda Approval	sbrown	06/26/2013 10:11:15 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: 14483	Amendment Number: 1
Agency Name: EMPLOYMENT SECURITY DIVISION	Legal Entity Name: EMCOR SERVICES DBA
Agency Code: 902	Contractor Name: EMCOR SERVICES DBA
Appropriation Unit: 4771-07	Address: MESA ENERGY SYSTEMS 6255 MCLEOD DR STE 8
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89120-4404
If "No" please explain: Not Applicable	Contact/Phone: Philip D. Robinson 702/597-0314
	Vendor No.: T27027115A
	NV Business ID: NV20071267110

To what State Fiscal Year(s) will the contract be charged? **2013-2015**

What is the source of funds that 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	1.90 %	Fees	0.00 %
<input checked="" type="checkbox"/> Federal Funds	69.00 %	Bonds	0.00 %
Highway Funds	0.00 %	<input checked="" type="checkbox"/> Other funding	29.10 % BEN, ESD Special Fund and Career Enhancement Program

Agency Reference #: 1837-15-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/05/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2015**

Contract term: **2 years and 25 days**

4. Type of contract: **Contract**

Contract description: **HVAC LAS VEGAS**

5. Purpose of contract:

This is the first amendment to the original contract, which continues ongoing HVAC service and repair for the Department of Employment Training and Rehabilitation facilities in Las Vegas Nevada, on an as needed basis. This amendment increases the maximum amount from \$9,500 to \$49,500 due to unanticipated repairs and the continued need for service.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$9,500.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$40,000.00
4. New maximum contract amount:	\$49,500.00

II. JUSTIFICATION

7. What conditions require that this work be done?

HVAC mechanical systems need to be maintained for longevity and effective operation of equipment.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise to perform these tasks.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?
One in a vendor pool.

d. Last bid date: 04/22/2013 Anticipated re-bid date: 04/22/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

MESA Energy, dba EMCOR Services of Nevada has been under contract with the Department of Employment, Training and Rehabilitation since June, 2013 and service has been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	07/16/2013 16:38:19 PM
Division Approval	tnash	07/18/2013 08:57:33 AM
Department Approval	tnash	07/18/2013 08:57:36 AM
Contract Manager Approval	tnash	07/19/2013 14:09:16 PM
Budget Analyst Approval	knielsen	07/23/2013 08:46:50 AM
BOE Agenda Approval	sbrown	07/23/2013 09:28:24 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: 14195	Amendment Number: 1
Agency Name: EMPLOYMENT SECURITY DIVISION	Legal Entity Name: WESTERNAIRE MECHANICAL
Agency Code: 902	Contractor Name: WESTERNAIRE MECHANICAL SERVICES INC
Appropriation Unit: 4771-07	Address: 270 DOUBLEBACK RD
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89506-9144
If "No" please explain: Not Applicable	Contact/Phone: Gary Johnson 775/677-1040
	Vendor No.: T81077993
	NV Business ID: NV19851016139

To what State Fiscal Year(s) will the contract be charged? **2013-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % ESD Special Fund

Agency Reference #: 1796-15-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/09/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **05/31/2015**

Contract term: **2 years and 52 days**

4. Type of contract: **Contract**

Contract description: **HVAC**

5. Purpose of contract:

This is the first amendment to the original contract, which continues ongoing HVAC maintenance services and repair for the Department of Employment, Training and Rehabilitation facilities in Reno/Sparks, Carson City, and Fallon areas. This amendment increases the maximum amount from \$9,500 to \$19,000 due to a greater than anticipated for these services.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$9,500.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$9,500.00
4. New maximum contract amount:	\$19,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Mechanical equipment often requires repair and maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the time or expertise to perform these tasks.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?
One in a vendor pool.

d. Last bid date: 03/31/2013 Anticipated re-bid date: 03/31/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Westnaire has been providing service to the Department of Employment, Training and Rehabilitation since 2009 and has performed satisfactorily.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tmyler	06/26/2013 16:36:09 PM
Division Approval	tnash	07/09/2013 09:44:05 AM
Department Approval	tnash	07/09/2013 09:44:08 AM
Contract Manager Approval	tnash	07/09/2013 09:44:14 AM
Budget Analyst Approval	knielsen	07/15/2013 16:25:34 PM
BOE Agenda Approval	sbrown	07/16/2013 17:14:09 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: 13950	Amendment Number: 1
Agency Name: SILVER STATE HEALTH INSURANCE EXCHANGE	Legal Entity Name: KPS 3 INC
Agency Code: 960	Contractor Name: KPS 3 INC
Appropriation Unit: 1400-70	Address: 50 W LIBERTY ST STE 640
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89501-1946
If "No" please explain: Not Applicable	Contact/Phone: null775/686-7439
	Vendor No.: PUR0004720
	NV Business ID: NV19941094961

To what State Fiscal Year(s) will the contract be charged? **2013-2014**

What is the source of funds that will be used to pay the contractor? 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 **01/08/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved **03/31/2014**

Termination Date:

Contract term: **1 year and 81 days**

4. Type of contract: **Contract**

Contract description: **KPS3 Inc.**

5. Purpose of contract:

This is the first amendment to the original contract to provide marketing and outreach education about the Exchange to the State of Nevada. This amendment adds language to the scope of work and increases the maximum amount from \$6,000,000 to \$7,350,000 due to additional marketing and outreach demand affecting Nevada's underinsured and uninsured populations.

6. CONTRACT AMENDMENT

1. The maximum amount of the original contract:	\$6,000,000.00
2. Total amount of any previous contract amendments:	\$0.00
3. Amount of current contract amendment:	\$1,350,000.00
4. New maximum contract amount:	\$7,350,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?

Marketing and outreach is a key component to the success of the Exchange. A vast amount of research and planning is required to ensure that the marketing and outreach is completed to the appropriate target audience emphasizing the most relevant content. There are tight deadlines for each phase of this project to ensure that the expected outcome is reached.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The scope of this project has a strict deadline and is too large and time consuming for the work load of state employees to handle.

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):

[Empty text box]

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor received the highest score from the evaluation team.

d. Last bid date: 11/01/2012 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
 LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ceaton	06/25/2013 09:32:49 AM
Division Approval	sderouss	06/25/2013 10:02:19 AM
Department Approval	sderouss	06/25/2013 10:02:22 AM
Contract Manager Approval	sderouss	06/25/2013 10:02:25 AM
Budget Analyst Approval	nhovden	07/02/2013 14:10:38 PM
BOE Agenda Approval	nhovden	07/02/2013 14:10:45 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14683**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: CELTIC ENERGY INCORPORATED
Agency Code: MSA	Contractor Name: CELTIC ENERGY INCORPORATED
Appropriation Unit: 9999 - All Categories	Address: 701 HEBRON AVE FL 3
Is budget authority available?: Yes	City/State/Zip: GLASTONBURY, CT 06033-2489
If "No" please explain: Not Applicable	Contact/Phone: null860/882-1515
	Vendor No.: T27032062
	NV Business ID: NV20101152045

To what State Fiscal Year(s) will the contract be charged? **2014**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: 1856

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **05/31/2014**

Contract term: **291 days**

4. Type of contract: **MSA**

Contract description: **3rd-Party Consulting**

5. Purpose of contract:

This is a new contract to provide third-party consulting services for energy services performance contracting (ESPC) to meet the requirements of NRS 333A.086.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00**

Other basis for payment: Contractor will charge set rates per hour by level of service as outlined in the Contractor's response (Attachment DD).

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 333A.086 requires the use of a third-party consultant to assist with energy services performance contracts.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Most agencies have neither the resources nor the expertise to provide these services.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Three responses to an informal solicitation were received, the Purchasing Division concluded that two vendors (kW Engineering and Celtic Energy) were the most qualified to be awarded contracts.

d. Last bid date: 02/26/2010 Anticipated re-bid date: 12/15/2013

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

MSA administered by the Purchasing Division: April 2005 through March 2009.

Performance was satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	07/08/2013 16:20:06 PM
Division Approval	ldeloach	07/08/2013 16:20:11 PM
Department Approval	ldeloach	07/08/2013 16:20:14 PM
Contract Manager Approval	cjanes	07/11/2013 07:59:18 AM
Budget Analyst Approval	myoun3	07/11/2013 12:44:28 PM
BOE Agenda Approval	sbrown	07/15/2013 12:57:25 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14515**

Agency Name: MASTER SERVICE AGREEMENTS	Legal Entity Name: Lexmark International Inc
Agency Code: MSA	Contractor Name: Lexmark International Inc
Appropriation Unit: 9999 - All Categories	Address: 740 West New Circle Road
Is budget authority available?: Yes	City/State/Zip: Lexington, KY 40550
If "No" please explain: Not Applicable	Contact/Phone: Mary Beth Carter 859-232-2116
	Vendor No.: PUR0000761
	NV Business ID: NV20131316931
To what State Fiscal Year(s) will the contract be charged?	2014-2015

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: 3031

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2014**

Contract term: **1 year and 30 days**

4. Type of contract: **MSA**

Contract description: **Managed Print Svcs**

5. Purpose of contract:

This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Services (MPS) contracts enable efficient and cost effective use of office equipment, and provide a vehicle for a vendor to assume the management of an agency's printer and multi-function copier fleet.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies and political subdivisions may acquire the need for Print Management Services.

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 ability to provide Print Management 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 vendor is one of six vendors chosen to provide services by the evaluation committee based on predetermined criteria and weights through a WSCA/NASPO Cooperative Solicitation process.

d. Last bid date: 03/09/2012 Anticipated re-bid date: 03/09/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sberry	06/14/2013 11:54:45 AM
Division Approval	sberry	06/14/2013 11:54:47 AM
Department Approval	sberry	06/14/2013 11:54:50 AM
Contract Manager Approval	sberry	06/14/2013 11:54:52 AM
Budget Analyst Approval	myoun3	07/03/2013 16:39:22 PM
BOE Agenda Approval	sbrown	07/08/2013 07:58:59 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **14651**

Agency Name: MSA MASTER SERVICE AGREEMENTS	Legal Entity Name: Ricoh Americas Corp.
Agency Code: MSA	Contractor Name: Ricoh Americas Corp.
Appropriation Unit: 9999 - All Categories	Address: 19304 SE 145th St
Is budget authority available?: Yes	City/State/Zip: Renton , WA 98059
If "No" please explain: Not Applicable	Contact/Phone: Bart Lemmon 425-255-0730
	Vendor No.:
	NV Business ID: NV19871019871

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: RFP #3031

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2013**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2014**

Contract term: **1 year and 18 days**

4. Type of contract: **MSA**

Contract description: **Managed Print Svcs**

5. Purpose of contract:

This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Service (MPS) contracts enable efficient and cost effective use of office equipment, and provides a vehicle for a vendor to assume the management of an agency's printer and multi-function copier fleet.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies and political subdivisions may acquire the need for Print Management Services.

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 ability or expertise to provide Print Management 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 vendor is one of six vendors chosen to provide services by the evaluation committee based on predetermined criteria and weights through a WSCA-NASPO Cooperative Solicitation process.

d. Last bid date: 03/09/2012 Anticipated re-bid date: 03/09/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Ricoh Americas Corp is a current MSA contractor for multifunction copiers; the services provided have been satisfactory.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sberry	07/01/2013 15:40:23 PM
Division Approval	sberry	07/01/2013 15:40:25 PM
Department Approval	sberry	07/01/2013 15:40:27 PM
Contract Manager Approval	sberry	07/01/2013 15:40:30 PM
Budget Analyst Approval	myoun3	07/05/2013 09:18:24 AM
BOE Agenda Approval	sbrown	07/08/2013 08:01:47 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: **14579**

Agency Name: **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: **STRATEGIC PROGRESS, LLC**

Contractor Name: **STRATEGIC PROGRESS, LLC**
Address: **1680 Shadow Park Drive**

City/State/Zip: **Reno, NV 89523**

Contact/Phone: **Cyndy Ortiz Gustafson 702/241-8033**

Vendor No.:

NV Business ID: **NV20051774907**

To what State Fiscal Year(s) will the contract be charged? **2014-2017**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 2046**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date: **08/2013**

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2017**

Contract term: **3 years and 334 days**

4. Type of contract: **MSA**

Contract description: **Grant Development**

5. Purpose of contract:

This is a new contract to assist agencies in securing and administering Federal grant awards to support the delivery of programs to benefit Nevadans. The contract will be mandatory for state agencies to use when buying these services. Services will be performed on an as-needed basis and will include, but not be limited to, working with state agencies to develop grant strategies to support existing programs, identifying new Federal funding opportunities, consulting and project management of special competitive opportunities in conjunction with state agency personnel, preparing applications and budgets, administering awarded grant funds, and training of state grant analysts in effective grant writing and administration.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00**

Other basis for payment: In accordance with the fees delineated in the Contractor's Revised Cost Proposal, dated 05/30/13.

II. JUSTIFICATION

7. What conditions require that this work be done?

The state is attempting to increase the quality of grant writers who assist state agencies in order to obtain more federal grants to benefit Nevadans.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state has neither the resources nor the expertise to perform all of these services.

9. Were quotes or proposals solicited? **Yes**

Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFQ 2046 and in accordance with NRS 333, the selected vendor was one of four vendors chosen by an independently appointed evaluation committee.

d. Last bid date: 04/03/2013 Anticipated re-bid date: 11/01/2016

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 Employment, Training and Rehabilitation (2010)
Workforce Connections (2012)
Office of Veterans' Services (2012)
Nevada Early Intervention Services (2011-2012)
Maternal and Child Health (2012)
Nevada State Health Division (2012)
Office of Community Services (2013)

The evaluation committee found this vendor's services to have been performed satisfactorily.

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Ideloach	07/03/2013 14:00:46 PM
Division Approval	Ideloach	07/03/2013 14:00:49 PM
Department Approval	Ideloach	07/03/2013 14:00:52 PM
Contract Manager Approval	cjanes	07/03/2013 14:25:25 PM
Budget Analyst Approval	myoun3	07/10/2013 15:56:44 PM
BOE Agenda Approval	sbrown	07/11/2013 09:44:49 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: **14702**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Toshiba America Business Solutions, Inc.
Agency Code:	MSA	Contractor Name:	Toshiba America Business Solutions, Inc.
Appropriation Unit:	9999 - All Categories	Address:	9740 Irvine Blvd.
Is budget authority available?:	Yes	City/State/Zip:	Irvine, CA 92618
If "No" please explain:	Not Applicable	Contact/Phone:	Christina Fisher 949-462-6325
		Vendor No.:	
		NV Business ID:	NV20101031559

To what State Fiscal Year(s) will the contract be charged? **2014-2015**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding 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 #: RFP #3031

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 08/2013

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **08/31/2014**

Contract term: **1 year and 30 days**

4. Type of contract: **MSA**

Contract description: **Managed Print Srvcs**

5. Purpose of contract:

This is a new master service agreement to provide Managed Print Services to various state agencies and political subdivisions within the State of Nevada. Managed Print Services (MPS) contracts enable efficient and cost effective use of office equipment and provides a vehicle to assume the management of an agency's printer and multi-function copier fleet.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies and political subdivisions may acquire the need for Print Management Services.

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 ability or expertise to provide Print Managed 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 vendor is one of six vendors chosen to provide services by the evaluation committee based on predetermined criteria and weights through a WSCA-NASPO Cooperative Solicitation process.

d. Last bid date: 03/09/2012 Anticipated re-bid date: 03/09/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

12. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

13. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

14. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

15. a. Is the Contractor Name the same as the legal Entity Name?

Yes

16. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

17. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

18. Agency Field Contract Monitor:

19. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sberry	07/09/2013 08:09:39 AM
Division Approval	sberry	07/09/2013 08:09:41 AM
Department Approval	sberry	07/09/2013 08:09:43 AM
Contract Manager Approval	sberry	07/09/2013 08:09:45 AM
Budget Analyst Approval	myoun3	07/10/2013 14:54:38 PM
BOE Agenda Approval	sbrown	07/11/2013 09:43:11 AM
BOE Final Approval	Pending	

Brian Sandoval
Governor



Jeff Mohlenkamp
State Budget Director

Stephanie Day
Deputy State Budget Director

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
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: July 12, 2013
To: Stephanie Day, Deputy Director
Department of Administration
From: Jim Rodriguez, Budget Analyst IV
Budget and Planning Division
Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES – DIVISION OF
STATE LANDS

Reason for submittal, i.e., statutory requirement, letter of intent, IFC request, etc.

Pursuant to NRS Chapters 111, Statutes of the Nevada, 1989 at page 263, the Division of State Lands 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. Also, pursuant to Chapter 355, Statutes of Nevada, 1993, at page 1153, the agency is to report quarterly on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program. This submittal reports on program activities for the fiscal quarter ending December 31, 2012 (reference NRS 321.5954).

Brief description

- **1989 Tahoe Basin Act**
 - The agency reports there were no transfers of lands or interests in lands during the quarter
 - There were no acquisitions of lands or interests in lands during the quarter.

REVIEWED: SB
INFO ITEM: _____

- **Lake Tahoe Mitigation Program**

- There was one transaction finalized in this quarter. The transaction included 1,467 square feet of environmentally sensitive land coverage from a private homeowner in the Stateline area of Douglas County. That transaction was completed on May 21, 2013.

LEO DROZDOFF
Director

Department of Conservation
and Natural Resources

JAMES R. LAWRENCE
Administrator

BRIAN SANDOVAL
Governor



State Land Office
State Land Use Planning Agency
Nevada Tahoe Resource Team
Conservation Bond Program -Q1

Address Reply to

Division of State Lands
901 S. Stewart St. Suite 5003
Carson City, Nevada 89701-5246
Phone (775) 684-2720
Fax (775) 684-2721
Web www.lands.nv.gov

STATE OF NEVADA
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
Division of State Lands

July 1, 2013

MEMORANDUM

TO: Jeff Mohlenkamp, Clerk
Nevada State Board of Examiners

FROM: James Lawrence, Administrator
Division of State Lands

RE: **BOARD OF EXAMINERS QUARTERLY REPORT OF THE TAHOE BASIN ACT AND
LAKE TAHOE MITIGATION PROGRAM – 4th QUARTER SFY 2013**

Tahoe Basin Act:

Pursuant to Chapter 111, Statutes of Nevada, 1989, at page 263, which requires a quarterly report to the Board of Examiners, this memorandum is to report lands or interests in lands transferred, sold, exchanged or leased under the Tahoe Basin Act program during the quarter ending June 30, 2013.

- There were no transfers of lands or interests in lands during this quarter.
- There were no acquisitions of lands or interests in lands during this quarter.

Lake Tahoe Mitigation Program:

Pursuant to Chapter 355, Statutes of Nevada, 1993, at page 1153, which requires a quarterly report to the Board of Examiners, this memorandum is to report real property or interests in real property transferred under this program during the quarter ending June 30, 2013.

- On May 21, 2013 a transaction was finalized to acquire 1,467 square feet of environmentally sensitive land coverage from a private homeowner in the Stateline area of Douglas County. This land coverage was purchased using funds collected under the excess coverage mitigation program administered by the Tahoe Regional Planning Agency (TRPA). The land coverage was permanently retired by the Nevada Land Bank as part of the TRPA's threshold attainment goal.

In the event you have any questions or would like additional information please call me.

JL/er

cc: Leo Drozdoff, Director, Department of Conservation and Natural Resources

Addendum:

NRS 321.5954 Powers and duties of Division and State Land Registrar regarding programs to preserve, restore and enhance Lake Tahoe Basin.

1. In carrying out a program authorized pursuant to NRS 321.5953, the Division may, as the State Land Registrar deems appropriate regarding particular parcels of land:

- (a) Acquire, from a willing owner, real property or an interest in real property in the Lake Tahoe Basin by donation, purchase or exchange;
- (b) Transfer real property or an interest in real property in the Lake Tahoe Basin by sale, lease or exchange;
- (c) Eliminate, or mitigate the effects of, development, land coverage or features or conditions of real property acquired pursuant to paragraph (a) that are detrimental to the natural environment of the Lake Tahoe Basin; and
- (d) Retire, extinguish or otherwise terminate rights to develop or place land coverage on real property acquired pursuant to paragraph (a).

2. The State Land Registrar may transfer real property or an interest in real property acquired pursuant to this section:

- (a) To state and federal agencies, local governments and nonprofit organizations for such consideration as the State Land Registrar deems to be reasonable and in the interest of the general public.
- (b) To other persons for a price that is not less than the fair market value of the real property or interest.

3. Before real property or an interest in real property is transferred pursuant to this section, the State Land Registrar shall record a declaration of restrictions or deed restrictions if the State Land Registrar determines that such restrictions are necessary to protect the public interest.

4. The State Land Registrar shall report quarterly to the State Board of Examiners regarding the real property or interests in real property transferred pursuant to this section.

5. Notwithstanding any other provision of law, a person shall not acquire, disturb or use real property or an interest in real property acquired by this State pursuant to this section unless the person first obtains written authorization from the State Land Registrar.

6. As used in this section:

(a) "Interest in real property" includes, without limitation:

- (1) An easement for conservation as that term is defined in NRS 111.410;
- (2) The right to develop the real property;
- (3) The right to place land coverage on the real property; and
- (4) Such other easements or rights as are appurtenant to the real property.

(b) "Land coverage" means a covering over or compaction of the natural surface of the ground that prevents water from percolating into the ground.

(Added to NRS by 1999, 2018)