Governor Steve Sisolak
Chairman

Susan Brown
Clerk of the Board

Attorney General Aaron D. Ford
Member

Secretary of State Barbara K. Cegavske
Member

STATE OF NEVADA
BOARD OF EXAMINERS

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

REVISED

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: July 9, 2019, 10:00 AM

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

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

AGENDA

1. **Call to Order / Roll Call**

2. **Public Comment** **(The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).**

3. **Approval of the June 13, 2019 Minutes** **(For possible action)**

4. Department of Administration – Victims of Crime Fiscal Year 2019 3rd Quarter Report and Fiscal Year 2019 4th Quarter Recommendation

(For possible action)

Pursuant to NRS 217.260, Department of Administration shall prepare and submit quarterly to the Board of Examiners, for its approval, estimates of available revenue in the Fund for the compensation of victims of crime, and the anticipated expenses for the quarter. Claims are categorized as to their priority; and claims categorized as the highest priority are paid, in whole or in part, before other claims.

The 3rd quarter fiscal year 2019 Victims of Crime Program report states all approved claims were resolved totaling $3,169,713.87 with $1,578,567.69 paid out of the Victims of Crime Program account and $1,591,146.18 resolved through vendor fee adjustments and cost containment policies.

The program anticipates future cash available at $7.6 million at the end of Fiscal Year 2019 to help defray crime victims' medical costs. Based on these projections, the Victims of Crime Program recommends paying Priority One, Two and Three claims at 100% of the approved amount for the 4th quarter of fiscal year 2019.

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

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirement of NRS chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

A. Department of Health and Human Services – Division of Public and Behavioral Health

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Dana Tueller a current Mental Health Technician III with Rural Clinics in Lovelock, Nevada, to provide janitorial services at the rural clinic in Lovelock.

B. Secretary of State

Pursuant to NRS 333.705, subsection 1, The Office of the Secretary of State requests authority to contract with Tracy Gillespie, a former Administrative Assistant IV with the Office of the Secretary of State, to scan the Notaries historical files to microfilm and to properly index the files.

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

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
4205	**Department of Conservation and Natural Resources – State Historic Preservation Office**	$13,319	
	Total	**$13,319**	
	Department of Education		
2713	Literacy Programs	$11,070	
2675	Standards and Instructional Support	$31,449	
	Total	**$42,519**	
	Department of Public Safety		
3800	Parole Board	$13,755	
	Total	**$13,755**	

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
	Nevada System of Higher Education		
2980	University of Nevada, Reno	$6,889,894	
2983	Intercollegiate Athletics - University of Nevada, Reno	$26,488	
2986	System Administration	$38,123	
2987	University of Nevada, Las Vegas	$9,248,858	
2988	Intercollegiate Athletics, University of Nevada, Las Vegas	$64,325	
2990	Cooperative Extension Service	$114,664	
2992	University of Nevada, Las Vegas Law School	$485,659	
2994	Great Basin College	$568,168	
3001	Statewide Programs - University of Nevada, Las Vegas	$65,987	
3002	University of Nevada, Las Vegas - Dental School	$536,133	
3003	Business Center North	$80,345	
3005	Nevada State College at Henderson	$551,388	
3010	Desert Research Institute	$255,852	
3011	College of Southern Nevada	$3,913,862	
3012	Western Nevada College	$485,399	
3014	University of Nevada, Las Vegas - School of Medicine	$884,865	
3018	Truckee Meadows Community College	$946,056	
3221	Laboratory and Research	$23,727	
2982	University of Nevada, Reno – School of Medicine	$1,238,182	
	Total	**$26,417,975**	

7. Approval of Proposed Leases (For possible action)

8. Approval of Proposed Contracts (For possible action)

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

10. Clerk of the Board Contracts (Informational only)

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than $50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold ($10,000 - $49,999). Attached is a list of all applicable approvals for contracts and amendments approved from May 21, 2019 through June 17, 2019.

11. Reports (Informational only)

Stale Claims Account, Emergency Accounts, Statutory Contingency Accounts

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of June 25, 2019.

The TORT Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency supplement funding for eligible agencies within statutory authority.

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

TORT Claim Fund	$ 5,942,701.06
Statutory Contingency Account	$ 14,200,000.78
Stale Claims Account	$ 2,700,504.34
Emergency Account	$ 279,841.00
Disaster Relief Account	$ 11,103,252.83
IFC Unrestricted Contingency Fund General Fund	$ 25,000,000.16
IFC Unrestricted Contingency Highway Fund	$ 1,620,336.35
IFC Restricted Contingency Fund General Fund	$ 47,139,896.00
IFC Restricted Contingency Highway Fund	$ 2,220,935.00

12. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

13. Adjournment (For possible action)

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body will limit public comments to three minutes per speaker and may place other reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Dale Ann Luzzi at (775) 684-0223 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail her at daluzzi@finance.nv.gov. Supporting materials for this meeting are available at: 209 E. Musser Street, Suite 200, Carson City, NV 89701 or by contacting Dale Ann Luzzi at (775) 684-0223 or by email at daluzzi@finance.nv.gov

Agenda Posted at the Following Locations:

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

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

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MEETING MINUTES

Date and Time: June 13, 2019, 10:00 AM

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

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

MEMBERS PRESENT:
Governor Steve Sisolak
Attorney General Aaron Ford – Present in Las Vegas
Secretary of State Barbara Cegavske – Present in Las Vegas

STAFF PRESENT:
Susan Brown, Clerk of the Board
Rosalie Bordelove, Board Counsel, Deputy Attorney General
Dale Ann Luzzi, Board Secretary

OTHERS PRESENT:
Douglas Beatty, Administrative Services Officer, Colorado River Commission
Sandra Morgan, Chairwoman, Gaming Control Board
Rachel Anderson, General Counsel, Office of the Attorney General
Christian Schonlau, Chief Financial Officer, Office of the Attorney General

1. Call to Order / Roll Call

Governor: Good morning. I would like to call today's meeting of the State of Nevada Board of Examiners to order for Thursday, June 13, 2019 at 10:00 AM.

Board Secretary: Let the record reflect we do have a quorum.

Governor: Right, thank you.

2. Public Comment **(The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).**

Governor: Item 2, *Public Comment*. This is the first time set aside for public comment. Anyone wishing to address the Board on any item on today's agenda, that's items on the agenda, please step forward, identify yourself for the record and comments will be limited to three minutes. Do we have anybody in Carson City? Seeing none. Do we have anybody in Las Vegas?

Attorney General: No one in Las Vegas.

Governor: Seeing and hearing no one for public comment.

3. Approval of the May 14, 2019 Minutes **(For possible action)**

Governor: Move on to agenda item number 3, *Approval of the May 14, 2019 Minutes*. Do I have a motion regarding the minutes?

Clerk: Good morning, Governor, Members of the Board. Governor, I would just note that there are a couple of minor changes that need to be made on the minutes before they're posted.

Governor: Yes, please.

Clerk: On the first page, on Page 18 and Page 21 there are some minor edits that will need to be made.

Governor: Okay, nothing substantive?

Clerk: Correct, nothing substantive.

Attorney General: Move for approval.

Governor: We have a motion on the floor to approve the minutes with corrections from General Ford. Is there any discussion? Seeing and hearing none, all in favor signify by saying aye. Any opposed? Motion passes.

4. Review and Consideration of Victims of Crime Appeal
(For possible action)

Pursuant to Nevada Revised Statute (NRS) 217.117, Section 3, the Board may review the case and either 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. The Board may affirm, modify or reverse the decision of the Appeals Officer. The Board will hear the appeal of Mr. James Patterson.

Governor: Item 4, Review and Consideration of Victims of Crime Appeal.

Clerk: Item 4 is a Victims of Crime Appeal. NRS 217 regulates the compensation for certain victims of criminal acts. Victims apply to the Program and a determination is made as to whether or not the victim is entitled to compensation from the Program. A victim whose claims are denied can appeal to a Hearings Officer to have their claims reconsidered. The victim or the Clerk of the Board of Examiners may appeal the decision of the Hearings Officer to an Appeals Officer. Both the Hearings Officer and Appeals Officer process is under the jurisdiction of the Department of Administration.

Upon the Appeals Officer's decision, NRS 217.117(3) allows the applicant or the Clerk of the Board of Examiners to appeal the decision made by the Appeals Officer to the Board of Examiners. The Board of Examiners can render a decision in the case or hold a hearing on the matter.

The item for consideration today is a review of the record of an Appeals Officer decision of an appeal by applicant James Patterson. Mr. Patterson has been notified of the meeting today.

Within 15 days of today's hearing, the Board shall render its decision on the case. The Board may affirm, modify or reverse the decision of the Appeals Officer or it can decide to hold a hearing on the matter within 30 days in which case it would reconsider the evidence provided by both the applicant and the Victims of Crime Program.

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

Governor: Thank you. At this time, is Mr. Patterson or his representative here, in Carson City? Is Mr. Patterson or his representative in Las Vegas?

Attorney General: No Governor.

Governor: Okay. I know that my colleagues have reviewed this item, as have I. Without the Appellant being here, do we have a motion?

Attorney General: Mr. Governor, I move to approve the decision of the panel.

Governor: So, to uphold the decision.

Attorney General: Yes.

Governor: We have a motion to uphold the decision. Is there any discussion on that motion? Hearing and seeing none, all in favor signify by saying aye. Any opposed? Motion passes.

5. State Vehicle Purchases **(For possible action)**

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

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Colorado River Commission	1	$51,933
Total	**1**	**$51,933**

Governor: Next item, Item 5, State Vehicle Purchases.

Clerk: There is one request for one vehicle in this agenda item. The request is from the Colorado River Commission to purchase one replacement vehicle for $51,933. The vehicle being replaced has met the age and mileage requirements in the State Administrative Manual. An amount of $30,002 was funded in the agency's legislatively approved budget. The remaining amount will be paid for using reserves.

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

Governor: I have a question. Could I have the representative come forward, please?

Attorney General: They're here, down here in Vegas, yes, sir.

Governor: Okay. So, it's my understanding now, gentlemen, that there is a relationship between the dealership and the one that's doing the customizing or the upgrades, is that correct?

Douglas Beatty: Good morning, to answer your question, Governor, there is no relationship between the dealership, Jones West Ford and Sierra, the proposed modification vendor. The request at the last meeting requested the vehicle and the

modifications are coordinated through Jones West and Jones West was going to use a different vendor. So, we've modified our approach. We are going to do the modifications with a local vendor.

Governor: Okay. So, it will now be a Nevada vendor?

Douglas Beatty: That's correct.

Governor: A business located in the State of Nevada?

Douglas Beatty: That's correct. Actually, just down the street from our offices.

Governor: I think we made our point. Thank you very much. Do we have any questions on this item?

Attorney General: None down here. We do note that pursuant to your inquiry here, the State has saved $2,500 or so?

Secretary of State: Yes, $2,529.

Attorney General: So, great work, Governor.

Governor: It all adds up, right, General Ford? We appreciate it. Do we have a motion?

Attorney General: Move approval.

Governor: Thank you. Any discussion? All in favor, signify by saying aye. Any opposed? Motion passes. Thank you very much.

6. Authorization to Contract with a Current and/or Former State Employee

(For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirement of NRS chapter 281A, specifically including subsection 550 which restricts certain former employees and State agencies.

Department of Transportation

Pursuant to NRS 333.705, subsection 1, the Department requests to contract with a former employee, Edvaldo Martins. Henningson Durham and Richardson, Inc. is proposing to utilize Mr. Martins to fill the position of Inspector, a key role in overseeing the construction in the Full Administration of District II Betterment projects agreement P614-17-040.

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

Clerk: Item 6 includes one request to contract with a former employee pursuant to NRS 333.705(1). The request is from the Department of Transportation to contract with a former employee. Henningson, Durham and Richardson Inc. has hired the former employee and plans to utilize this individual on District II Betterment Projects as an Inspector. Representatives from the Department are available to answer any questions.

Governor: Alright. It's my understanding the reason this comes to us is a person is currently retired and currently collecting benefits from Public Employees' Retirement System, correct?

Clerk: That is correct.

Governor: Do you have any questions on this one?

Attorney General: We don't, Mr. Governor.

Governor: Do I have a motion.

Attorney General: Move approval.

Governor: We have a motion on the floor. Any discussion? All in favor, signify by saying aye. Any opposed? Motion passes. Thank you.

7. Request for Designations of Bad Debts **(For possible action)**

Pursuant to NRS 463.123(2), the Nevada Gaming Control Board requests the approval to remove delinquent debt from the Nevada Gaming Commission's records.

The amount requested to be deemed as bad debt is $8,040.55. A listing of the debt is included in the attached schedule.

Governor: Item 7, *Request for Designations of Bad Debts*.

Clerk: Item number 7 is a request for a designation of bad debt from the Gaming Control Board. Most State agencies turn their uncollectable debt over to the State Controller, who has the authority to request the Board of Examiners write off bad debt that has become impossible or impractical to collect. Bad debt under the purview of the State Controller cannot be removed from the State's books unless the Board of Examiners designates the bad debt as uncollectable.

Prior to the passage and approval of Assembly Bill 14 from the 2015 Legislative Session, the Nevada Gaming Commission, by the affirmative vote of a majority of their respective

members, could remove from their records the name of a debtor and the amount of tax, penalty or interest owed by a debtor, if, after a period of five years, they remained impossible or impractical to collect. Assembly Bill 14 amended NRS 463.123 and requires the Gaming Commission to report the debt determined to be impossible or impractical to collect to the Board of Examiners for the designation of bad debt. Upon such designation, the Clerk shall notify the State Controller to remove the debt from the State's Books.

This item includes one request to designate debts as bad debts under the provisions of NRS 463.123. The request is from the Nevada Gaming Control Board to designate $8,040.55 as bad debt for the purpose of removing the three debts from the State's books. Representatives from the agency are available to answer any questions the Board Members may have.

Governor: Thank you. Good morning, Ms. Morgan, welcome, thank you. I only have one question. I know that you're bringing this one back, this one we had before. Do we keep track of this in case these individuals ever apply for a license in the future?

Sandra Morgan: Mr. Governor, absolutely, so if the licensees or their principles ever were to come back and request a gaming license, we would have it flagged that they had debt because they didn't pay their annual slot tax in the amount of $8,040.55.

Governor: What would happen in that case, hypothetically? Would they then be asked to pay that before they applied, or would that be a mitigating factor?

Sandra Morgan: Yes, absolutely. I don't even think the application for licensure would get to me until that debt was repaid.

Governor: Okay, thank you. We appreciate it. I sincerely, on behalf of the State, appreciate your stepping in and all the great work you're doing on the Gaming Control Board. Thank you very much.

Sandra Morgan: Thank you, Governor.

Attorney General: Me as well.

Move for approval.

Governor: We have a motion on the floor. Any discussion? All in favor, signify by saying aye. Motion passes. Thank you very much.

8. Requests for Approval to Pay a Cash Settlement (For possible action)

A. The Department of Conservation and Natural Resources – Division of Forestry and University of Nevada, Reno

Pursuant to Article 5, Section 21 of the Nevada Constitution, the State Board of Examiners may approve, settle or deny any claim or action against the

State, any of its agencies or any of its present or former officers, employees, immune contractors or State Legislators.

The Division of Forestry, in conjunction with the University of Nevada, Reno request the Board of Examiners approve a settlement agreement between 105 Nevada property owners and the State of Nevada, Division of Forestry and UNR where the State of Nevada agrees to pay, as its share of the settlement, a total of $10 million.

B. The Office of the Nevada Attorney General

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

The Office of the Attorney General requests the Board of Examiners approve a settlement agreement between the estate of Julio Cesar Montes and the State of Nevada, Health and Human Services, Desert Regional Center for acceptance and approval of the agreement where the State of Nevada will pay $600,000 to the estate of Julio Cesar Montes.

Governor: Item 8, *Requests for Approval to Pay a Cash Settlement*, 8-A, *the Department of Conservation and Natural Resources, Division of Forestry and University of Nevada, Reno*.

Clerk: The first request is from the Office of the Attorney General. It is requesting the Board of Examiners to approve a settlement agreement between the State of Nevada, Department of Conservation and Natural Resources, Division of Forestry and the University of Nevada, Reno and the Little Valley Fire subrogated insurers and individual plaintiffs for acceptance and approval of the agreement where the State of Nevada agrees to pay $10 million from the Statutory Contingency Account. The total amount of the settlement is $25 million with the balance paid by the excess insurer.

The second request is from the Office of the Attorney General. The Office of the Attorney General requests the Board of Examiners approve a settlement agreement between the estate of Julio Cesar Montes and the State of Nevada, Department of Health and Human Services, Desert Regional Center for acceptance and approval of the agreement where the State of Nevada will pay $600,000 to the estate of Julio Cesar Montes.

Representatives from the agencies are available to answer any questions.

Governor: General Ford, did you want to make any comments, or did you have any questions?

Attorney General: Mr. Governor, I have no questions.

I do have my general counsel here in the event one of the other Board Members has questions about this. I can say that I obviously support both 8-A and 8-B but again, my

general counsel, as well as another, is here to answer questions, to the extent you or Secretary Cegavske has questions.

Governor: Thank you, I appreciate it. I have been briefed, thoroughly, on these two, so I don't have any questions. I do want to, in particular on the first one, 8-A, give praise to your office for the work you've done. Our potential exposure on that item was significantly higher than the settlement and could've caused financial hardship. I think you did 'yeoman work' to get to that point. So, congratulations to you and your staff, as it relates to that negotiated settlement.

Governor: Yes, Secretary Cegavske, please go ahead.

Secretary of State: Thank you, Governor. I just wondered how much would be remaining in these funds after the settlement if anybody knows the answer to that, once this is paid. Do we know how much would be the remaining in the accounts?

Christian Schonlau: I don't have exact figures for you but I can tell you that our balance has approximately $4.4 million in the reserve, going forward into Fiscal Year 2020.

Secretary of State: Okay and we're settling for $25 million so, we drained it quite extensively? Is that correct?

Governor: Well, the funds came from different sources.

Secretary of State: Right, there were different sources, I understand that, but I'm just looking at what was given to me, so how much is out of which account? Maybe that would be a better question. If you could tell me what's remaining in each account and then, I know the insurance took care of the homes and they've been redone already. That's already taken place. So, this is for the landscaping, outside? What exactly is the State paying for from the Division of Forestry?

Governor: Okay. My understanding and I'll turn it over to staff is, on the memo here is, $18 million of it goes to the Claimants; $7 million will go to reimburse the insurance company, so some of the claims are already paid, but please go ahead, do we have a more detailed explanation than mine?

Attorney General: Mr. Chair, if I may.

Governor: Please.

Attorney General: The $25 million amount is bifurcated between different payments – $15 million is coming from our insurance policy but $10 million is coming from our Statutory Contingency Account.

Secretary of State: What would be left in that account?

Governor: I suppose what the Secretary is asking is, it's showing $7 million as coming from the Contingency Fund and $3 million coming from the Tort Fund. Secretary, if I understand your question, you'd like to know what's remaining in the Contingency Fund and what's remaining in the Tort Fund, correct?

Secretary of State: Yes, thank you, Governor. Sorry I wasn't clear.

Governor: No, that's okay. Do we know those figures?

Clerk: Yes. The remaining amount in the Statutory Contingency Account will be about $4 million. An amount of $10 million was placed by the Legislature into the Statutory Contingency Account specifically for this purpose. The remaining $4 million is sufficient at this time to fund that account for the biennium. The Tort Claim Account will have about $4.4 million remaining and that account is replenished through payments over the biennium by State agencies.

Governor: So, $4 million will be left in the Statutory Contingency Fund and $4.4 million will be left in the Tort Fund after these claims.

Secretary of State: Okay. And then the Division of Forestry, did they have any insurance at all? Did they have any liability in this, or is it just the State?

Attorney General: Mr. Chair, if I may, with the Division of Insurance being part of the State that is incorporated into the payment in its entirety.

Secretary of State: So, nothing separate.

Attorney General: Nothing separate from the Division of Forestry.

Secretary of State: Okay. Governor, thank you for allowing me to ask those questions and thank you for your assistance.

Governor: Absolutely.

Do we have any other questions? Do we have a motion on the item?

Secretary of State: I'll move to pay it. It doesn't look like we have any other choice.

Attorney General: I'll second.

Governor: We have a choice but I think the other way could be a lot more costly.

So, we have a motion on the floor for 8-A, any further discussion? All in favor signify by saying aye. Any opposed? Motion passes.

Do we have questions or a motion on 8-B?

Secretary of State: Yes, the other question would be, which account is this one coming from, this $600,000? Which fund is the settlement coming from?

Attorney General: That's going to come from our Tort Fund, which is contained in the Office of the Attorney General.

Secretary of State: Alright, that's all I wanted to know. I'll move for approval.

Governor: We have a motion on the floor for 8-B, any discussion? Hearing and seeing none. All in favor, signify by saying aye. Any opposed? Motion passes. Thank you very much.

9. Requests for the Allocation and Disbursement of Funds for Salary Adjustments (For possible action)

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions and agencies and the salary requirements for the personnel of those departments, commissions and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts from the appropriate fund to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2691	**Department of Agriculture – Nutrition Education Programs**	$8,990	
	Total	**$8,990**	
4150	**Department of Conservation and Natural Resources - Administration**	$27,761	
	Total	**$27,761**	
2941	**Department of Tourism and Cultural Affairs – Museums and History Division**	$7,786	
	Total	**$7,786**	
4729	**Department of Public Safety – State Emergency Response Commission**		$7,704
	Total		**$7,704**

4204	**Tahoe Regional Planning Agency**	$36,795	
	Total	**$36,795**	

Governor: Now moving on to 9. *Requests for the Allocation and Disbursement of Funds for Salary Adjustments*.

Clerk: Salary adjustments are pursuant to Assembly Bill 517 and Senate Bill 368 from the 2017 Legislative Session where funds were appropriated for this purpose to the Board of Examiners to cover vacancy savings built into agency budgets as well as the 3% cost-of-living adjustments (COLAs) that were effective on July 1, 2017 and July 1, 2018 that were not included in agency salary budgets.

An agency whose actual salaries exceed their budgeted amount due to the vacancy savings or the COLAs is allowed to request salary adjustment dollars from the Board of Examiners.

This item requests access to those funds by the Department of Agriculture, Nutritional Education Programs to cover the cost of the COLAs in the amount of $8,990 in General Funds; the Department of Conservation and Natural Resources, Administration to cover the costs of the COLAs in the amount of $27,761 in General Funds; the Department of Tourism and Cultural Affairs, Division of Museums and History to cover the cost of the COLAs in the amount of $7,786 in General Funds; the Tahoe Regional Planning Agency (TRPA) to cover the costs of COLAs pursuant to Section 13 of Assembly Bill 517 and Section 9 of Senate Bill 368 in the amount of $36,795 in General Funds; and finally, the Department of Public Safety, State Emergency Response Commission to cover the costs of COLAs in the amount of $7,704 in Highway Funds. The total General Fund request today is $81,332 and the total Highway Fund Request is $7,704.

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

Governor: Is there a reason the TRPA is so high? Is it just because their payroll is so high?

Clerk: This is 100% of the amount that they're eligible for.

Governor: As opposed to the other ones aren't 100% what they're eligible for?

Clerk: They may or may not be, depending on any salary savings they may have had in their budgets. The TRPA has a different provision in the law that allows them to request the full amount. So, they can either do a COLA, if that's been granted by both states, Nevada and California, or they can use it as a one-time bonus but I believe, in this case, they're using it for the 3% COLAs.

Governor: Got it. So, California has to put in a like amount.

Clerk: Correct.

Governor: Got it, okay. Do we have any further questions on Item 9?

Attorney General: No questions here.

Governor: Do I have a motion on Item 9?

Attorney General: Move approval.

Governor: We have a motion on the floor, any discussion? Hearing and seeing none, all in favor signify by saying aye. Any opposed, motion passes.

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

Governor: Item 10, *Approval of Proposed Leases*.

Clerk: There are two leases in agenda item 10 for approval by the Board this morning. No additional information has been requested by the Members.

Governor: Okay. Do we have any questions on this item?

Attorney General: None here Governor.

Governor: Did we add the one part I had asked for about the arm's length transaction? Where is it on here? Oh, okay, I'm on Page 2 of 2 of both of these documents. I've never seen it just termed *is this an arm's length transaction* and I don't know if everybody knows what that really means? I've got my legal representation here, does that suffice? Normally, it would say something about *is this within the third-degree of consanguinity* type of thing.

Rosalie Bordelove: I would hope that these have been reviewed by counsel for both the parties and to the extent that they were, I would say that that question would be sufficient. I don't know the background that you're referring to of wanting that added on there.

Governor: The background is that, at previous meetings, I brought up that I wanted to make sure that for General Ford and Secretary Cegavske when we're voting on these, we wanted to make sure that there is no relationship that is known or unknown to any of the folks.

Clerk: Governor, it's my understanding that there is a document behind this and it is *within the third degree of consanguinity*. Those were the discussions that were had.

Governor: Oh, so there's something behind this that are not shown.

Clerk: Correct.

Governor: Okay, I didn't know that. Okay.

Do we have further questions or a motion on Item 10? Yes, Secretary Cegavske.

Secretary of State: Yes, on this, I'm a little confused Governor. On the question that you're asking, that you're asking of us, does this look like just a relocation or a location, the terms of the lease, am I looking at it wrong?

Governor: Well, the first one is for the Office of the Attorney General. The second one is for Clark County.

Secretary of State: Right.

Attorney General: The only question that, as I understand your question, Governor, you just wanted to ensure that this is an arm's length transaction between our Officers and the people leasing us the buildings, is that right?

Governor: That is correct.

Attorney General: So the answer to that is, yes – these are arm's length transactions as I understand.

Secretary of State: Alright, I just wanted to clarify your question and make sure that I understood. There's nothing with us and there's nothing for the Attorney General.

Governor: No, apparently there is a back-up document that deals with the third-degree of consanguinity that's not attached here, to make sure they are arm's lengths transactions.

Secretary of State: I don't see that, so.

Attorney General: It's not attached.

Governor: They've got it on file.

Secretary of State: Okay, thank you.

Governor: Thank you. Do we have a motion?

Secretary of State: Move for approval.

Governor: We have a motion on the floor, any discussion? All in favor, signify by saying aye. Any opposed, motion passes.

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

Governor: Item number 11, *Approval of Proposed Contracts*.

Clerk: There are 155 contracts in agenda item 11 for approval by the Board this morning. Contract 21689 with the Law Offices of Charles Zeh has been requested to be withdrawn from the agenda by the agency. On your agenda, this is #147. Are there any contracts that Board Members would like to call for further discussion?

Governor: Are there any questions on any of these items?

Attorney General: I don't have any.

Secretary of State: I don't see anything else. No, I think we're fine but Contract 100 was pulled, right? Is that correct?

Clerk: That is correct.

Secretary of State: Okay. I just want to make sure, whenever anybody makes a motion, we have the correct numbers in.

Clerk: That item that was pulled, Contract #100, is no longer on this agenda.

Secretary of State: Okay, it's still on mine, that's why I just asked but alright.

Attorney General: They've been renumbered.

Governor: I've got #100 as the Board of Regents Psychological Extern. That's the issue, Secretary Cegavske – it was number 100 before but was removed and what was previously 101 has become 100.

Secretary of State: Right, I just want to make sure when we make the motion we say the numbers correctly.

Governor: So, I'm confident I'm going to get the motion correctly because I will call on you to make this motion.

So you want to move to approve all the contracts with the exception of Contract #147 being pulled.

Secretary of State: That's correct.

Governor: Alright, that is the motion. Is there any discussion on the motion?

Governor: Hearing and seeing none, all in favor, signify by saying aye. Motion passes. Thank you.

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

Governor: Item number 12, *Approval of Master Service Agreements*.

Clerk: There are 13 master service agreements in agenda item 12 for approval by the Board this morning. No additional information has been requested by the Members.

Governor: Do I have a motion as it relates to item number 12?

Attorney General: I move approval.

Governor: We have a motion on the floor, any discussion on the motion? All in favor, signify by saying aye. Any opposition? Motion passes.

13. Approval of Work Plan (For possible action)

Governor: Item number 13, *Approval of Work Plan*.

Clerk: There are two work plans for approval by the Board this morning. No additional information has been requested by the Members.

Governor: Do I have a motion on the floor for item number 13?

Attorney General: I have no questions, do you?

Secretary of State: No, I don't have any.

Attorney General: Move approval, Mr. Governor.

Governor: We have a motion on the floor for approval. Is there any discussion on the motion? Hearing and seeing none. All in favor, please signify by saying aye. Any opposed? Motion passes.

14. Clerk of the Board Contracts (Informational only)

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than $50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold ($10,000 - $49,999). Attached is a list of all applicable approvals for contracts and amendments approved from April 23, 2019 through May 20, 2019.

Governor: Item number 14, Clerk *of Board Contracts*.

Clerk: There were 49 contracts under the $50,000 threshold approved by the Clerk between April 23, 2019 and May 20, 2019. No additional information has been requested by the Members.

Governor: I have a question on this one and I apologize, I thought you got the question. It came to my attention during the legislative session that a tremendous amount of our boards and commissions have outside lobbyists retained. Do we have a list of those or are we going to get one every meeting for the next two years? How does that work?

Clerk: We can do a query and see how many contracts there are out there with the boards and commissions for that type of service and get that information to you.

Governor: If we could. I don't know if anybody else has a concern. I would like to know how many of our agencies and pseudo agencies pay outside lobbying representatives or they call them consulting, so, outside consulting services and/or these investigative types of contracts, if you could come up with a list for that.

Clerk: Sure, we can do that.

Governor: Are you okay with that down South?

Attorney General: I am.

Secretary of State: Yes.

Governor: Good, thank you.

15. Reports **(Informational only)**

Statewide Quarterly Overtime Report – Fiscal Year 2019 3rd Quarter

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. The Budget Division submits the 3rd Quarter Overtime Report and analysis for Fiscal Year 2019.

Governor: Item number 15, *Statewide Quarterly Overtime Report, Fiscal Year 2019, Third Quarter*.

Clerk: There is one information report under this agenda item. The report is on overtime and accrued compensatory leave for the third quarter of Fiscal Year 2019. My staff summarized the report into a two-page summary, so I will not read the details but will hit a couple of highlights. For the first nine months of fiscal year 2019, overtime pay and compensatory leave accounted for a total of approximately $35.55 million, or 4.47% of total pay, this is a 5.6% decrease from Fiscal Year 2018.

The Department of Health and Human Services had the highest amount of overtime and comp time at $3.15 million or 4.31% of their base pay for the 3rd quarter, followed by the Department of Corrections at $3.01 million or 8.32% of base pay. Those two agencies accounted for 54% of the overtime for the quarter, down from 65% of overtime last quarter.

Year-to-date, the Department of Corrections has incurred $9.08 million in overtime and comp time or 7.9% of base pay while Department of Health and Human Services has incurred $9.16 million of overtime and comp time or 4.0% of base pay. Those two agencies account for 51% of the overtime and comp time through the first three quarters of 2019.

At the Department of Corrections, overtime and comp time decreased by $213,000, or 6.6% from the prior quarter, and overtime and comp time at the seven locations on Page 2 accounted for 86.6% of the total overtime for the Department.

By event code, the highest four causes on page 2 accounted for 87% of the overtime at the Department of Corrections. At the Department of Health and Human Services, the four event codes on the bottom of page 2 accounted for 72.1% of their overtime.

Governor: Hopefully we've solved some of the Department of Corrections overtime issues with some new staffing provided by the Legislature that will take effect. Do we have any questions on the overtime report?

Attorney General: None down here, Governor.

Governor: Alright, thank you very much for the report.

16. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

Governor: This is item number 16, *Public Comment*. This is the second time set aside for public comment. Anyone wishing to address the Board on any item, please step forward, identify yourself for the record. Comments will be limited to three minutes. Do we have anybody in Carson City? Seeing none. Do we have anybody in Southern Nevada?

Attorney General: No sir.

Governor: We have no public comment.

17. Adjournment (For possible action)

Governor: Do I have a motion to adjourn?

Attorney General: So moved.

Governor: We have a motion on the floor. Any discussion? All in favor, signify by saying aye. Motion passes. Thank you. We are adjourned, thank you all for coming today, we appreciate it, everybody, thanks.

Steve Sisolak
Governor

Susan Brown
Director

Paul Nicks
Deputy Director

STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
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Date: June 10, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Catherine Brekken, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

Department of Administration – Victims of Crime Fiscal Year 2019 3rd Quarter Report and 4th Quarter Recommendation

Agenda Item Write-up:

Pursuant to NRS 217.260, Department of Administration shall prepare and submit quarterly to the Board of Examiners, for its approval, estimates of available revenue in the Fund for the compensation of victims of crime, and the anticipated expenses for the quarter. Claims are categorized as to their priority; and claims categorized as the highest priority are paid, in whole or in part, before other claims.

The 3rd quarter fiscal year 2019 Victims of Crime Program report states all approved claims were resolved totaling $3,169,713.87 with $1,578,567.69 paid out of the Victims of Crime Program account and $1,591,146.18 resolved through vendor fee adjustments and cost containment policies.

The program anticipates future cash available at $7.6 million at the end of Fiscal Year 2019 to help defray crime victims' medical costs. Based on these projections, the Victims of Crime Program recommends paying Priority One, Two and Three claims at 100% of the approved amount for the 4th quarter of fiscal year 2019.

Additional Information

The Route 91 Harvest Music Festival tragedy has had, and will continue to have an extraordinary impact on this program. The victim demographic has some significant differences when compared to the usual crime victim demographic. Many victims have insurance, so payments have been delayed due to review of insurance information and Explanation of Benefit forms. To date 7,343 applications related to Route 91 have been processed. Payments to date on these claims total $3,717,597.41.

REVIEWED: SC

ACTION ITEM:_____

Steve Sisolak
Governor

STATE OF NEVADA

Susan Brown
Clerk, Board of Examiners

Michelle Morgando
Coordinator, VOCP

DEPARTMENT OF ADMINISTRATION
VICTIMS OF CRIME

2200 S Rancho Dr., #210-A
Las Vegas, Nevada 89102
Fax (702) 486-2825
(702) 486-2740

April 19, 2019

To: Susan Brown, Clerk, Board of Examiners

Through: Deonne E. Contine, Director of Administration

From: Michelle Morgando, Coordinator, Victims of Crime Program

Re: VOCP 3rd Quarter FY 2019 Report, and 4th Quarter FY 2019 Recommendation

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NRS 217.260 requires the Department of Administration to estimate available revenue and anticipated claim costs each quarter. The VOCP pays claims in accordance with the policies adopted by the Board pursuant to NRS 217.130. When a vendor accepts a payment reduced pursuant to these policies, NRS 217.245 provides that the claim is deemed paid in full. Claims are categorized as to their priority; and claims categorized as the highest priority are paid, in whole or in part, before other claims.

Priority One and Two claims are paid weekly during the quarter, and accrued Priority Three claims are paid at the end of each quarter. Priority One and Two claims are bills for current medical treatment, lost wages, funeral expenses, counseling, etc. Priority Three claims are bills the applicant owed prior to claim acceptance such as hospital emergency room and related bills. The VOCP pays the "approved" amount, which is the amount approved for payment after bill review and application of fee schedules or other payment adjustments pursuant to Board policies.

Payments by Priority - 3rd Quarter FY 2019				
Type of Expense	Number of Bills	Total Victim Bills Submitted	Amount Saved by Bill Review	Amount Paid to Providers
Priority 1 & 2 Payments	2071	1,220,522.11	193,436.70	1,027,085.41
Pending Priority 3 Payments	378	1,949,191.76	1,397,709.48	551,482.28
Total 3rd Quarter Payments	2449	$3,169,713.87	$1,591,146.18	$1,578,567.69

Claim Payments

The following chart shows claim payments made in FY 2019 by benefit type. As this chart shows, the VOCP satisfied $11,153,395.78 in victim medical bills and claims for $5,118,851.66 from available funding. After bill review and application of Board policies we have had a total savings of $6,034,544.12 over the billed amount in fiscal year 2019.

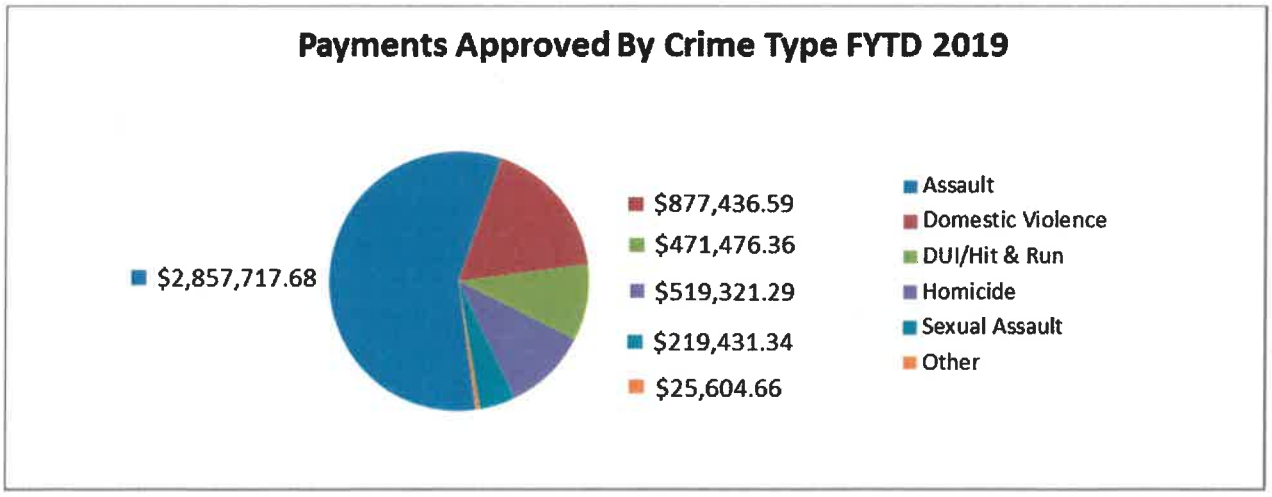
Payment Amounts by Type Fiscal Year to Date 2019				
Type of Expense	Number of Bills	Total Victim Bills Submitted	Amount Saved by Bill Review	Amount Paid to Providers
Chiropractic/Physical Therapy	346	178,009.58	51,170.46	126,839.12
Counseling	3006	870,305.43	233,163.21	637,142.22
Survivor Benefits	125	104,200.16	0.00	104,200.16
Dental	143	390,267.48	131,181.77	259,085.71
Discretionary*	903	745,500.19	543.73	744,956.46
Funeral Expense	135	409,416.43	2.06	409,414.37
Lost Wages	786	819,751.08	350.00	819,401.08
Medical - Hospital	546	6,183,036.60	5,139,076.49	1,043,960.11
Medical - Other	1546	1,413,417.10	476,864.25	936,552.85
Prescription	103	10,712.01	0.00	10,712.01
Vision	85	28,779.72	2,192.15	26,587.57
Total Payments YTD FY2019	**7724**	**$11,153,395.78**	**$6,034,544.12**	**$5,118,851.66**

*Discretionary payments include: Relocations, Temporary Housing, Crime Scene Clean-up, etc.

*Totals subject to change based on stale and stopped payments, lost checks, and reclassified bill types.

Victim Payments by Crime Type

The following pie chart shows amounts approved for payment by crime type for fiscal year 2019.



Financial Review

The chart below shows projected revenues and fund balances including reserves for FY 2019, and recommendations for 4th quarter FY 2019 based on projections. These projections of revenue and anticipated expenses are used for purposes of determining compliance with NRS 217.260 and policies of the Board.

Financial Position and Fourth Quarter 2019 Projections	
Projected Funds Available for Payments FY19 Less 45 Day Reserves	$14,328,070.86
3rd Quarter Priority 1 & 2 Payments	$1,027,085.41
3rd Quarter Priority 3 Payments	$551,482.28
Total 3rd Quarter 2019 Payments	$1,578,567.69
Total 2nd Quarter 2019 Payments	$1,451,724.41
Total 1st Quarter 2019 Payments	$2,107,457.87
Projected Remaining Funds Available for FY19 Less 45 Day Reserves	$9,190,320.89
Projected Payments 4th Quarter FY19 *	$1,515,146.05
Projected Funds Available after 4th Quarter Payments	$7,675,174.84
Recommended Priority 3 Payment Percentage 4th Quarter FY19	**100%**
*Based on average of last 6 months	

As required, a 45 day operating expense reserve of $1,120,688.14 is maintained to cover up to 45 days of victim's claims and administrative expenses.

The Route 91 Harvest Music Festival tragedy has had, and will continue to have an extraordinary impact on this program. To date, we have processed 7,343 applications related to the Route 91 tragedy. Payments made to date on these claims total $3,717,597.41. Our program recently received federal grant funds totaling $7,538,450 to help offset the administrative and claim expenses we incurred assisting the victims of this tragic event.

Our 2019 Beginning cash totals $8.1 million. Projected Revenue totals $9.5 million. If payments continue at the current pace, total expenses for FY 2019 could reach $9.0 million which will leave the program with $8.6 million in cash for Fiscal Year 2020. That would allow us to continue satisfying our required 45 day operating expense reserve, and pay for expected victim claims.

Recommendation

We are projecting Priority One and Two payments totaling **$1,027,085.41** and projected Priority Three payments totaling **$551,482.28** for the 4th quarter.

After reserving **$1,120,688.14** for 45 days operating expenses, our budget shows VOCP revenues and reserves available for FY2020 will be **$7,675,174.84** after projected quarterly payments.

Based on these projections the VOCP recommends paying Priority One and Two and Three claims at **100%** of the approved amount for the 4th quarter of FY 2019.

Steve Sisolak
Governor

Susan Brown
Director

STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division
209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
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Date: June 10, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Aaron Frantz, Executive Branch Budget Officer
Governor's Finance Office

Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department of Health and Human Services, Division of Public and Behavioral Health requests authority to contract with Dana Tueller a current Mental Health Technician III with Rural Clinics in Lovelock, Nevada, to provide janitorial services at the rural clinic in Lovelock.

Additional Information:

Dana Tueller's husband Quintin Tueller is the sole proprietor of Quintin Tueller, a janitorial service provider. Dana Tueller is listed on the business license along with her husband. Although Mrs. Tueller's name is on the business license, she will not be performing any of the services to the State. The agency received two bids on the informal solicitation for this service. The Quintin Tueller bid offered a significant savings to the agency.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: SB

ACTION ITEM: _____

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director

STATE OF NEVADA

LISA SHERYCH
Interim Administrator

IHSAN AZZAM, PhD., M.D.
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
Carson City, NV 89706
Telephone: (775) 684-4200 · Fax: (775) 684-4211

May 30, 2019

MEMORANDUM

TO: **Susan Brown**
Director
Governor's Finance Office

THROUGH: **Richard Whitley, MS**
Director
Department of Health and Human Services

THROUGH: **Lisa Sherych**
Interim Administrator
Division of Public and Behavioral Health

FROM: **Tina Gerber-Winn**
Agency Manager
Rural Clinics

SUBJECT: **Authorization to Contract with Current State Employee – Dana Tueller**

Rural Clinics manages a mental health clinic in Lovelock, Nevada. Per State Administrative Manual Sections 1008 and 1014, the clinic needs to be cleaned regularly to maintain a professional and healthy work environment.

On April 12, 2019, informal solicitations were sought to meet this need. Two responses were received, one from Quintin Tueller and one from F.A.A.D. Janitorial, Inc. After consideration, it is in the best interest of Rural Clinics/DPBH and the State to accept the proposal from Quintin Tueller.

Quintin Tueller's proposal for meeting the deliverables in the scope of work for janitorial services in Lovelock was for $525/month for labor and supplies and up to $600 per year for steam cleaning carpets. The total maximum annual amount of his proposal was $6,900.

Quintin Tueller is the husband of Dana Tueller, a current State of Nevada employee who works as a Mental Health Technician in the Lovelock clinic. Dana and Quentin are co-owners on the Nevada State Business license issued by the Nevada State Secretary of State's Office. Dana has stated that she will not be involved in the janitorial work in Lovelock if the contract is awarded to her husband. It was recommended by the Governor's Finance Office that DPBH submit a current employee waiver for approval to the Board of Examiners.

Based on the significant savings available to our agency, Dana Tueller's agreement not to provide any janitorial services in the contract and the shortage in options for janitorial services in Lovelock, Nevada, Rural Clinics respectfully requests authorization to contract for janitorial services with Quintin Tueller in Lovelock, Nevada.

Thank you for your consideration in this matter.

Brian Sandoval
Governor

Patrick Cates
Director

Kevin Doty
Acting Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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

Authorization to Contract with a Current Employee

Employee Information	
Employee Name:	Dana Tueller
Employee ID Number:	08526
Job Title:	Mental Health Technician III
Current Employee Agency:	Rural Clinics
Current Class and Grade:	Grade 27
Employment Dates:	October 1996 - Current
Contracting Agency:	Rural Clinics

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
- ☐ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.

a. Summarize scope of contract work.

Schedule, organize, and provide janitorial services 2 days/week for satellite clinic in Lovelock, Nevada. Consists of vacuuming, mopping, dusting, emptying trash, cleaning windows, cleaning bathrooms, and supplying paper products and cleaning agents.

b. Document the employee's current job description.

Dana Tueller is a Mental Health Technician III. She provides administrative support to the clinic, medical support for psychiatric personnel conducting telehealth services, and basic skills training for clients.

c. Explain how this differs from current State duties.

Dana Tueller's husband, Quintin Tueller, is the sole proprietor of a janitorial company that submitted a proposal for cleaning our clinic in Lovelock, Nevada. Dana is listed on the business license along with her husband. She would not perform any of the janitorial services such that her current State duties would not change.

d. Explain why existing State employees within your agency cannot perform this function.

Rural Clinics has no janitorial personnel.

e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.

The person overseeing and establishing the contract is Brian Burriss, Clinical Program Manager I. Mr. Burriss is not related to the contractor. Dana Tueller, who works in the Lovelock clinic, is married to the contractor, Quintin Tueller.

f. List contractor's hourly rate.

The proposal for the janitorial services is for $525/month x 24 months with up to $600/yr. x 2 yrs. for carpet steam cleaning. This rate includes labor and supplies.

g. List the range of comparable State employee rates.

Custodial Supervisor I - $16.43 - $23.84

h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Although we don't have a discrete hourly labor expense from the contractor, the rate for labor and supplies is significantly lower than the one other proposal received in response to our informal solicitation. Historically, we have had difficulty finding janitorial services in the Lovelock area.

i. Document justification for hiring contractor.

The State Administrative Manual, Sections 1008 and 1014, require that state offices be cleaned regularly in order to maintain a professional and healthy work environment.

j. Will the employee be collecting PERS at any time during the contract?

No.

k. What is the duration of the contract with the current employee? (include start and end date)

The contract with the janitorial vendor, Quintin Tueller, will start July 1, 2019 and end June 30, 2021.

l. Will the current employee be working FT/PT? If PT how many hours

The current employee, Dana Tueller, will be working full time as a Mental Health Technician III.

Comments:

Comments:

Christine Daduch 6/4/19

Contracting Agency Head's Signature and Date

6-12-19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

Steve Sisolak
Governor

Susan Brown
Director

STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division
209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
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Date: June 20, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: David Lenzner, Executive Branch Budget Officer
Governor's Finance Office

Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

SECRETARY OF STATE

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, The Office of the Secretary of State requests authority to contract with Tracy Gillespie, a former Administrative Assistant IV with the Office of the Secretary of State, to scan the Notaries historical files to microfilm and to properly index the files.

Additional Information:

Ms. Gillespie worked for the agency in the same capacity for 35 years and participated in the development and implementation of multiple eSoS processing systems. She possesses expert knowledge about the current systems in place, as well as historical knowledge about data issues and anomalies. She worked closely with the business process analysts and State micrographics on answering questions and developing an inventory of Secretary of State microfilm, microfiche, and paper records leftover from prior implementations that will be converted to electronic file format and migrated into the new system. During the validation process, it was discovered that the Notaries

historical files were not properly indexed and formatted for delivery to the vendor, Opportunity Village, to include in the overall historical document scanning and indexing project. Therefore, Secretary of State made the decision to conduct this project in-house, and Ms. Gillespie will be tasked to assisting with the critical task of scanning to microfilm and indexing.

Statutory Authority:

NRS 333.705 (1)

BARBARA K. CEGAVSKE
Secretary of State

GAIL J. ANDERSON
Deputy Secretary for Southern Nevada

CRAIG KOZENIESKY
Deputy Secretary for Operations

STATE OF NEVADA

OFFICE OF THE
SECRETARY OF STATE

SCOTT W. ANDERSON
Chief Deputy Secretary of State

KIMBERLEY PERONDI
Deputy Secretary for Commercial Recordings

WAYNE THORLEY
Deputy Secretary for Elections

May 29, 2019

Andre Urruty
Budget Division
209 East Musser St
Carson City, NV 89701

Enclosed please find the pre authorization to contract form for former employee Tracy Gillespie. This contract is effective July 10, 2019 and will terminate June 30, 2020.

The Secretary of State (SOS) requests authority to contract with a former employee, Tracy Gillespie, through Marathon Staffing.

Ms. Gillespie will assist in testing Uniform Commercial Code functionality in the new eSOS processing system and eliminating backlog of document archiving. She left state service in July 2018 and is currently collecting benefits from PERS. Furthermore, she has worked for the agency in this same capacity for 35 years and participated in the development and implementation of multiple eSOS processing systems. She worked closely with the Business Process Analysts and State Micrographics on answering questions and developing an inventory of SOS microfilm, microfiche and paper records left over from the prior implementations that will be converted to the electronic file format and micrograted into the new eSOS processing system.
During this validation process, it was discovered that the Notaries historical files were not properly indexed and formatted for delivery to the vendor (Opportunity Village) to include in the overall historical document scanning and indexing project. Therefore, SOS made the decision to conduct this project in-house and Ms. Gillespie will be tasked to assist with this critical task of scanning to mircofilm and indexing.

Should you have any questions, please contact me at 775-684-5736
Please call Sheri Hudder at 684-5736 when ready to pick up.

Sincerely,

Sheri Hudder

Sheri Hudder, ASO III
Office of the Secretary of State

/enclosures

Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division
515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Former Employee

Employee Information	
Former Employee Name:	Tracy Gillespie
Former Employee ID Number:	010099
Former Job Title:	Administrative Assistant IV
Former Employee Agency:	Secretary of State
Former Class and Grade:	Class 2.210, Grade 29
Former Employment Dates:	6/27/1983 – 7/13/2018
Contracting Agency:	Secretary of State

Please check which of the following applies:

X Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee. Please complete steps a-l below.

☐ Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.

a. Summarize scope of contract work.

- Assist in testing Uniform Commercial Code (UCC) functionality in the new eSoS processing system.
- Assist in eliminating backlog of document archiving.
- Provide expert knowledge and quality control during the historical document imaging project.

b. Document former job description.

This position served as the Uniform Commercial Code (UCC) and Copies divisions' supervisor, overseeing the receipting and filing processes related to UCC, as well as the long-term storage, retrieval and restoration of all imaged documents.

c. Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a time frame for the transfer?

This person worked for the agency in this same capacity for 35 years and participated in the development and implementation of multiple eSoS processing systems. Not only does she possess expert knowledge about the current systems in place, but also the historical knowledge about data issues and anomalies. Until her retirement this past July, she worked closely with the business process analysts and state micrographics on answering questions and developing an inventory of SOS microfilm, microfiche and paper records leftover from the prior implementations that will be converted to electronic file format and migrated into this new system. All remaining issues and data anomalies after the new system is launched will be documented for future reference.

d. Explain why existing State employees within your agency cannot perform this function.

Existing State employees do not possess the expertise and background knowledge.

e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.

N/A

f. List contractor's hourly rate.

$27.15 (per State of Nevada 2018 Compensation Schedule)

g. List the range of comparable State employee rages.

This is the same wage she earned as a State Employee as a grade 29 with 10 steps (per State of Nevada 2018 Compensation Schedule)

h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent. Additionally, has the contract term been limited as a result?

No, this does not apply

i. Document justification for hiring contractor.

Refer to item e

j. Will the employee be collecting PERS at any time during the contract?

Yes

k. What is the duration of the contract with the former employee? (include start and end date)

July 10, 2019 thru June 30, 2020

l. Will the former employee be working FT/PT? If PT how many hours

P/T-Intermittent on as needed basis. She will be working thru the Temp Service Marathon Staffing that is contracted through the State of Nevada as a Master Service Agreement

Comments:

6/20/19

Contracting Agency Head's Signature and Date

10/24/19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
4205	State Historic Preservation Office	$13,319	
	Total	**$13,319**	

NEVADA
STATE HISTORIC PRESERVATION OFFICE

Department of Conservation and Natural Resources

Steve Sisolak, Governor
Bradley Crowell, Director
Rebecca L. Palmer, Administrator, SHPO

MEMORANDUM

Date: May 29, 2019

To: Susan Brown, Director
Governor's Finance Office

Through: Curtis Palmer, Executive Branch Budget Officer
Governor's Finance Office

From: Rebecca L. Palmer, Administrator
State Historic Preservation Office

Subject: Request for Fiscal Year 2019 Salary Adjustment Funds for Budget Account 4205

During the 2017 Legislature, Assembly Bill 517, Section 3 authorized a 2% salary increase, and Senate Bill 368, Section 1 authorized an additional 1% salary increase for both Fiscal Year 2018 and Fiscal Year 2019. Combined, the two bills provide a 3% cost of living adjustment to state employees in both fiscal years. Both bills also appropriated General Funds to the Board of Examiners (BOE) to meet deficiencies created between the appropriated money and the money required to pay the salaries of the employees. This memo requests the BOE amount available in Fiscal Year 2019 for the Department of Conservation and Natural Resources, Historic Preservation budget account, 4205.

Based on current salary projections through June 30, 2019, budget account 4205 will have a General Fund shortfall in Category 01 - Personnel Services of **$13,318.20**. According to All Agency Memo #2017-14, budget account 4205 is eligible for $18,958.00 from the Salary Adjustment fund. Approval of this request for Salary Adjustment funds would cover the General Fund shortfall for Fiscal Year 2019. Other funding in the budget account will be utilized to cover shortfall outside of General Fund. The agency does not project excess General Fund authority in other categories within the budget account to cover any portion of the salary shortfall.

901 S. Stewart Street, Suite 5004 ✦ Carson City, Nevada 89701 ✦ Phone: 775.684.3448 Fax: 775.684.3442

www.shpo.nv.gov

Nevada Dept of Conservation and Natural Resources
State Historic Preservation Office (NV SHPO) - Agency 334
BA4205 Category 01 Personnel Services Projections - Fiscal Year 2019

			Position Ctrl No	0010	0004	0012	0020	0021	0011	0003	0009	0016	0007	0005	Rounding	Total
	INS	posting 7/1		740.92	740.92	740.92	740.92	740.92	740.92	740.92	740.92	740.92	740.92	-		7,409.20
	PP 01	07/13/18		-	-	-	-	-	-	-	-	-	-	-		-
	PP 02	07/27/18		2,740.64	2,623.99	2,994.01	3,674.48	2,623.35	2,246.74	4,741.66	3,090.41	2,739.72	3,672.24	2,304.08		33,451.32
	PP 03	08/10/18	*Insurance*	3,480.75	3,364.46	3,701.97	4,407.11	3,364.45	2,979.36	5,485.02	3,809.60	3,482.36	4,414.95	2,304.08		40,794.11
	PP 04	08/24/18		2,701.46	2,623.06	2,935.27	3,674.49	2,623.34	2,246.74	4,741.66	3,072.81	2,717.31	3,670.64	2,304.09		33,310.87
	PP 05	09/07/18	*Insurance*	3,426.96	3,370.78	3,675.88	4,411.27	3,323.31	2,979.36	5,485.03	3,809.60	3,428.57	4,414.94	2,304.08		40,629.78
	PayrlAssess1	09/14/18		20.80	20.80	20.80	20.80	20.80	20.80	21.00	20.80	20.80	20.80	20.80		229.00
	PP 06	09/21/18		2,747.03	2,688.11	2,935.27	3,674.49	2,571.86	2,246.73	4,741.66	3,072.81	2,685.94	3,670.65	2,304.09		33,338.64
	PrsnlAssess1	09/27/18		66.42	66.42	66.42	66.42	66.42	66.42	66.80	66.42	66.42	66.42	66.42		731.00
	PP 07	10/05/18	*Insurance*	3,547.31	3,428.57	3,675.87	4,411.27	3,312.97	2,979.36	5,485.02	3,809.59	3,428.57	4,414.94	2,304.08		40,797.55
	PP 08	10/19/18		2,807.19	2,688.11	2,935.28	3,674.49	2,571.86	2,246.74	4,741.66	3,072.81	2,685.93	3,669.48	2,304.09		33,397.64
	PP 09	11/02/18	*Insurance*	3,547.31	3,428.57	3,675.87	4,411.27	3,312.98	2,979.36	5,485.02	3,809.60	3,428.57	4,414.95	2,304.08		40,797.58
	PP 10	11/16/18		2,807.19	2,688.11	2,935.27	3,674.48	2,571.86	2,209.49	4,741.67	3,072.81	2,685.93	3,670.21	2,304.09		33,361.11
	PP 11	11/30/18		2,808.46	2,688.11	2,935.42	3,674.49	2,572.51	2,207.09	4,744.56	3,072.81	2,688.11	3,674.48	2,304.08		33,370.12
Actual	PP 12	12/14/18	*Insurance*	3,561.07	3,428.57	3,676.11	4,411.27	3,312.98	2,943.86	5,485.02	3,811.66	3,428.57	4,414.94	2,265.04		40,739.09
	PrsnlAssess2	12/20/18		66.42	66.42	66.42	66.42	66.42	66.42	66.80	66.42	66.42	66.42	66.42		731.00
	PayrlAssess2	12/27/18		20.80	20.80	20.80	20.80	20.80	20.80	21.00	20.80	20.80	20.80	20.80		229.00
	PP 13	12/28/18		2,807.19	2,688.11	2,935.04	3,674.49	2,571.86	2,202.94	4,741.66	3,070.74	2,685.94	3,670.21	2,258.89		33,307.07
	PP 14	01/11/19	*Insurance*	3,603.27	3,482.14	3,734.60	4,484.49	3,364.23	2,983.34	5,569.89	3,985.00	3,482.14	4,488.16	2,303.89		41,481.15
	PP 15	01/25/19		2,863.15	2,741.68	2,993.53	3,747.71	2,623.13	2,242.42	4,826.53	3,272.09	2,739.50	3,741.98	2,303.90		34,095.62
	PP 16	02/08/19	*Insurance*	3,589.22	3,482.14	3,734.60	4,484.49	3,362.43	2,983.33	5,569.90	4,011.99	3,482.14	4,488.17	2,303.89		41,492.30
	PP 17	02/22/19		2,863.15	2,741.68	2,993.53	3,747.71	2,623.12	2,293.46	4,826.53	3,273.12	2,739.51	3,741.97	2,303.90		34,147.68
	PP 18	03/08/19	*Insurance*	3,603.27	3,482.14	3,734.59	4,484.49	3,362.43	3,085.41	5,569.89	4,011.99	3,482.14	4,488.17	2,303.89		41,608.41
	PrsnlAssess3	03/14/19		66.42	66.42	66.42	66.42	66.42	66.42	66.80	66.42	66.42	66.42	66.42		731.00
	PayrlAssess3	03/20/19		20.80	20.80	20.80	20.80	20.80	20.80	21.00	20.80	20.80	20.80	20.80		229.00
	PP 19	03/22/19		2,863.16	2,741.67	2,993.54	3,747.71	2,682.08	2,344.49	4,826.53	3,273.13	2,739.50	3,741.98	2,397.82		34,351.61
	PP 20	04/05/19	*Insurance*	3,603.26	3,482.14	3,734.59	4,484.49	3,480.34	3,085.41	5,569.89	4,011.98	3,482.14	4,488.16	2,408.27		41,830.67
	PP 21	04/19/19		2,863.16	2,741.68	2,993.53	3,747.70	2,741.67	2,344.49	4,826.54	3,273.13	2,788.59	3,741.98	2,408.27		34,470.74
	PP 22	05/03/19	*Insurance*	3,603.27	3,482.14	3,734.60	4,484.50	3,480.34	3,085.41	5,569.89	4,012.39	3,604.87	4,488.16	2,408.27		41,953.84
	PP 23	05/17/19		2,863.16	2,741.68	2,993.53	3,747.70	2,741.68	2,344.49	4,826.54	3,272.72	2,862.97	3,741.98	2,408.27		34,544.72
	PP 24	05/31/19		2,863.16	2,741.68	2,993.53	3,747.70	2,741.68	2,344.49	4,826.54	3,272.72	2,862.97	3,741.98	2,408.27		34,544.72
	PP 25	06/14/19	*Insurance*	3,603.27	3,482.14	3,939.45	4,484.50	3,480.34	3,085.41	5,569.89	4,012.39	3,604.87	4,488.16	2,408.27		42,158.69
Projected	PrsnlAssess4	06/21/19		66.40	66.40	66.40	66.40	66.40	66.40	67.00	66.40	66.40	66.40	66.40		731.00
	PayrlAssess4	06/21/19		20.70	20.70	20.70	20.70	20.70	20.70	22.00	20.70	20.70	20.70	20.70		229.00
	PP 26	06/28/19		2,863.16	2,741.68	3,153.69	3,747.70	2,741.68	2,344.49	4,826.54	3,272.72	2,862.97	3,741.98	2,408.27		34,704.88
	PP 01	07/12/19		2,863.16	2,741.68	3,153.69	3,747.70	2,741.68	2,344.49	4,826.54	3,272.72	2,862.97	3,741.98	2,408.27		34,704.88
	TOTAL			82,583.06	79,624.50	86,981.94	105,751.87	77,989.84	68,468.58	133,744.60	91,893.02	80,772.48	105,727.12	61,096.98		974,633.99
													higher step than budget	lower step than budget		
Funding Breakdown (PROJECTED TO YEAR-END):																
	GF	2501		33,033.23	31,849.80	34,792.78	42,300.75	10,082.29	27,387.43	53,498.07	36,757.21	-	42,290.85	24,438.79	-	336,431.20
	HPF	3548		49,549.83	47,774.70	52,189.16	63,451.12	44,519.66	41,081.15	80,246.53	55,135.81	80,772.48	63,436.27	36,658.19	-	614,814.90
	NVCRIS	3803		-	-	-	-	23,387.89	-	-	-	-	-	-	-	23,387.89
	TOTAL			82,583.06	79,624.50	86,981.94	105,751.87	77,989.84	68,468.58	133,744.60	91,893.02	80,772.48	105,727.12	61,096.98	-	974,633.99
Funding Breakdown (BUDGET):																
	GF	2501		31,526.00	30,445.00	33,090.00	40,252.00	9,530.00	26,207.00	50,798.00	35,453.00	-	35,070.00	30,742.00	-	323,113.00
	HPF	3548		47,290.00	45,668.00	49,634.00	60,377.00	42,587.00	39,311.00	76,196.00	53,180.00	77,106.00	52,606.00	46,114.00	(3.00)	590,066.00
	NVCRIS	3803		-	-	-	-	22,336.00	-	-	-	-	-	-	-	22,336.00
	TOTAL			78,816.00	76,113.00	82,724.00	100,629.00	74,453.00	65,518.00	126,994.00	88,633.00	77,106.00	87,676.00	76,856.00	(3.00)	935,515.00
Funding Variance - Over/(Short)																
	GF	2501		(1,507.23)	(1,404.80)	(1,702.78)	(2,048.75)	(552.29)	(1,180.43)	(2,700.07)	(1,304.21)	-	(7,220.85)	6,303.21	-	(13,318.20)
	HPF	3548		(2,259.83)	(2,106.70)	(2,555.16)	(3,074.12)	(1,932.66)	(1,770.15)	(4,050.53)	(1,955.81)	(3,666.48)	(10,830.27)	9,455.81	(3.00)	(24,748.90)
	NVCRIS	3803		-	-	-	-	(1,051.89)	-	-	-	-	-	-	-	(1,051.89)
	TOTAL			(3,767.06)	(3,511.50)	(4,257.94)	(5,122.87)	(3,536.84)	(2,950.58)	(6,750.60)	(3,260.02)	(3,666.48)	(18,051.12)	15,759.02	(3.00)	(39,118.99)

State of Nevada Work Program

WP Number: 19SA4205

FY 2019

[ ] Add Original Work Program

[XXX] Modify Work Program

BUDGET DIVISION USE ONLY
DATE_____
APPROVED ON BEHALF OF
THE GOVERNOR BY
_____

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
05/29/19	101	334	4205	DCNR - OFFICE OF STATE HISTORIC PRESERVATION

Funds Available

Budgetary GLs (2501 - 2599)	Description	WP Amount	Revenue GLs (3000 - 4999)	Description	WP Amount	Current Authority	Revised Authority
			4601	GENERAL FUND SALARY ADJUSTMENT	13,319	0	13,319
	Subtotal Budgetary General Ledgers	0		Subtotal Revenue General Ledgers(RB)	13,319		13,319
				Total Budgetary & Revenue GLs	13,319		

Expenditures

CAT	Amount	CAT	Amount
01	13,319		
Sub Total Category Expenditures			13,319

Remarks

This work program requests the addition of General Fund salary adjustment funds to cover a projected shortfall in Category 01 - Personnel Services.

Total Budgetary General Ledgers and Category Expenditures (AP) 13,319

_____
Authorized Signature

_____
Date

_____
Controller's Office Approval

Does not require Interim Finance approval since Implements general fund salary adjustments approved by BOE

General Fund Salary Adjustment
Fiscal Years 2018 and 2019

Div	Division Description	Budget	Budget Account Name	FY 2018	FY 2019
300	NDE - DEPARTMENT OF EDUCATION	2697	NDE - ASSESSMENTS AND ACCOUNTABILITY	$ 25,077	$ 50,880
300	NDE - DEPARTMENT OF EDUCATION	2706	NDE - PARENTAL INVOLVEMENT AND FAMILY ENGAGEMENT	$ 2,501	$ 5,288
300	NDE - DEPARTMENT OF EDUCATION	2709	NDE - OFFICE OF EARLY LEARNING AND DEVELOPMENT	$ 6,325	$ 13,023
300	NDE - DEPARTMENT OF EDUCATION	2712	NDE - STUDENT AND SCHOOL SUPPORT	$ 15,931	$ 32,719
300	NDE - DEPARTMENT OF EDUCATION	2713	NDE - LITERACY PROGRAMS	$ 5,411	$ 11,144
300	NDE - DEPARTMENT OF EDUCATION	2716	NDE - DATA SYSTEMS MANAGEMENT	$ 20,187	$ 41,369
300	NDE - DEPARTMENT OF EDUCATION	2719	NDE - DISTRICT SUPPORT SERVICES	$ 18,034	$ 37,414
300	NDE - DEPARTMENT OF EDUCATION	2721	NDE - SAFE AND RESPECTFUL LEARNING	$ 9,627	$ 19,544
331	DTCA - MUSEUMS AND HISTORY DIVISION	1350	TOURISM - MUSEUMS & HIST - LOST CITY MUSEUM	$ 4,828	$ 10,089
331	DTCA - MUSEUMS AND HISTORY DIVISION	2870	TOURISM - MUSEUMS & HIST-NEVADA HISTORICAL SOCIETY	$ 6,010	$ 12,320
331	DTCA - MUSEUMS AND HISTORY DIVISION	2940	TOURISM - MUSEUMS & HIST - NEVADA STATE MUSEUM, CC	$ 18,048	$ 36,898
331	DTCA - MUSEUMS AND HISTORY DIVISION	2941	TOURISM - MUSEUMS & HISTORY	$ 4,794	$ 9,777
331	DTCA - MUSEUMS AND HISTORY DIVISION	2943	TOURISM - MUSEUMS & HIST - NEVADA STATE MUSEUM, LV	$ 15,544	$ 32,138
331	DTCA - MUSEUMS AND HISTORY DIVISION	4216	TOURISM - MUSEUMS & HIST-NV STATE RAILROAD MUSEUMS	$ 12,803	$ 26,391
332	ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS	1052	ADMINISTRATION - NSLA - ARCHIVES & PUBLIC RECORDS	$ 25,130	$ 51,629
332	ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS	2891	ADMINISTRATION - NSLA - STATE LIBRARY	$ 29,498	$ 60,571
333	DTCA - NEVADA ARTS COUNCIL	2979	TOURISM - NEVADA ARTS COUNCIL	$ 10,447	$ 21,326
334	DCNR - HISTORIC PRESERVATION	4205	DCNR - OFFICE OF STATE HISTORIC PRESERVATION	$ 9,113	$ 18,958
334	DCNR - HISTORIC PRESERVATION	5030	DCNR - HISTORIC PRES - COMSTOCK HISTORIC DISTRICT	$ 3,611	$ 7,370
360	COMMISSION ON POSTSECONDARY EDUCATION	2666	DETR - COMMISSION ON POSTSECONDARY EDUCATION	$ 6,877	$ 14,250
400	DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	1499	HHS-DO - PUBLIC DEFENDER	$ 9,517	$ 19,328
400	DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	3150	HHS-DO - ADMINISTRATION	$ 31,575	$ 64,698
400	DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	3154	HHS-DO - DEVELOPMENTAL DISABILITIES	$ 1,924	$ 3,984
400	DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	3195	HHS-DO - GRANTS MANAGEMENT UNIT	$ 1,075	$ 2,214
400	DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE	3204	HHS-DO - CONSUMER HEALTH ASSISTANCE	$ 4,721	$ 9,553
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	$ 56,611	$ 117,917
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3167	HHS-ADSD - RURAL REGIONAL CENTER	$ 64,508	$ 140,377
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	$ 271,350	$ 604,282
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3266	HHS-ADSD - HOME AND COMMUNITY-BASED SERVICES	$ 214,837	$ 473,029
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3279	HHS-ADSD - DESERT REGIONAL CENTER	$ 365,320	$ 796,761
402	DHHS - AGING AND DISABILITY SERVICES DIVISION	3280	HHS-ADSD - SIERRA REGIONAL CENTER	$ 113,370	$ 245,573
403	DHHS - HEALTH CARE FINANCING & POLICY	3158	HHS-HCF&P - HCF&P ADMINISTRATION	$ 293,589	$ 613,135
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3161	HHS-DPBH - SO NV ADULT MENTAL HEALTH SERVICES	$ 1,418,123	$ 2,868,243
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3162	HHS-DPBH - NO NV ADULT MENTAL HEALTH SVCS	$ 368,260	$ 710,828
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3168	HHS-DPBH - BEHAVIORAL HEALTH ADMINISTRATION	$ 31,841	$ 65,509
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3170	HHS-DPBH - BEHAVIORAL HEALTH PREV & TREATMENT	$ 34,862	$ 72,041
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3219	HHS-DPBH - BIOSTATISTICS AND EPIDEMIOLOGY	$ 9,350	$ 19,371
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3222	HHS-DPBH - MATERNAL CHILD & ADOLESCENT HEALTH SVCS	$ 11,135	$ 23,012
406	DHHS - PUBLIC AND BEHAVIORAL HEALTH	3223	HHS-DPBH - OFFICE OF HEALTH ADMINISTRATION	$ 82,499	$ 170,265

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2713	Literacy Programs	$11,070	
	Total	**$11,070**	

6/7/19
TG

Steve Sisolak
Governor

Jhone Ebert
Superintendent of Public Instruction

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9890 S. Maryland Parkway, Suite 221
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DEPARTMENT OF EDUCATION

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MEMORANDUM

DATE: June 3, 2019

TO: Catherine Brekken, Executive Budget Officer I CB 6/7/19
Governor's Finance Office

FROM: Vickie Rutledge, Management Analyst VR
Department of Education

THRU: Andrea Osborne, ASO III AO
Department of Education

SUBJECT: Fiscal Year 2019 Salary Adjustment Funds

Per Assembly Bill 517, section 3 and Senate Bill 368, section1, appropriated General Funds to the Board of Examiners (BOE) to meet deficiencies created between the appropriated money of the respective departments and the amount of money required to pay the salaries of the employees; Literacy Programs, Budget Account 2713 requests salary adjustment funds in the amount of $11,070 to augment a General Fund payroll shortfall for fiscal year 2019.

General Fund Salary Adjustment
Fiscal Years 2018 and 2019

Div	Division Description	Budget	Budget Account Name	FY 2018	FY 2019
010	GOVERNOR'S OFFICE	1000	OFFICE OF THE GOVERNOR	$ 42,819	$ 86,342
010	GOVERNOR'S OFFICE	1001	GOVERNOR'S MANSION MAINTENANCE	$ 3,821	$ 7,695
012	NUCLEAR PROJECTS OFFICE	1005	GOVERNOR'S OFFICE HIGH LEVEL NUCLEAR WASTE	$ 12,785	$ 25,809
014	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	1003	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	$ 10,244	$ 20,651
015	GOVERNOR'S FINANCE OFFICE	1340	GOVERNOR'S OFC OF FINANCE - BUDGET DIVISION	$ 64,223	$ 130,529
015	GOVERNOR'S FINANCE OFFICE	1342	GOVERNOR'S OFC OF FINANCE- DIV OF INTERNAL AUDITS	$ 37,673	$ 77,066
017	WESTERN INTERSTATE COMMISSION FOR HIGHER EDUCATION	2995	W.I.C.H.E. ADMINISTRATION	$ 4,515	$ 9,101
018	OFFICE OF WORKFORCE INNOVATION	1004	GOVERNOR'S OFFICE - OFFICE OF WORKFORCE INNOVATION	$ 10,254	$ 21,724
018	OFFICE OF WORKFORCE INNOVATION	3270	NEVADA P20 WORKFORCE REPORTING	$ 2,457	$ 4,929
020	LIEUTENANT GOVERNOR'S OFFICE	1020	LIEUTENANT GOVERNOR	$ 9,482	$ 19,140
030	ATTORNEY GENERAL'S OFFICE	1002	AG - EXTRADITION COORDINATOR	$ 3,839	$ 7,844
030	ATTORNEY GENERAL'S OFFICE	1030	AG - ADMINISTRATIVE BUDGET ACCOUNT	$ 59,047	$ 119,900
030	ATTORNEY GENERAL'S OFFICE	1036	AG - CRIME PREVENTION	$ 9,560	$ 19,575
030	ATTORNEY GENERAL'S OFFICE	1038	AG - CONSUMER ADVOCATE	$ 14,814	$ 29,960
040	SECRETARY OF STATE'S OFFICE	1050	SOS - SECRETARY OF STATE	$ 275,910	$ 565,452
040	SECRETARY OF STATE'S OFFICE	1051	SOS - HAVA ELECTIONS	$ 5,139	$ 10,447
060	CONTROLLER'S OFFICE	1130	CONTROLLER - CONTROLLER'S OFFICE	$ 96,366	$ 198,315
082	ADMIN - STATE PUBLIC WORKS DIVISION	1560	ADMINISTRATION - SPWD - FACILITY COND & ANALYSIS	$ 6,624	$ 13,566
087	ADMIN - DIRECTOR'S OFFICE	1337	ADMINISTRATION - DIRECTOR'S OFFICE	$ 1,640	$ 4,717
088	ADMIN - GRANTS OFFICE	1341	ADMINISTRATION - OFFICE OF GRANT PROCUREMENT COORD	$ 11,042	$ 23,021
090	JUDICIAL BRANCH	1484	JUDICIAL PROGRAMS AND SERVICES DIVISION	$ 20,640	$ 42,884
090	JUDICIAL BRANCH	1489	COURT OF APPEALS	$ 56,270	$ 113,486
090	JUDICIAL BRANCH	1494	SUPREME COURT	$ 221,145	$ 449,360
090	JUDICIAL BRANCH	2889	LAW LIBRARY	$ 13,373	$ 27,491
101	DTCA - DIVISION OF TOURISM	2600	TOURISM - INDIAN COMMISSION	$ 4,210	$ 8,674
101	DTCA - DIVISION OF TOURISM	2601	TOURISM - STEWART INDIAN SCHOOL LIVING LEGACY	$ 3,575	$ 7,511
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	1526	GOED - GOVERNOR'S OFFICE OF ECONOMIC DEV	$ 76,561	$ 154,496
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	1528	GOED - RURAL COMMUNITY DEVELOPMENT	$ 3,805	$ 7,669
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	4867	GOED - PROCUREMENT OUTREACH PROGRAM	$ 2,581	$ 5,196
130	DEPARTMENT OF TAXATION	2361	DEPARTMENT OF TAXATION	$ 694,440	$ 1,438,314
150	COMMISSION ON ETHICS	1343	ETHICS - COMMISSION ON ETHICS	$ 4,850	$ 9,782
240	DEPARTMENT OF VETERANS SERVICES	2560	NDVS - OFFICE OF VETERANS SERVICES	$ 37,990	$ 79,727
240	DEPARTMENT OF VETERANS SERVICES	2569	NDVS - NORTHERN NEVADA VETERANS HOME ACCOUNT	$ 5,108	$ 13,287
300	NDE - DEPARTMENT OF EDUCATION	2612	NDE - EDUCATOR EFFECTIVENESS	$ 8,215	$ 17,028
300	NDE - DEPARTMENT OF EDUCATION	2672	NDE - ACCOUNT FOR ALTERNATIVE SCHOOLS	$ 2,328	$ 4,894
300	NDE - DEPARTMENT OF EDUCATION	2673	NDE - OFFICE OF THE SUPERINTENDENT	$ 31,413	$ 64,205
300	NDE - DEPARTMENT OF EDUCATION	2675	NDE - STANDARDS AND INSTRUCTIONAL SUPPORT	$ 22,334	$ 45,405
300	NDE - DEPARTMENT OF EDUCATION	2676	NDE - CAREER AND TECHNICAL EDUCATION	$ 12,727	$ 26,097
300	NDE - DEPARTMENT OF EDUCATION	2680	NDE - CONTINUING EDUCATION	$ 9,650	$ 19,818

B/A 2713- Department of Education
FY 19 SALARY PROJECTIONS

				Budgeted Authority	**207,526.00**
Pay Period Begin Date	05/06/19	05/20/19	06/03/19	06/17/19	
Pay Period End Date	05/19/19	06/02/19	06/16/19	06/30/19	
Check Date	05/31/19	06/14/19	06/28/19	07/12/19	

To move actual expenses from the "Total Projections" row to "HRDW Actual" row change the word "Projected" to Actual in this row and the formula will do the rest

PCN	Empl Name	Description	%	Grade	Step	Reg Hrs	Hourly Rate	Merit Increase	Retirement code	Fringe %	Salary	Salary Merit Increase	ER Fringe	ER Fringe Merit Increase	Group Insurance	Actual PP24	12th Insurance Projected PP25	Projected PP26	Projected PP01	Total Payroll Projection through FY19
State Funds																				
280	Kevin Laxalt	EPP	100%	39	10	80	42.48		PP01	0.20800	3,398.40		706.87		740.92	4,072.51	4,846.19	4,105.27	4,105.27	114,612.16
281	Joan Jurgensen/Jackson	EPP	100%	39	10	80	42.48		PP01	0.20800	3,398.40		706.87		740.92	4,072.50	4,846.19	4,105.27	4,105.27	114,628.21
												Adjustments								0.00
												Personnel Assessments								399.00
												Payroll Assessments								126.00
Total Postions 1													**Total Projections:**			**0.00**	**9,692.37**	**8,210.53**	**8,210.53**	**26,113.44**
																8,145.01	**0.00**	**0.00**	**0.00**	**203,651.93**

Personnel Assessment:	132.75
Payroll Assessment:	41.50
Total Projection Amount:	26,113.44
YTD Actual Expenditures:	203,651.93
	229,939.62
FY19 Legislatively Approved:	207,526.00
Total Budget Authority Available:	(22,413.62)
6/3/2019 BSR	203,651.93
Variance	0.00

	SB523	Balance
	11,344.00	(11,069.62)

	1	1 w/out	8.00	8 w/out
REGI	0.02340	0.02340	0.02340	0.02340
Medicare	0.01450	0.01450	0.01450	0.01450
Unemployment	0.00140	0.00140	0.00140	0.00140
Worker's Comp	0.02370		0.02370	
Retirement	0.14500	0.14500	0.28000	0.28000
	0.20800	0.18430	0.34300	0.31930

PP01=Employee/Employer paid (1)
PP02=Employer Paid (8)
XPP10=Employer/Employee Paid (1)
XPP11=Employer Paid (8)

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2675	Standards and Instructional Support	$31,449	
	Total	**$31,449**	

6/10/19
TG.

Steve Sisolak
Governor

Jhone Ebert
Superintendent of Public Instruction

Southern Nevada Office
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DEPARTMENT OF EDUCATION

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MEMORANDUM

DATE: June 4, 2019

TO: Catherine Brekken, Executive Budget Officer I CB 6/7/19
Governor's Finance Office

FROM: Vickie Rutledge, Management Analyst VR
Department of Education

THRU: Andrea Osborne, ASO III AO
Department of Education

SUBJECT: Fiscal Year 2019 Salary Adjustment Funds

Per Assembly Bill 517, section 3 and Senate Bill 368, section 1, appropriated General Funds to the Board of Examiners (BOE) to meet deficiencies created between the appropriated money of the respective departments and the amount of money required to pay the salaries of the employees; Standards and Instructional Support, Budget Account 2675 requests salary adjustment funds in the amount of $31,449 to augment a General Fund payroll shortfall for fiscal year 2019.

B/A 2675 - Standard & Instructional Support
Fund 101 Agency 300

						Budgeted Authority	1,227,526.00
Pay Period Begin Date	07/01/18	05/06/19	05/20/19	06/03/19	06/17/19		
Pay Period End Date	07/01/18	05/19/19	06/02/19	06/16/19	06/30/19		
Check Date	07/13/18	05/31/19	06/14/19	06/28/19	07/12/19		
	Insurance Only 1st Insurance Actual	Actual	12th Insurance Projected	Projected	Projected		

To move actual expenses from the "Total Projections" row to "HRDW Actual" row change the word "Projected" to Actual in this row and the formula will do the rest

PCN	Empl Name	Description	%	Grade	Step	Reg Hrs	Hourly Rate	Merit Increase Date	Merit Increase	Retirement code	Fringe %	Salary	Salary Merit Increase	ER Fringe	ER Fringe Merit Increase	Group Insurance	PP01	PP24	PP25	PP26	PP01	Total Payroll Projection through FY19
	FEDERAL STATE ASSESSMENTS																					
0013	BRANCAMP, DAVID	ED PRGM DIR	50%	41-10	5,205	80	$ 46.57	02/22/19		PP01	0.20800	3,725.60		774.92		740.92	370.46	2,206.12	2,620.72	2,250.26	2,250.26	62,363.50
0021	MARTINEAU, NANCY	ADMIN ASST 3	100%	27-10	2,211	80	$ 21.86	09/22/19		PP02	0.34300	1,748.80		599.84		740.92	740.92	2,348.63	3,089.55	2,348.64	2,348.64	59,739.24
0030	HARDMAN, DARRIN	ED PRGM PROF	100%	39-10	5,232	80	$ 37.26	05/21/19		PP02	0.34300	2,980.80		1,022.41		740.92	740.92	4,003.20	4,744.13	4,003.21	4,003.21	112,972.71
0090	SNYDER, ANDREW	ED PRGM PROF	100%	39-7	5,232	80	$ 32.52	01/06/20		PP02	0.34300	2,601.60		892.35		740.92	740.92	3,493.95	4,234.87	3,493.95	3,493.95	88,447.72
	STATE																					
0013	BRANCAMP, DAVID	ED PRGM DIR	50%	41-10	5,205	80	$ 46.57	09/10/19		PP01	0.20800	3,725.60		774.92		740.92	370.46	2,206.12	2,620.72	2,250.26	2,250.26	62,363.50
0006	PINTER, AMANDA	ADMIN ASST 3	100%	27-10	2,211	80	$ 24.92	05/01/19		PP01	0.20800	1,993.60		414.67			0.00	2,408.27	2,408.27	2,408.27	2,408.27	61,081.53
0008	GALLAND-COLLINS, KATHLEEN	ED PRGM SPVR	100%	40-10	5,206	80	$ 39.03	07/02/19		PP02	0.34300	3,122.40		1,070.98		740.92	740.92	4,193.37	4,934.30	4,193.38	4,193.38	117,029.92
0025	GRUBER, TRACY	ED PRGM PROF	100%	39-10	5,232	80	$ 37.26	06/04/18		PP02	0.34300	2,980.80		1,022.41		740.92	740.92	4,003.20	4,744.13	4,003.21	4,003.21	112,094.10
0029	CHANG, CINDI	ED PRGM PROF	100%	39-10	5,232	80	$ 37.26	04/23/19		PP02	0.34300	2,980.80		1,022.41		740.92	740.92	4,003.20	4,744.13	4,003.21	4,003.21	112,088.93
0034	DELEON, ANDRE	ED PRGM PROF	100%	39-10	5,232	80	$ 42.48	03/04/19		PP01	0.20800	3,398.40	0.00	706.67	0.00	740.92	740.92	4,072.51	4,846.19	4,105.27	4,105.27	114,591.50
0055	HOLSCLAW, MARY	ED PRGM PROF	100%	39-10	5,232	80	$ 42.48	01/15/20		PP01	0.20800	3,398.40		706.67		740.92	740.92	4,072.51	4,846.19	4,105.27	4,105.27	114,612.17
0110	MALORNI, JAYNE	ED PRGM PROF	100%	39-10	5,232	80	$ 37.26	12/12/19		PP02	0.34300	2,980.80		1,022.41		740.92	740.92	4,003.20	4,744.13	4,003.21	4,003.21	109,814.88
0111	CRAWFORD-FERRE, HEATHER	ED PRGM PROF	100%	39-10	5,232	80	$ 37.26	07/27/19		PP02	0.34300	2,980.80		1,022.41		740.92	740.92	4,003.20	4,744.13	4,003.21	4,003.21	109,750.77
																						0.00
													Personnel/Payroll Assessments									3,138.00
Total Postions 12														Total Projections:			0.00	0.00	63,321.49	45,171.37	45,171.37	143,664.23
																	8,150.12	45,017.47	0.00	0.00	0.00	1,106,424.25

Personnel Assessment:	797.00
Payroll Assessment:	249.00
Total Projection Amount:	143,664.23
YTD Actual Expenditures:	1,106,424.25
	1,251,134.48
FY19 Legislatively Approved:	1,227,526.00
Total Budget Authority Available:	(23,608.48)
5/3/2019 BSR	1,106,424.25
Variance	0.00
GF Budgeted	884,908.00
Projected	916,356.11
GF Payroll Shortage	(31,448.11)

	1	1 w/out	8.00	8 w/out
REGI	0.02340	0.02340	0.02340	0.02340
Medicare	0.01450	0.01450	0.01450	0.01450
Unemployment	0.00140	0.00140	0.00140	0.00140
Worker's Comp	0.02370		0.02370	
Retirement	0.14500	0.14500	0.28000	0.28000
	0.20800	0.18430	0.34300	0.31930

PP01=Employee/Employer paid (1)
PP02=Employer Paid (8)
XPP10=Employer/Employee Paid (1)
XPP11=Employer Paid (8)

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
3800	Department of Public Safety - Parole Board	$13,755	
	Total	**$13,755**	

CENTRAL OFFICE

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CHRISTOPHER DERICCO, *Chairman*
TONY CORDA, *Member*
ADAM ENDEL, *Member*
SUSAN JACKSON, *Member*

DARLA FOLEY, *Executive Secretary*

STATE OF NEVADA
STEVE SISOLAK
Governor

LAS VEGAS OFFICE

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CHRISTOPHER DERICCO, *Chairman*
MICHAEL KEELER, *Member*
ERIC CHRISTIANSON, *Member*
MINERVA DE LA TORRE, *Member*

NEVADA BOARD OF PAROLE COMMISSIONERS

March 20, 2019

Jim Rodriguez, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
209 E. Musser Street, Room 200
Carson City, NV 89701-4298

RE: Board of Examiner's Approval for General Fund Salary Adjustment funds for the Department of Public Safety, Board of Parole Commissioners

Dear Mr. Rodriguez,

The Board of Parole Commissioners has 27 positions of which are funded with General Fund Appropriation. Projections reflect that the Board will experience a shortfall of General Fund in the amount of $13,755 that is necessary to cover the 3% cost of living adjustment (COLA) in the Personnel Category.

The Board is requesting approval for General Fund Salary Adjustment in the amount of $13,755 to cover the balance of the projected shortfall in the Personnel category.

Work Program 19SA3800 has been prepared for processing once this request is approved.

Sincerely,

Brandi Salisbury
Fiscal Business Professional Trainee

OK

General Fund Salary Adjustment
Fiscal Years 2018 and 2019

Div	Division Description	Budget	Budget Account Name	FY 2018	FY 2019
480	TAHOE REGIONAL PLANNING AGENCY	4204	TAHOE REGIONAL PLANNING AGENCY	$ 22,770	$ 45,994
550	DEPARTMENT OF AGRICULTURE	2691	AGRI - NUTRITION EDUCATION PROGRAMS	$ 3,298	$ 6,848
550	DEPARTMENT OF AGRICULTURE	4540	AGRI - PLANT HEALTH & QUARANTINE SERVICES	$ 9,401	$ 20,295
550	DEPARTMENT OF AGRICULTURE	4550	AGRI - VETERINARY MEDICAL SERVICES	$ 19,350	$ 40,313
550	DEPARTMENT OF AGRICULTURE	4557	AGRI - LIVESTOCK ENFORCEMENT	$ 5,022	$ 10,376
550	DEPARTMENT OF AGRICULTURE	4600	AGRI - PREDATORY ANIMAL & RODENT CONTROL	$ 9,720	$ 20,136
611	GCB - GAMING CONTROL BOARD	4061	GCB - GAMING CONTROL BOARD	$ 685,239	$ 1,384,982
611	GCB - GAMING CONTROL BOARD	4067	GCB - GAMING COMMISSION	$ 3,356	$ 6,780
650	DPS-DIRECTOR'S OFFICE	3775	DPS - TRAINING DIVISION	$ 14,024	$ 28,361
650	DPS-DIRECTOR'S OFFICE	4704	DPS - NEVADA OFFICE OF CYBER DEFENSE COORDINATION	$ 7,919	$ 21,270
650	DPS-DIRECTOR'S OFFICE	4738	DPS - DIGNITARY PROTECTION	$ 12,591	$ 26,520
652	DPS-PAROLE & PROBATION	3740	DPS - DIVISION OF PAROLE AND PROBATION	$ 995,469	$ 2,113,168
653	DPS-INVESTIGATION DIVISION	3743	DPS - INVESTIGATION DIVISION	$ 98,115	$ 201,714
654	DPS-EMERGENCY MANAGEMENT	3673	DPS - DIVISION OF EMERGENCY MANAGEMENT	$ 6,231	$ 12,907
654	DPS-EMERGENCY MANAGEMENT	3675	DPS - HOMELAND SECURITY	$ 4,163	$ 8,515
656	DPS-FIRE MARSHAL	3816	DPS - FIRE MARSHAL	$ 7,903	$ 16,079
659	DPS-CRIMINAL JUST ASSIST	4736	DPS - JUSTICE GRANT	$ 1,256	$ 2,611
660	DPS-PAROLE BOARD	3800	DPS - PAROLE BOARD	$ 57,632	$ 117,669
700	DCNR - CONSERVATION & NATURAL RESOURCES	4150	DCNR - ADMINISTRATION	$ 13,526	$ 27,761
701	DCNR - CONSERVATION DISTRICTS	4151	DCNR - CONSERVATION DISTRICTS PROGRAM	$ 8,177	$ 17,204
702	DEPARTMENT OF WILDLIFE	4462	WILDLIFE - CONSERVATION EDUCATION	$ 1,665	$ 3,416
702	DEPARTMENT OF WILDLIFE	4464	WILDLIFE - GAME MANAGEMENT	$ 1,196	$ 2,452
702	DEPARTMENT OF WILDLIFE	4465	WILDLIFE - FISHERIES MANAGEMENT	$ 2,252	$ 4,670
702	DEPARTMENT OF WILDLIFE	4466	WILDLIFE - DIVERSITY DIVISION	$ 9,293	$ 19,016
704	DCNR - PARKS DIVISION	4162	DCNR - STATE PARKS	$ 112,628	$ 249,273
705	DCNR - DIVISION OF WATER RESOURCES	4171	DCNR - WATER RESOURCES	$ 140,568	$ 295,164
706	DCNR - FORESTRY DIVISION	4195	DCNR - FORESTRY	$ 128,554	$ 265,387
706	DCNR - FORESTRY DIVISION	4198	DCNR - FORESTRY CONSERVATION CAMPS	$ 132,070	$ 272,008
707	DCNR - STATE LANDS	4173	DCNR - STATE LANDS	$ 30,495	$ 63,324
740	B&I - BUSINESS AND INDUSTRY	4677	B&I - OFFICE OF BUSINESS AND PLANNING	$ 6,078	$ 12,560
740	B&I - BUSINESS AND INDUSTRY	4681	B&I - BUSINESS AND INDUSTRY ADMINISTRATION	$ 2,482	$ 5,119
748	B&I - REAL ESTATE DIVISION	3823	B&I - REAL ESTATE ADMINISTRATION	$ 3,528	$ 7,258
752	B&I - LABOR COMMISSION	3900	B&I - LABOR COMMISSIONER	$ 34,890	$ 72,149
901	DETR - REHABILITATION DIVISION	3254	DETR - SERVICES TO BLIND OR VISUALLY IMPAIRED	$ 4,299	$ 8,786
901	DETR - REHABILITATION DIVISION	3265	DETR - VOCATIONAL REHABILITATION	$ 29,822	$ 62,127
903	DETR - NV EQUAL RIGHTS COMMISSION	2580	DETR - EQUAL RIGHTS COMMISSION	$ 22,550	$ 46,674

Budgeted Authority 2,247,318.00

		01/14/19 01/27/19 02/08/19	01/28/19 02/10/19 02/22/19	02/11/19 02/24/19 03/08/19	02/25/19 03/10/19 03/22/19	03/11/19 03/24/19 04/05/19	03/25/19 04/07/19 04/19/19	04/08/19 04/21/19 05/03/19	04/22/19 05/05/19 05/17/19	05/06/19 05/19/19 05/31/19	05/20/19 06/02/19 06/14/19	06/03/19 06/16/19 06/28/19	06/17/19 06/30/19 07/12/19	
		8th Insurance		9th Insurance		10th Insurance		11th Insurance			12th Insurance			
PCN	Description	PP16	PP17	PP18	PP19	PP20	PP21	PP22	PP23	PP24	PP25	PP26	PP01	Total Projected Salary
1	EXEC ASSISTANT, PAROLE BOARD	3,514.89	2,775.16	3,514.69	2,775.18	3,516.10	2,775.18	3,516.10	2,775.18	2,775.18	3,516.10	2,775.18	2,775.18	27,193.34
2	UNDERFILL MAI	1,358.83	1,977.96	2,717.69	2,028.47	2,769.39	2,028.47	2,769.39	2,028.47	2,028.47	2,769.39	2,028.47	2,028.47	20,479.02
2	MANAGEMENT ANALYST 1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3	CHAIR, STATE BOARD OF PAROLE (	6,039.95	5,301.10	6,039.95	5,301.09	6,042.01	5,301.09	6,042.01	5,301.09	5,301.09	6,042.01	5,301.09	5,301.09	49,932.57
4	PAROLE BOARD MEMBER (EA)	5,070.74	4,329.83	4,329.83	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
5	PAROLE BOARD MEMBER (EA)	5,070.28	4,329.83	5,070.29	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
6	ADMIN ASSISTANT 1	2,151.41	1,410.94	2,151.41	1,410.94	2,151.86	1,410.94	2,151.86	1,410.94	1,410.94	2,151.86	1,410.94	1,410.94	14,921.26
7	PAROLE BOARD MEMBER (EA)	4,329.82	4,329.83	4,329.83	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
8	PAROLE BOARD MEMBER (EA)	5,068.68	4,329.83	5,068.68	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
9	ADMIN ASSISTANT 2	2,461.85	1,722.13	2,461.86	1,722.12	2,463.04	1,722.12	2,463.04	1,794.60	1,794.60	2,535.52	1,794.60	1,794.60	18,084.28
10	CLERICAL TRAINEE	1,968.50	1,228.04	1,968.49	1,309.47	2,098.71	1,357.79	2,098.71	1,357.79	1,357.79	2,098.71	1,357.79	1,357.79	14,394.57
13	PAROLE BOARD MEMBER (EA)	5,069.55	4,329.83	5,069.56	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
14	ADMIN ASSISTANT 1	2,267.37	1,526.92	2,267.38	1,526.91	2,267.83	1,526.91	2,267.83	1,526.91	1,526.91	2,267.83	1,526.91	1,526.91	15,964.97
16	PAROLE BOARD MEMBER (EA)	5,024.00	4,283.08	5,024.00	4,329.83	5,070.75	4,329.83	5,070.75	4,329.83	4,329.83	5,070.75	4,329.83	4,329.83	41,191.25
18	MANAGEMENT ANALYST 3	4,077.01	3,338.16	4,077.02	3,338.16	4,079.08	3,338.16	4,079.08	3,338.16	3,338.16	4,079.08	3,338.16	3,338.16	32,266.21
19	PROGRAM OFFICER 1	3,533.16	2,791.99	3,533.17	2,793.44	3,534.36	2,793.44	3,534.36	2,793.44	2,793.44	3,534.36	2,793.44	2,793.44	27,363.72
20	ADMIN ASSISTANT 2	2,265.77	1,526.92	2,265.77	1,526.91	2,267.83	1,526.91	2,267.83	1,526.91	1,526.91	2,267.83	1,526.91	1,587.80	16,025.85
21	ADMIN ASSISTANT 2	2,327.53	1,587.80	2,327.52	1,587.80	2,328.72	1,587.80	2,328.72	1,587.80	1,587.80	2,328.72	1,587.80	1,587.80	16,512.92
22	ADMIN ASSISTANT 4	3,296.01	2,559.22	3,296.01	2,559.22	3,300.14	2,559.22	3,300.14	2,559.22	2,559.22	3,300.14	2,559.22	2,559.22	25,255.75
23	ADMIN ASSISTANT 1	2,326.66	1,587.79	2,326.66	1,653.51	2,394.43	1,653.51	2,394.43	1,653.51	1,653.51	2,394.43	1,653.51	1,653.51	17,104.35
25	ADMIN ASSISTANT 3	2,688.15	1,947.23	2,696.17	2,028.47	2,769.39	2,028.47	2,769.39	2,028.47	2,028.47	2,769.39	2,028.47	2,028.47	20,479.02
26	ADMIN ASSISTANT 3	2,394.20	1,653.29	2,394.21	1,653.51	2,394.43	1,653.51	2,394.43	1,653.51	1,653.51	2,394.43	1,653.51	1,653.51	17,104.35
27	FISCAL/BUSINESS PROF TRAINEE	3,146.93	2,408.26	3,146.93	2,514.57	3,255.49	2,514.57	3,255.49	2,514.57	2,514.57	3,255.49	2,514.57	2,514.57	24,853.92
28	PAROLE HEARINGS EXAMINER 2	4,931.29	4,185.40	4,931.30	4,193.38	4,934.30	4,193.38	4,934.30	4,193.38	4,193.38	4,934.30	4,193.38	4,193.38	39,963.21
29	PAROLE HEARINGS EXAMINER 1	4,565.96	3,823.13	4,567.40	3,825.94	4,566.86	3,825.94	4,566.86	3,825.94	3,825.94	4,566.86	3,825.94	3,825.94	36,656.21
30	PAROLE HEARINGS EXAMINER 1	3,872.90	3,134.03	3,872.90	3,134.04	4,015.08	3,274.16	4,015.08	3,274.16	3,274.16	4,015.08	3,274.16	3,274.16	31,550.10
31	PAROLE HEARINGS EXAMINER 1	4,076.09	3,336.34	4,076.09	3,338.16	4,079.08	3,338.16	4,079.08	3,338.16	3,338.16	4,079.08	3,338.16	3,338.16	32,266.21
35	ADMIN ASSISTANT 3	2,682.96	1,948.26	2,682.96	1,948.26	2,689.18	1,948.26	2,689.18	1,948.26	2,028.47	2,769.39	2,028.47	2,028.47	20,077.97
				1,794.00										
Total Positions 27		0.00	0.00	0.00	78,148.56	98,341.85	78,337.01	98,341.85	78,409.49	78,489.70	98,494.54	78,489.70	78,550.58	765,603.26
		95,580.49	77,702.30	98,001.97										1,492,557.53

Total Payroll Projection	765,603.26
YTD Actual Expenditures	1,492,557.53
Payroll/personnel Assessment	2,912.00
Total Payroll Cost	2,261,072.80

3800 - Parole Board
Summary by PCN
Fiscal Year: 2019

PCN#	Gd-Ste	Leg. App.	Actual	Projected	Difference
000001	99-99	$ 78,859	$ 53,438.84	$ 27,199.34	$ (1,779.18)
000002	33-2	$ 69,152	18,799.90	20,479.02	29,873.08
000003	99-99	$ 141,434	130,498.30	49,932.57	(38,996.87)
000004	99-99	$ 114,902	91,148.51	41,191.25	(17,437.76)
000005	99-99	$ 114,902	79,358.72	41,191.25	(5,647.97)
000006	23-1	$ 48,378	25,814.47	14,921.26	7,642.27
000007	99-99	$ 117,369	73,804.58	41,191.25	2,373.17
000008	99-99	$ 114,902	79,345.87	41,191.25	(5,635.12)
000009	25-2	$ 52,133	35,671.02	18,084.28	(1,622.30)
000010	21-2	$ 45,584	22,032.92	14,394.57	9,156.51
000013	99-99	$ 114,902	79,352.84	41,191.25	(5,642.09)
000014	23-1	$ 46,861	32,423.79	15,964.97	(1,527.76)
000016	99-99	$ 113,752	78,567.68	41,191.25	(6,006.93)
000018	37-10	$ 98,542	51,378.30	32,266.21	14,897.49
000019	31-10	$ 79,299	53,729.39	27,363.72	(1,794.11)
000020	25-3	$ 53,758	32,608.85	16,025.85	5,123.30
000021	25-3	$ 53,907	31,324.01	16,512.92	6,070.07
000022	29-10	$ 72,020	49,841.84	25,255.75	(3,077.59)
000023	25-4	$ 56,692	33,645.90	17,104.35	5,941.75
000025	27-3	$ 57,975	39,895.43	20,479.02	(2,399.45)
000026	27-5	$ 61,692	37,220.98	17,104.35	7,366.67
000027	33-10	$ 85,812	47,265.93	24,853.92	13,692.15
000028	40-10	$ 111,571	76,981.85	39,963.21	(5,374.06)
000029	38-10	$ 104,893	70,876.89	36,656.21	(2,640.10)
000030	38-3	$ 86,970	59,228.70	31,550.10	(3,808.80)
000031	38-5	$ 94,365	62,138.67	32,266.21	(39.88)
000035	27-4	$ 56,692	39,659.35	20,077.97	(3,045.32)
Payroll/Personnel Assessment			6,504.00	2,912.00	(9,416.00)
	Total	$ 2,247,318	$ 1,492,557.53	$ 768,515.26	$ (13,754.79)

Subtracted $1.00 from the following PCN # in order to match the leg. approved amount:
PCN# 000003
PCN# 000004
PCN# 000005
PCN# 000007
PCN# 000008
PCN# 000013
PCN# 000016
The $7 difference is due to rounding up.

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2980	University of Nevada Reno	$6,889,894	
2983	Intercollegiate Athletics UNR	$26,488	
2986	System Administration	$38,123	
2987	University of Nevada Las Vegas	$9,248,858	
2988	Intercollegiate Athletics UNLV	$64,325	
2990	Cooperative Extension Service	$114,664	
2992	UNLV Law School	$485,659	
2994	Great Basin College	$568,168	
3001	Statewide Programs - UNLV	$65,987	
3002	UNLV Dental School	$536,133	
3003	Business Center North	$80,345	
3005	NV State College at Henderson	$551,388	
3010	Desert Research Institute	$255,852	
3011	College of Southern Nevada	$3,913,862	
3012	Western Nevada College	$485,399	
3014	UNLV School of Medicine	$884,865	
3018	Truckee Meadows Community College	$946,056	
3221	Laboratory and Research	$23,727	
	Total	$25,179,793	

5/16/19 TG.

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

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

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2982	UNR – School of Medicine	$1,238,182	
	Total	$1,238,182	

6/14/19
TG.

Nevada System of Higher Education

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

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

June 13, 2019

MEMORANDUM

To: Tiffany Greenameyer, Budget Analyst
Governor's Finance Office, Budget Division

From: Andrew Clinger, Chief Financial Officer, NSHE

Subject: Request for Salary Adjustment Funds (FY 2019)

NSHE requests Salary Adjustment funds totaling $26,417,974, for FY 2019. Attached is a summary document, identifying the amount requested for each budget account. Also attached are the templates completed for each budget account to demonstrate the requested Salary Adjustment Funds.

Please note, several accounts remain under review. Requests for those accounts, if deemed eligible, will be submitted in a separate request. Additionally, NSHE will request redistribution of available funds to other accounts with a budgetary shortfall due to the COLA in FY 2019.

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

Enclosure: NSHE Salary Adjustment Request Summary
Institution Requests for Salary Adjustment Funds

General Fund Salary Adjustment for NSHE
Fiscal Years 2019

Budget	Budget Account Name	FY 2019	80%	Requested Amount as of 5-3-19
2977	NSHE - SPECIAL PROJECTS	$ 39,773	$ 31,818	
2980	NSHE - UNIVERSITY OF NEVADA, RENO	$ 8,612,367	$ 6,889,894	$ 6,889,894
2982	NSHE - UNR SCHOOL OF MEDICINE	$ 1,551,056	$ 1,240,845	$ 1,238,182
2983	NSHE - INTERCOLLEGIATE ATHLETICS - UNR	$ 72,216	$ 57,773	$ 26,488
2985	NSHE - STATEWIDE PROGRAMS - UNR	$ 265,049	$ 212,039	
2986	NSHE - SYSTEM ADMINISTRATION	$ 204,687	$ 163,750	$ 38,123
2987	NSHE - UNIVERSITY OF NEVADA, LAS VEGAS	$ 11,561,073	$ 9,248,858	$ 9,248,858
2988	NSHE - INTERCOLLEGIATE ATHLETICS - UNLV	$ 80,406	$ 64,325	$ 64,325
2989	NSHE - AGRICULTURAL EXPERIMENT STATION	$ 256,719	$ 205,375	
2990	NSHE - COOPERATIVE EXTENSION SERVICE	$ 264,924	$ 211,939	$ 114,664
2991	NSHE - SYSTEM COMPUTING CENTER	$ 607,616	$ 486,093	
2992	NSHE - UNLV LAW SCHOOL	$ 613,154	$ 490,523	$ 485,659
2994	NSHE - GREAT BASIN COLLEGE	$ 710,210	$ 568,168	$ 568,168
2996	NSHE - UNIVERSITY PRESS	$ 21,314	$ 17,051	
3001	NSHE - STATEWIDE PROGRAMS - UNLV	$ 82,484	$ 65,987	$ 65,987
3002	NSHE - UNLV DENTAL SCHOOL	$ 888,528	$ 710,822	$ 536,133
3003	NSHE - BUSINESS CENTER NORTH	$ 100,431	$ 80,345	$ 80,345
3004	NSHE - BUSINESS CENTER SOUTH	$ 85,008	$ 68,006	
3005	NSHE - NEVADA STATE COLLEGE	$ 764,744	$ 611,795	$ 551,388
3010	NSHE - DESERT RESEARCH INSTITUTE	$ 319,815	$ 255,852	$ 255,852
3011	NSHE - COLLEGE OF SOUTHERN NEVADA	$ 5,141,787	$ 4,113,430	$ 3,913,862
3012	NSHE - WESTERN NEVADA COLLEGE	$ 671,580	$ 537,264	$ 485,399
3014	NSHE - UNLV SCHOOL OF MEDICINE	$ 1,106,081	$ 884,865	$ 884,865
3018	NSHE - TRUCKEE MEADOWS COMMUNITY COLLEGE	$ 2,132,078	$ 1,705,662	$ 946,056
3221	NSHE - HEALTH LABORATORY AND RESEARCH	$ 76,787	$ 61,430	$ 23,727
	Total COLA	$ 36,229,887	$ 28,983,909	$ 26,417,974
	Total Eligible from GF Salary Adjustment Account	$ 28,983,910		

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNR**
Budget Account: **2980**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	93,264,439	93,264,439	-
GF Appropriations	-	24,069	24,069
GF Appropriations	-	23,316,110	23,316,110
Salary Adjustment Funds	-	8,612,367	8,612,367
Non GF Revenue	110,621,709	110,621,709	-
Total Revenue	203,886,148	235,838,694	31,952,546

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	100,283,542	114,919,453	14,635,911
Graduate Assistant	9,186,576	9,909,948	723,372
Classified Salary	23,362,661	22,887,340	(475,321)
Fringe	40,501,685	40,173,376	(328,309)
Wages	2,251,381	2,267,998	16,617
Vacancy Savings	(2,459,944)	-	2,459,944
Operating	30,760,247	45,680,579	14,920,332
Total Expenditures	203,886,148	235,838,694	31,952,546

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	81,479,608	26,973,804	108,453,412
Prof on Leave (if not obligated)	-	1,117,405	1,117,405
Classified (and Technologist)	16,925,358	5,875,709	22,801,067
Class/Tech on Leave (if not obligated)	-	239,149	239,149
Fringe	30,952,992	10,418,811	41,371,803
Obligated Health Insurance	-	-	-
Wages	1,830,989	667,887	2,498,876
LOAs	3,124,437	1,173,624	4,298,061
GAs and TAs	7,391,549	3,020,050	10,411,599
Med Residents	-	-	-
Subtotal: Personnel Costs	141,704,932	49,486,439	191,191,372

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	1,891,772	626,118	2,517,890
Ad hoc/Reclassified Positions	506,561	168,854	675,414
LOAs	12,346,975	4,861,560	17,208,535
GAs	-	-	-
Overtime	353,419	-	353,419
Terminal/Retirement Payouts	358,697	-	358,697
Other Addt'l Payroll Adjust	778,550	104,673	883,222
Fringe on Excluded Expenses	1,990,916	742,519	2,733,435
Subtotal: Excluded Expenses	18,226,890	6,503,723	24,730,613
Total Eligible Personnel Expenses	123,478,042	42,982,716	166,460,759
L01 Approved Personnel Exp			
		Professional	97,329,653
		Classified	23,362,661
		Fringe (Professional)	29,212,318
		Fringe (Classified)	10,322,643
		Vacancy Savings	(2,459,944)
		Subtotal	157,767,331
Salary Adjustment Request			8,693,428

Available Salary Adjustment Funds	6,889,894
Requested Salary Adjustment Funds	**6,889,894**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNR ICA**
Budget Account: **2983**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	5,399,397	5,399,397	-
Salary Adjustment Funds	-	72,216	72,216
Non GF Revenue	-	-	-
Total Revenue	5,399,397	5,471,613	72,216

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	685,340	748,032	62,692
LOA/Grad Assistant	-	-	
Classified Salary	334,895	343,849	8,954
Fringe	369,894	339,179	(30,715)
Wages	-	-	-
Vacancy Savings	-		
Operating	4,009,268	4,040,553	31,285
Total Expenditures	5,399,397	5,471,613	72,216

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	$567,077	$328,025	$895,102
Prof on Leave (if not obligated)	-	-	-
Classified (and Technologist)	189,711	60,840	250,551
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	218,492	110,699	329,191
Obligated Health Insurance	-	-	-
Wages	-	-	-
LOAs	-	-	-
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	975,279	499,564	1,474,843

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	-	-	-
LOAs	-	-	-
GAs	-	-	-
Overtime	5,463	-	5,463
Terminal/Retirement Payouts	7,833	-	7,833
Other Addt'l Payroll Adjust	10,102	2,760	12,862
Fringe on Excluded Expenses	490	87	577
Subtotal: Excluded Expenses	23,888	2,847	26,735
Total Eligible Personnel Expenses	951,391	496,717	1,448,108
L01 Approved Personnel Exp			
		Professional	685,340
		Classified	334,895
		Fringe (Professional)	223,060
		Fringe (Classified)	146,836
		Vacancy Savings	-
		Subtotal	1,390,131
Salary Adjustment Request			57,977

Available Salary Adjustment Funds	57,773
Less increase to Operating in BOR approved budget	31,285
Revised Available Salary Adjustment Funds	26,488

Requested Salary Adjustment Funds	**26,488**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **SYSTEM ADMINISTRATION**
Budget Account: **2986**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	4,699,648	4,699,648	-
Salary Adjustment Funds		204,687	204,687
Non GF Revenue	226,344	226,344	-
Total Revenue	4,925,992	5,130,679	204,687

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	2,739,775	3,001,980	262,205
LOA/Grad Assistant	-	-	
Classified Salary	39,434	35,722	(3,712)
Fringe	918,794	1,035,373	116,579
Wages	-	-	-
Operating	1,227,989	1,057,604	(170,385)
Total Expenditures	4,925,992	5,130,679	204,687

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	2,122,046	890,875	3,012,921
Prof on Leave (if not obligated)			
Classified (and Technologist)	27,163	3,231	30,394
Class/Tech on Leave (if not obligated)			
Fringe	701,416	242,062	943,478
Obligated Health Insurance		57,420	57,420
Wages	-	-	
LOAs	-	-	
GAs and TAs	-	-	
Med Residents	-	-	
Subtotal: Personnel Costs	2,850,624	1,193,588	4,044,212

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	135,188		135,188
Ad hoc/Reclassified Positions	15,113	-	15,113
LOAs	-	-	-
GAs	-	-	-
Overtime	-	-	-
Terminal/Retirement Payouts	49,917	-	49,917
Other Addt'l Payroll Adjust	38,304	4,123	42,428
Fringe on Excluded Expenses	65,441	-	65,441
Subtotal: Excluded Expenses	303,963	4,123	308,086
Total Eligible Personnel Expenses	2,546,662	1,189,464	3,736,126
L01 Approved Personnel Exp			3,698,003
Salary Adjustment Request			38,123

Available Salary Adjustment Funds 163,750

Requested Salary Adjustment Funds	**38,123**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV**
Budget Account: **2987**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	130,523,395	130,523,395	-
GF Appropriations	-	(58,469)	(58,469)
GF Appropriations	-	32,630,849	32,630,849
Salary Adjustment Funds	-	11,561,073	11,561,073
Non GF Revenue	124,784,875	124,784,875	-
Total Revenue	255,308,270	299,441,723	44,133,453

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	141,884,625	157,263,610	15,378,985
Letter of Appointment	-	-	-
Graduate Assistant	11,451,335	17,553,595	6,102,260
Classified Salary	27,523,954	27,700,116	176,162
Fringe	51,567,006	55,415,277	3,848,271
Wages	1,481,091	1,536,636	55,545
Vacancy Savings	(3,246,601)	-	3,246,601
Operating	24,646,860	39,972,487	15,325,627
Total Expenditures	255,308,270	299,441,721	44,133,451

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	130,151,968.08	25,518,652.57	155,670,620.65
Prof on Leave (if not obligated)	-	425,507.17	425,507.17
Classified (and Technologist)	23,385,496.61	5,556,334.68	28,941,831.29
Class/Tech on Leave (if not obligated	-	183,131.52	183,131.52
Fringe	46,054,686.13	6,430,012.47	52,484,698.60
Obligated Health Insurance	-	3,205,183.93	3,205,183.93
Wages	1,643,470.96	607,754.22	2,251,225.18
LOAs	8,308,966.23	1,912,154.34	10,221,120.57
Postdoctoral	150,489.43	30,066.56	180,555.99
GAs and TAs	9,699,367.01	2,431,614.85	12,130,981.86
Med Residents	-	-	-
Subtotal: Personnel Costs	219,394,444.45	46,300,412.31	265,694,856.76

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	917,421.65	437,595.11	1,355,016.76
Ad hoc/Reclassified Positions	7,891,958.47	-	7,891,958.47
LOAs and Wages	19,651,804.20	4,951,523.41	24,603,327.61
GAs	-	-	-
Overtime	997,912.50	-	997,912.50
Terminal/Retirement Payouts	1,653,154.67	-	1,653,154.67
Other Addt'l Payroll Adjust	2,676,884.11	370,568.34	3,047,452.45
Fringe on Excluded Expenses	2,217,440.56	248,557.23	2,465,997.79
Subtotal: Excluded Expenses	36,006,576.16	6,008,244.09	42,014,820.24
Total Eligible Personnel Expenses	183,387,868.29	40,292,168.22	223,680,036.51
L01 Approved Personnel Exp			
		Professional	135,602,811
		Classified	27,487,907
		Fringe (Professional)	39,189,894
		Fringe (Classified)	11,968,707
		Vacancy Savings	(3,246,601)
		Subtotal	211,002,718
Salary Adjustment Request			12,677,319

Available Salary Adjustment Funds 9,248,858

Requested Salary Adjustment Funds **9,248,858**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **ICA**
Budget Account: **2988**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	7,800,604	7,800,604	-
Salary Adjustment Funds	-	80,406	80,406
Non GF Revenue	-	-	-
Total Revenue	7,800,604	7,881,010	80,406

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	1,094,377	1,183,830	89,453
LOA/Grad Assistant	-	-	
Classified Salary	43,024	43,688	664
Fringe	376,285	418,038	41,753
Wages	-	-	-
Vacancy Savings	-	-	-
Operating	6,286,918	6,235,454	(51,464)
Total Expenditures	7,800,604	7,881,010	80,406

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	1,014,306.23	205,375.46	1,219,681.69
Prof on Leave (if not obligated)	-	-	-
Classified (and Technologist)	36,136.36	9,508.95	45,645.31
Class/Tech on Leave (if not obligated	-	-	-
Fringe	346,397.06	43,234.60	389,631.66
Obligated Health Insurance	-	28,901.70	28,901.70
Wages	-	-	-
LOAs	-	-	-
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	1,396,839.65	287,020.71	1,683,860.36

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	-	-	-
LOAs	-	-	-
GAs			
Overtime	59.72	-	59.72
Terminal/Retirement Payouts	3,364.13	-	3,364.13
Other Addt'l Payroll Adjust	-	-	-
Fringe on Excluded Expenses	633.07	-	633.07
Subtotal: Excluded Expenses	4,056.92	-	4,056.92
Total Eligible Personnel Expenses	1,392,782.73	287,020.71	1,679,803.44
L01 Approved Personnel Exp			
		Professional	1,094,377
		Classified	43,024
		Fringe (Professional)	352,775
		Fringe (Classified)	23,510
		Vacancy Savings	-
		Subtotal	1,513,686
Salary Adjustment Request			166,117

Available Salary Adjustment Funds 64,325

Requested Salary Adjustment Funds **64,325**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **COOP EXT**
Budget Account: **2990**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	3,610,595	3,610,595	-
Salary Adjustment Funds	-	264,924	264,924
Non GF Revenue	1,892,521	1,892,521	-
Total Revenue	5,503,116	5,768,040	264,924

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	3,103,976	3,239,736	135,760
LOA/Grad Assistant	-	-	-
Classified Salary	648,284	610,792	(37,492)
Fringe	1,132,791	1,095,917	(36,874)
Wages	-	-	-
Vacancy Savings	(106,255)	-	106,255
Operating	724,320	821,595	97,275
Total Expenditures	5,503,116	5,768,040	264,924

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	$1,943,571	$1,258,289	$3,201,860
Prof on Leave (if not obligated)	-	2,270	2,270
Classified (and Technologist)	429,935	202,600	632,534
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	727,232	414,702	1,141,934
Obligated Health Insurance	-	-	-
Wages	18,029	12,746	30,775
LOAs	10,860	7,221	18,081
GAs and TAs	2,912	4,459	7,371
Med Residents	-	-	-
Subtotal: Personnel Costs	3,132,539	1,902,287	5,034,825

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	-	-	-
LOAs and Wages	31,801.34	24,426.16	56,227.50
GAs	-	-	-
Overtime	2,433.23	-	2,433.23
Terminal/Retirement Payouts	-	-	-
Other Addt'l Payroll Adjust	5,301.46	-	5,301.46
Fringe on Excluded Expenses	1,558.46	1,055.21	2,613.66
Subtotal: Excluded Expenses	41,094.49	25,481.37	66,575.85
Total Eligible Personnel Expenses	3,091,444.04	1,876,805.42	4,968,249.47
L01 Approved Personnel Exp			
		Professional	3,103,976
		Classified	648,487
		Fringe (Professional)	862,463
		Fringe (Classified)	270,125
		Vacancy Savings	(106,255)
		Subtotal	4,778,796
Salary Adjustment Request			189,453

Available Salary Adjustment Funds	211,939
less increase in Operating in BOR approved budget	97,275
Max available for Salary Adjustment Funds	114,664

Requested Salary Adjustment Funds	**114,664**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV LAW**
Budget Account: **2992**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	9,791,110	9,791,110	-
Salary Adjustment Funds	-	613,154	613,154
Non GF Revenue	4,814,128	4,814,128	-
Total Revenue	14,605,238	15,218,392	613,154

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	7,834,207	8,244,924	410,717
Letter of Appointments	-	-	-
Resident Physicians	-	-	-
Graduate Assistant	-	-	-
Classified Salary	866,197	898,125	31,928
Fringe	2,385,935	2,415,059	29,124
Wages	157,400	157,400	-
Vacancy Savings	(136,521)	-	136,521
Operating	3,498,020	3,502,884	4,864
Total Expenditures	14,605,238	15,218,392	613,154

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	7,192,916.29	1,447,749.30	8,640,665.59
Prof on Leave (if not obligated)		35,505.45	35,505.45
Classified (and Technologist)	821,249.77	214,956.25	1,036,206.02
Class/Tech on Leave (if not obligated)			-
Fringe	2,084,702.09	336,151.96	2,420,854.05
Obligated Health Insurance			-
Wages	164,886.33	40,110.77	204,997.10
LOAs	$284,775.52	$86,874.48	371,650.00
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	10,548,530.00	2,161,348.21	12,709,878.21

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	233,233.80	-	233,233.80
LOAs and Wages	449,661.85	126,985.25	576,647.10
GAs	-	-	-
Overtime	13,405.35	-	13,405.35
Terminal/Retirement Payouts	6,151.64	-	6,151.64
Other Addt'l Payroll Adjust	160,317.43	32,430.40	192,747.83
Fringe on Excluded Expenses	85,354.14	5,996.38	91,350.52
Subtotal: Excluded Expenses	948,124.21	165,412.03	1,113,536.24
Total Eligible Personnel Expenses	9,600,405.79	1,995,936.18	11,596,341.97
L01 Approved Personnel Exp			
		Professional	7,834,207
		Classified	866,197
		Fringe (Professional)	2,012,832
		Fringe (Classified)	370,742
		Vacancy Savings	(136,521)
		Subtotal	10,947,457
Salary Adjustment Request			648,885

Available Salary Adjustment Funds	490,523
Less increase in Operaring in BoR approved budget	4,864
Revised Available Salary Adjustment Funds	485,659

Requested Salary Adjustment Funds	**485,659**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **GBC**
Budget Account: **2994**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	11,316,385	11,316,385	-
GF Appropriations	-	2,311	2,311
GF Appropriations	-	2,829,096	2,829,096
Salary Adjustment Funds	-	710,210	710,210
Non GF Revenue	4,561,711	4,561,711	-
Total Revenue	15,878,096	19,419,713	3,541,617

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	8,311,978	10,500,494	2,188,516
Teaching Assistants	-	-	-
Classified Salary	1,735,750	2,409,203	673,453
Fringe	3,177,063	4,432,558	1,255,495
Wages	71,748	121,748	50,000
Vacancy Savings	(207,833)	-	207,833
Operating	2,789,390	1,955,710	(833,680)
Total Expenditures	15,878,096	19,419,713	3,541,617

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	7,265,213.29	2,610,178.18	9,875,391.47
Prof on Leave (if not obligated)	-	-	-
Classified (and Technologist)	1,618,486.86	540,614.40	2,159,101.26
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	2,888,813.07	678,936.18	3,567,749.25
Obligated Health Insurance	-	-	-
Wages	64,595.00	15,340.14	79,935.14
LOAs	880,934.74	344,522.44	1,225,457.18
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	12,718,042.96	4,189,591.34	16,907,634.30

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	417,459.75	139,053.25	556,513.00
LOAs	945,529.74	359,862.58	1,305,392.32
GAs	-	-	-
Overtime	44,684.62	-	44,684.62
Terminal/Retirement Payouts	167,716.41	-	167,716.41
Other Addt'l Payroll Adjust	487,748.64	358,215.37	845,964.01
Fringe on Excluded Expenses	248,059.89	99,638.45	347,698.34
Subtotal: Excluded Expenses	2,311,199.05	956,769.65	3,267,968.70
Total Eligible Personnel Expenses	10,406,843.91	3,232,821.70	13,639,665.60
L01 Approved Personnel Exp			
		Professional	6,914,104
		Classified	1,735,750
		Fringe (Professional)	2,398,934
		Fringe (Classified)	732,526
		Vacancy Savings	(207,833)
		Subtotal	11,573,481
Salary Adjustment Request			2,066,184.60

Available Salary Adjustment Funds 568,168

Requested Salary Adjustment Funds	**568,168**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV - STATEWIDE PROGRAMS**
Budget Account: **3001**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	3,717,851	3,717,851	-
Salary Adjustment Funds	-	82,484	82,484
Non GF Revenue	-	-	-
Total Revenue	3,717,851	3,800,335	82,484

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	1,113,714	1,235,564	121,850
LOA/Grad Assistant	-	-	-
Classified Salary	49,047	52,033	2,986
Fringe	341,292	362,380	21,088
Wages	8,000	8,000	-
Vacancy Savings	-	-	-
Operating	2,205,798	2,142,358	(63,440)
Total Expenditures	3,717,851	3,800,335	82,484

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	1,073,132.71	182,832.74	1,255,965.45
Prof on Leave (if not obligated)	-	-	-
Classified (and Technologist)	74,787.52	20,349.15	95,136.67
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	326,889.75	43,245.88	370,135.63
Obligated Health Insurance	-	5,008.93	5,008.93
Wages	10,832.75	-	10,832.75
LOAs	50,193.60	24,727.29	74,920.89
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	1,535,836.33	276,163.99	1,812,000.32

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	110,996.00	-	110,996.00
LOAs and Wages	61,026.35	24,727.29	85,753.64
GAs			-
Overtime	-	-	-
Terminal/Retirement Payouts	9,328.32	-	9,328.32
Other Addt'l Payroll Adjust	5,121.68	-	5,121.68
Fringe on Excluded Expenses	11,799.27	778.91	12,578.18
Subtotal: Excluded Expenses	198,271.62	25,506.20	223,777.82
Total Eligible Personnel Expenses	1,337,564.71	250,657.79	1,588,222.50
L01 Approved Personnel Exp			
		Professional	1,113,714
		Classified	49,047
		Fringe (Professional)	322,350
		Fringe (Classified)	18,822
		Vacancy Savings	-
		Subtotal	1,503,933
Salary Adjustment Request			84,290

Available Salary Adjustment Funds 65,987

Requested Salary Adjustment Funds	**65,987**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV DENTAL**
Budget Account: **3002**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	9,104,290	9,104,290	-
Salary Adjustment Funds	-	888,528	888,528
Non GF Revenue	8,939,402	8,939,402	-
Total Revenue	18,043,692	18,932,220	888,528

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	8,927,674	9,314,775	387,101
Letter of Appointment	-	-	
Resident Physicians	-	-	-
Graduate Assistant	-	-	-
Classified Salary	3,578,933	3,638,691	59,758
Fringe	3,830,056	3,820,708	(9,348)
Wages	-	15,000	15,000
Vacancy Savings	(261,328)	-	261,328
Operating	1,968,357	2,143,046	174,689
Total Expenditures	18,043,692	18,932,220	888,528

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	7,714,651.71	1,539,799.40	9,254,451.11
Prof on Leave (if not obligated)	-	42,576.36	42,576.36
Classified (and Technologist)	3,543,815.92	914,085.39	4,457,901.31
Class/Tech on Leave (if not obligated)	-	31,229.86	31,229.86
Fringe	3,216,185.24	503,440.58	3,719,625.82
Obligated Health Insurance	-	338,679.82	338,679.82
Wages	-	-	-
LOAs	284,769.04	156,675.76	441,444.80
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	14,759,421.91	3,526,487.17	18,285,909.08

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	168,296.02	-	168,296.02
LOAs	284,769.04	156,675.76	441,444.80
GAs			-
Overtime	93,640.16	-	93,640.16
Terminal/Retirement Payouts	45,745.48	-	45,745.48
Other Addt'l Payroll Adjust	375,224.71	54,513.36	429,738.07
Fringe on Excluded Expenses	56,298.38	-	56,298.38
Subtotal: Excluded Expenses	1,023,973.79	211,189.12	1,235,162.91
Total Eligible Personnel Expenses	13,735,448.12	3,315,298.05	17,050,746.17
L01 Approved Personnel Exp			
		Professional	8,927,674
		Classified	3,578,933
		Fringe (Professional)	2,282,500
		Fringe (Classified)	1,547,556
		Vacancy Savings	(261,328)
		Subtotal	16,075,335
Salary Adjustment Request			975,411

Available Salary Adjustment Funds	710,822
less increase to BoR Operating category	174,689
Revised Salary Adjustment Funds (max amount)	536,133

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **BCN**
Budget Account: **3003**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	2,047,710	2,047,710	-
Salary Adjustment Funds	-	100,431	100,431
Non GF Revenue	-	-	-
Total Revenue	2,047,710	2,148,141	100,431

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	754,635	809,470	54,835
LOA/Grad Assistant	-	-	
Classified Salary	630,490	699,296	68,806
Fringe	507,522	507,922	400
Wages	14,000	14,000	-
Vacancy Savings	-	-	-
Operating	141,063	117,453	(23,610)
Total Expenditures	2,047,710	2,148,141	100,431

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	$599,363.48	$195,209.84	794,573.32
Prof on Leave (if not obligated)			-
Classified (and Technologist)	$536,569.53	$194,529.06	731,098.59
Class/Tech on Leave (if not obligated)			-
Fringe	$382,770.37	$139,747.43	522,517.80
Obligated Health Insurance			-
Wages	$21,643.17	$0.00	21,643.17
LOAs	$2,935.90	-	2,935.90
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	1,543,282.45	529,486.33	2,072,768.78

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	25,672.95	8,856.42	34,529.37
Ad hoc/Reclassified Positions	-	-	-
LOAs and Wages	$24,579.07	$0.00	24,579.07
GAs	-	-	-
Overtime	$7,679.71	-	7,679.71
Terminal/Retirement Payouts	-	-	-
Other Addt'l Payroll Adjust	$2,501.29	$791.02	3,292.31
Fringe on Excluded Expenses	14,416.31	4,006.50	18,422.81
Subtotal: Excluded Expenses	74,849.33	13,653.94	88,503.27
Total Eligible Personnel Expenses	1,468,433.12	515,832.39	1,984,265.51
L01 Approved Personnel Exp			
		Professional	754,635
		Classified	630,490
		Fringe (Professional)	244,278
		Fringe (Classified)	262,992
		Vacancy Savings	-
		Subtotal	1,892,395
Salary Adjustment Request			91,871

Available Salary Adjustment Funds 80,345

Requested Salary Adjustment Funds **80,345**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **NSC**
Budget Account: **3005**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	12,799,449	12,799,449	-
GF Appropriations	-	3,396	3,396
GF Appropriations	-	3,199,862	3,199,862
Salary Adjustment Funds	-	764,744	764,744
Non GF Revenue	8,827,642	8,827,692	50
Total Revenue	21,627,091	25,595,143	3,968,052

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	11,879,558	13,653,308	1,773,750
Teaching Assistants	-	-	-
Classified Salary	1,173,466	1,198,202	24,736
Fringe	3,582,457	3,927,054	344,597
Wages	-	12,000	12,000
Vacancy Savings	(203,461)	-	203,461
Operating	5,195,071	6,804,579	1,609,508
Total Expenditures	21,627,091	25,595,143	3,968,052

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	7,809,304.52	2,704,886.48	10,514,191.00
Prof on Leave (if not obligated)	-	30,543.58	30,543.58
Classified (and Technologist)	989,304.57	325,601.15	1,314,905.72
Class/Tech on Leave (if not obligated)	-	14,172.30	14,172.30
Fringe	2,776,307.02	1,011,829.59	3,788,136.61
Obligated Health Insurance	-	-	-
Wages	15,716.10	10,763.54	26,479.64
LOAs	2,248,846.14	1,076,875.58	3,325,721.72
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	13,839,478.35	5,174,672.21	19,014,150.56

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	260,809.52	86,936.51	347,746.03
Ad hoc/Reclassified Positions	21,149.66	7,049.89	28,199.54
LOAs	2,248,846.14	1,076,875.58	3,325,721.72
GAs	-	-	-
Overtime	1,441.59	-	1,441.59
Terminal/Retirement Payouts	70,861.95	-	70,861.95
Other Addt'l Payroll Adjust	97,627.44	12,907.10	110,534.54
Fringe on Excluded Expenses	317,799.30	132,867.84	450,667.14
Subtotal: Excluded Expenses	3,018,535.59	1,316,636.91	4,335,172.50
Total Eligible Personnel Expenses	10,820,942.76	3,858,035.30	14,678,978.06
L01 Approved Personnel Exp			
		Professional	9,641,398
		Classified	1,173,466
		Fringe (Professional)	2,992,185
		Fringe (Classified)	524,002
		Vacancy Savings	(203,461)
		Subtotal	14,127,590
Salary Adjustment Request			551,388

Available Salary Adjustment Funds 611,795

Requested Salary Adjustment Funds	**551,388**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **DRI**
Budget Account: **3010**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	7,226,777	7,226,777	-
GF Appropriations	-	515,626	
Salary Adjustment Funds	-	319,815	319,815
Non GF Revenue	148,486	55,269	(93,217)
Total Revenue	7,375,263	8,117,487	226,598

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	3,080,473	3,334,199	253,726
Graduate Assistant	-	9,381	9,381
Classified Salary	1,350,880	1,490,875	139,995
Fringe	1,417,939	1,606,288	188,349
Wages	30,000	30,000	-
Vacancy Savings	(96,983)	-	96,983
Operating	1,592,954	1,646,744	53,790
Total Expenditures	7,375,263	8,117,487	742,224

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	2,194,249.80	731,416.60	2,925,666.40
Prof on Leave (if not obligated)			-
Classified (and Technologist)	1,067,451.51	355,817.17	1,423,268.68
Class/Tech on Leave (if not obligated)			-
Fringe	1,677,510.05	559,170.02	2,236,680.07
Obligated Health Insurance			-
Wages	4,873.00	1,624.33	6,497.33
LOAs	12,220.22	4,073.41	16,293.63
GAs and TAs	11,431.00	5,250.00	16,681.00
Med Residents	-	-	-
Subtotal: Personnel Costs	4,967,735.58	1,657,351.53	6,625,087.11

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	169,869.71	84,934.86	254,804.57
Ad hoc/Reclassified Positions	-	-	-
LOAs	17,093.22	5,697.74	22,790.96
GAs	11,431.00	5,250.00	16,681.00
Overtime	-	-	-
Terminal/Retirement Payouts	-	-	-
Other Addt'l Payroll Adjust	46,646.96	8,013.00	54,659.96
Fringe on Excluded Expenses	89,075.96	43,883.81	132,959.77
Subtotal: Excluded Expenses	334,116.85	147,779.40	481,896.25
Total Eligible Personnel Expenses	4,633,618.73	1,509,572.12	6,143,190.85
L01 Approved Personnel Exp			
		Professional	3,080,473
		Classified	1,350,880
		Fringe (Professional)	886,366
		Fringe (Classified)	530,464
		Vacancy Savings	(96,983)
		Subtotal	5,751,200
Salary Adjustment Request			391,990.85

Available Salary Adjustment Funds 255,852

Requested Salary Adjustment Funds **255,852**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **CSN**
Budget Account: **3011**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	78,034,192	78,034,192	-
GF Appropriations	-	19,343	19,343
GF Appropriations	-	19,508,548	19,508,548
GF Appropriations	-	248,264	248,264
Salary Adjustment Funds	-	5,141,787	5,141,787
Non GF Revenue	47,719,732	47,719,732	-
Total Revenue	125,753,924	150,671,866	24,917,942

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	66,945,436	73,878,129	6,932,693
Teaching Assistants	-	-	-
Classified Salary	15,622,780	16,523,350	900,570
Fringe	25,801,936	27,895,593	2,093,657
Wages	1,656,747	1,677,412	20,665
Vacancy Savings	(1,606,482)	-	1,606,482
Operating	17,333,507	30,697,381	13,363,874
Total Expenditures	125,753,924	150,671,866	24,917,942

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	$44,821,332.63	$14,481,395.28	59,302,727.91
Prof on Leave (if not obligated)	-	651,883.97	651,883.97
Classified (and Technologist)	$12,022,768.72	$3,400,513.90	15,423,282.62
Class/Tech on Leave (if not obligated)	-	441,520.10	441,520.10
Fringe	$19,604,887.21	$3,923,336.40	23,528,223.61
Obligated Health Insurance	-	2,410,554.92	2,410,554.92
Wages	$936,479.59	$742,768.14	1,679,247.73
LOAs	$7,261,802.02	$4,244,073.79	11,505,875.81
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	84,647,270.17	30,296,046.50	114,943,316.67

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	350,437.26	115,526.10	465,963.36
Ad hoc/Reclassified Positions	14,082.30	5,580.81	19,663.11
LOAs and Wages	$8,198,281.61	$4,986,841.93	$13,185,123.54
GAs	-	-	-
Overtime	335,894.50	-	335,894.50
Terminal/Retirement Payouts	328,537.21	-	328,537.21
Other Addt'l Payroll Adjust	318,234.83	26,323.92	344,558.75
Fringe on Excluded Expenses	363,650.21	187,292.37	550,942.58
Subtotal: Excluded Expenses	9,909,117.92	5,321,565.13	15,230,683.05
Total Eligible Personnel Expenses	74,738,152.25	24,974,481.37	99,712,633.62
L01 Approved Personnel Exp			
		Professional	56,331,105
		Classified	15,622,780
		Fringe (Professional)	18,376,233
		Fringe (Classified)	7,075,136
		Vacancy Savings	(1,606,482)
		Subtotal	95,798,772
Salary Adjustment Request			3,913,862

Available Salary Adjustment Funds 4,113,430

Requested Salary Adjustment Funds	**3,913,862**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV SOM**
Budget Account: **3014**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	30,194,988	30,194,988	-
Salary Adjustment Funds	-	1,106,081	1,106,081
Non GF Revenue	2,790,000	2,790,000	-
Total Revenue	32,984,988	34,091,069	1,106,081

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	14,762,423	17,264,778	2,502,355
Resident Physicians	-	-	-
Graduate Assistant	-	61,000	61,000
Classified Salary	938,141	1,428,584	490,443
Fringe	3,942,782	4,631,472	688,690
Wages	41,250	230,340	189,090
Vacancy Savings	(233,675)	-	233,675
Operating	13,534,067	10,474,895	(3,059,172)
Total Expenditures	32,984,988	34,091,069	1,106,081

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	14,181,356.87	3,393,136.66	17,574,493.53
Prof on Leave (if not obligated)	-	75,423.62	75,423.62
Classified (and Technologist)	1,083,666.18	257,222.20	1,340,888.38
Class/Tech on Leave (if not obligated)	-	37,711.81	37,711.81
Fringe	3,436,652.32	687,080.43	4,123,732.75
Obligated Health Insurance		270,957.90	270,957.90
Wages	98,259.76	17,842.70	116,102.46
LOAs	819,685.76	192,338.74	1,012,024.50
Postdcotoral	30,333.38	-	30,333.38
GAs and TAs	25,925.00	6,100.00	32,025.00
Med Residents	18,919.69	-	18,919.69
Subtotal: Personnel Costs	19,694,798.96	4,937,814.06	24,632,613.02

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	1,311,634.10	237,704.03	1,549,338.13
Ad hoc/Reclassified Positions	94,586.64	-	94,586.64
LOAs	819,685.76	192,338.74	1,012,024.50
GAs	25,925.00	6,100.00	32,025.00
Wages	98,259.76	17,842.70	116,102.46
Postdcotoral	30,333.38	-	30,333.38
Med Residents	18,919.69	-	18,919.69
Overtime	11,828.85	-	11,828.85
Terminal/Retirement Payouts	87,076.36	-	87,076.36
Other Addt'l Payroll Adjust	814,277.08	160,470.36	974,747.44
Fringe on Excluded Expenses	47,070.95	29,670.97	76,741.92
Subtotal: Excluded Expenses	3,359,597.57	644,126.80	4,003,724.37
Total Eligible Personnel Expenses	16,335,201.39	4,293,687.26	20,628,888.65
L01 Approved Personnel Exp			
		Professional	14,762,423
		Classified	938,141
		Fringe (Professional)	3,531,578
		Fringe (Classified)	410,585
		Vacancy Savings	(233,675)
		Subtotal	19,409,052
Salary Adjustment Request			1,219,837

Available Salary Adjustment Funds	884,865
Requested Salary Adjustment Funds	**884,865**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **WNC**
Budget Account: **3012**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	11,209,907	11,209,907	-
GF Appropriations	-	2,521	2,521
GF Appropriations	-	2,802,477	2,802,477
Salary Adjustment Funds	-	671,580	671,580
Non GF Revenue	5,052,751	4,902,751	(150,000)
Total Revenue	16,262,658	19,589,236	3,326,578

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	8,566,224	10,255,498	1,689,274
Teaching Assistants	96,154	-	(96,154)
Classified Salary	2,005,081	2,120,581	115,500
Fringe	3,505,946	3,999,306	493,360
Wages	410,275	348,115	(62,160)
Vacancy Savings	(221,181)	-	221,181
Operating	1,900,159	2,865,736	965,577
Total Expenditures	16,262,658	19,589,236	3,326,578

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	$5,992,563.94	1,997,521.31	7,990,085.25
Prof on Leave (if not obligated)	-	18,980.07	18,980.07
Classified (and Technologist)	$1,487,729.09	495,909.70	$1,983,638.79
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	$1,709,569.88	569,856.63	2,279,426.51
Obligated Health Insurance	$955,378.07	318,459.36	1,273,837.43
Wages	$215,285.28	71,761.76	287,047.04
LOAs	$1,800,190.90	600,063.63	2,400,254.53
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	$12,160,717.16	4,072,552.46	16,233,269.62

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	250,315.22	80,690.25	331,005.47
Ad hoc/Reclassified Positions	-	-	15,568.39
LOAs	$2,015,476.18	671,825.39	$2,687,301.57
GAs	-	-	-
Overtime	26,170.12	-	26,170.12
Terminal/Retirement Payouts	92,236.49	-	92,236.49
Other Addt'l Payroll Adjust	10,114.83	-	10,114.83
Fringe on Excluded Expenses	82,701.07	24,789.05	107,490.12
Subtotal: Excluded Expenses	2,477,013.91	777,304.69	3,269,886.99
Total Eligible Personnel Expenses	9,683,703.25	3,295,247.77	12,963,382.62
L01 Approved Personnel Exp			
		Professional	7,268,012
		Classified	2,005,081
		Fringe (Professional)	2,485,952
		Fringe (Classified)	940,120
		Vacancy Savings	(221,181)
		Subtotal	12,477,984
Salary Adjustment Request			485,399

Available Salary Adjustment Funds 537,264

Requested Salary Adjustment Funds **485,399**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **TMCC**
Budget Account: **3018**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	27,919,169	27,919,169	-
GF Appropriations		6,829	6,829
GF Appropriations		6,979,792	6,979,792
Salary Adjustment Funds	-	2,132,078	2,132,078
Non GF Revenue	14,261,887	14,261,887	-
Total Revenue	42,181,056	51,299,755	9,118,699

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	24,287,339	26,998,139	2,710,800
Teaching Assistants	160,000	-	(160,000)
Classified Salary	5,917,713	5,959,224	41,511
Fringe	9,374,940	9,890,632	515,692
Wages	544,519	661,365	116,846
Vacancy Savings	(600,250)	-	600,250
Operating	2,496,795	7,790,395	5,293,600
Total Expenditures	42,181,056	51,299,755	9,118,699

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	16,873,277.00	5,277,738.93	22,151,015.93
Prof on Leave (if not obligated)	-	266,423.13	266,423.13
Classified (and Technologist)	4,501,809.09	1,374,010.42	5,875,819.51
Class/Tech on Leave (if not obligated)	-	36,870.97	36,870.97
Fringe	4,753,291.10	1,737,335.77	6,490,626.87
Obligated Health Insurance	2,846,881.18	975,475.00	3,822,356.18
Wages	366,915.89	93,300.00	460,215.89
LOAs	3,354,942.97	1,832,367.16	5,187,310.13
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	32,697,117.23	11,593,521.38	44,290,638.61

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	260,832.00	140,077.00	400,909.00
Moved to State	$1,323,048.00	441,016.00	1,764,064.00
Ad hoc/Reclassified Positions	247,273.23	7,902.32	255,175.55
LOAs	3,354,942.97	1,832,367.16	5,187,310.13
GAs	-	-	-
Overtime	103,242.36	2,562.50	105,804.86
Terminal/Retirement Payouts	47,614.57	-	47,614.57
Other Addt'l Payroll Adjust	118,484.93	18,386.22	136,871.15
Fringe on Excluded Expenses	981,098.97	294,995.33	1,276,094.30
Subtotal: Excluded Expenses	6,436,537.03	2,737,306.53	9,173,843.56
Total Eligible Personnel Expenses	26,260,580.20	8,856,214.85	35,116,795.05
L01 Approved Personnel Exp			
		Professional	19,627,101
		Classified	5,917,713
		Fringe (Professional)	6,392,902
		Fringe (Classified)	2,833,273
		Vacancy Savings	(600,250)
		Subtotal	34,170,739
Salary Adjustment Request			946,056

Available Salary Adjustment Funds 1,705,662

Requested Salary Adjustment Funds	**946,056**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **HEALTH LAB**
Budget Account: **3221**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	1,698,181	1,698,181	-
Salary Adjustment Funds	-	76,787	76,787
Non GF Revenue	-	-	-
Total Revenue	1,698,181	1,774,968	76,787

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	266,950	270,777	3,827
LOA/Grad Assistant	-	-	
Classified Salary	794,900	807,637	12,737
Fringe	393,679	416,199	22,520
Wages	-	-	-
Vacancy Savings	-	-	-
Operating	242,652	280,355	37,703
Total Expenditures	1,698,181	1,774,968	76,787

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	259,483.31	104,002.77	363,486.08
Prof on Leave (if not obligated)			
Classified (and Technologist)	559,028.71	195,930.30	754,959.01
Class/Tech on Leave (if not obligated)			
Fringe	303,186.34	112,764.02	415,950.36
Obligated Health Insurance			
Wages	-	-	
LOAs	-	-	
GAs and TAs	-	-	
Med Residents	-	-	
Subtotal: Personnel Costs	1,121,698.36	412,697.09	1,534,395.45

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	-	-	-
LOAs	-	-	-
GAs			
Overtime	2,285.66	-	2,285.66
Terminal/Retirement Payouts	29,880.58	-	29,880.58
Other Addt'l Payroll Adjust	14,495.18	-	14,495.18
Fringe on Excluded Expenses	-	-	-
Subtotal: Excluded Expenses	46,661.42	-	46,661.42
Total Eligible Personnel Expenses	1,075,036.94	412,697.09	1,487,734.03
L01 Approved Personnel Exp			
		Professional	266,950
		Classified	794,900
		Fringe (Professional)	68,540
		Fringe (Classified)	325,139
		Vacancy Savings	-
		Subtotal	1,455,529
Salary Adjustment Request			32,205

Available Salary Adjustment Funds	61,430
less increase in Operating in BOR approved budget	37,703
Adjusted Salary Adjustment Funds	23,727

Requested Salary Adjustment Funds	**23,727**

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNR MED**
Budget Account: **2,982**

Phase 1: Eligibility Determination
- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if $ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	36,008,436	36,008,436	0
Salary Adjustment Funds	0	1,238,182	1,238,182
Non GF Revenue	6,879,919	6,879,919	0
Total Revenue	42,888,355	44,126,537	1,238,182

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	14,449,239	18,814,808	4,365,569
Resident Physicians	0	254,643	254,643
Graduate Assistant	84,800	66,100	-18,700
Classified Salary	3,553,541	3,494,399	-59,142
Fringe	5,001,578	6,066,390	1,064,812
Wages	107,289	278,277	170,988
Vacancy Savings	-408,257	0	408,257
Operating	20,100,165	15,151,920	-4,948,245
Total Expenditures	42,888,355	44,126,537	1,238,182

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - March '19	Projected (through FYE)	Total
Professional	12,236,683	4,659,942	16,896,625
Prof on Leave (if not obligated)	0	0	0
Classified (and Technologist)	2,526,776	936,195	3,462,971
Class/Tech on Leave (if not obligated)	0	0	0
Fringe	4,357,704	1,666,135	6,023,839
Obligated Health Insurance	0	0	0
Wages	146,538	44,696	191,234
LOAs	935,767	270,651	1,206,418
GAs and TAs	87,548	43,545	131,093
Med Residents	208,375	64,782	273,156
Subtotal: Personnel Costs	20,499,392	7,685,945	28,185,336

Excluded Personnel Expenses	Actual July 2018 - Feb 2019	Projected (through FYE)	Total
New FTE (not in L01)	0	0	0
Ad hoc/Reclassified Positions	0	0	0
LOAs	1,082,305	315,347	1,397,652
GAs	87,548	43,545	131,093
Overtime	27,531	0	27,531
Terminal/Retirement Payouts	87,552	0	87,552
Other Addt'l Payroll Adjust	95,587	0	95,587
Fringe on Excluded Expenses	23,945	0	23,945
Subtotal: Excluded Expenses	1,404,468	358,892	1,763,360
Total Eligible Personnel Expenses	19,094,924	7,327,053	26,421,977
L01 Approved Personnel Exp			23,004,358
Salary Adjustment Request			3,417,619

Actual Request	1,238,182
Requested Salary Adjustment Funds	**1,238,182**

LEASES
SUMMARY

BOE #	LESSEE			LESSOR	AMOUNT
1.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIRECTOR'S OFFICE – IDEA PART C OFFICE			SIERRA MEDICAL COMPLEX, LP	$137,448
		This relocation lease is to better accommodate the agency and will include improvements.			
		Term of Lease:	**07/01/2019 – 06/30/2024**	**Located in Carson City**	
2.	NEVADA GAMING CONTROL BOARD			KNOLL, WALTER & BARBARA	$128,783
		This is an extension to an existing lease.			
		Term of Lease:	**07/01/2019 – 06/30/2024**	**Located in Laughlin**	
3.	NEVADA GAMING CONTROL BOARD			MARCIA SCHOFIELD TRUST	$4,647,312
		This is an extension to an existing lease.			
		Term of Lease:	**08/01/2019 – 07/31/2026**	**Located in Carson City**	
4.	NEVADA STATE BOARD OF ORIENTAL MEDICINE			BATTLEBORN LAW, LLC	$12,000
		This is an extension to an existing lease.			
		Term of Lease:	**08/01/2019 – 07/31/2021**	**Located in Las Vegas**	

For Budget Division Use Only	
Reviewed by:	6/3/19
Reviewed by:	
Reviewed by:	

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

STATEWIDE LEASE INFORMATION

1. Agency:

Department of Health and Human Services
Director's Office
IDEA Part C Office
4126 Technology Way, Second Floor
Carson City, Nevada 89706
Debbie Ohl
T: 775.684.5915 F: 775.687.0599 E: dlohl@health.nv.gov

Remarks: Leasing Services negotiated this relocation to better accommodate the agency, which created a savings of $12,686.84 over the term.

Exceptions/Special notes: Improvements to include: paint and replace carpet in suite 101-105

2. Name of Lessor: Sierra Medical Complex, LP

3. Address of Lessor:

c/o Coldwell Banker Select
123 West 2nd Street
Carson City, Nevada 89701

4. Property contact:

Teri Preston
T: 775.881-7972 F: 775.737.7698 E: Theresa.Preston@cbselectre.com

5. Address of Lease property:

1000 East William Street, Suites 101-105 and 104
Carson City, Nevada 89701

a. Square Footage: ☐ Rentable ☑ Usable 1,604

b. Cost:

Increase %	cost per month	# of months in time frame	cost per year	time frame	**Actual** cost per square foot
	$ 2,245.60	12	$26,947.20	July 1, 2019 - June 30, 2020	$1.40
0.0%	$ 2,245.60	12	$26,947.20	July 1, 2020 - June 30, 2021	$1.40
2.5%	$ 2,301.74	12	$27,620.88	July 1, 2021 - June 30, 2022	$1.44
0.0%	$ 2,301.74	12	$27,620.88	July 1, 2022 - June 30, 2023	$1.44
2.5%	$ 2,359.28	12	$28,311.40	July 1, 2023 - June 30, 2024	$1.47
c. Total Lease Consideration:		60	$137,447.56		

d. Option to renew: ☑ Yes ☐ No 90 Renewal terms: One Identical Term
e. Holdover notice: # of Days required 30 Holdover terms: 5%/90
f. Term: Five (5) Years
g. Pass-thrus/CAM/Taxes ☑ Landlord ☐ Tenant
h. Utilities: ☑ Landlord ☐ Tenant
i. Janitorial: ☑ Landlord ☐ Tenant ☐ 3 day ☐ 5 day ☑ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)
j. Repairs: Major: ☑ Landlord ☐ Tenant Minor: ☑ Landlord ☐ Tenant
k. Comparable Market Rate: $1.66 - $2.07 - Carson City Area
l. Specific termination clause in lease: Breach/Default lack of funding
m. Lease will be paid for by Agency Budget Account Number: 3276

6. Purpose of the lease: To house the IDEA Part C 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 Expenses: Moving: $TBD Furnishings: $TBD Data/Phones: $TBD

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BUDGET DIVISION

STATEWIDE LEASE INFORMATION

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

Yes_____ No X Dec Unit _____

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

C469416 - pending June IFC approval

Authorized Agency Signature — Date 5-27-19

For Public Works Information:

8. State of Nevada Business License Information:

a.	Nevada Business ID Number: NV19871012250	Exp: 10/31/2019	
b.	The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC ☐ INC ☐ CORP ☐ LP ☑	
c.	Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section	☐YES	☑NO
d.	Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section	☑YES	☐NO
e.	Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section	☑YES	☐NO
f.	Is the Legal Entity active and in good standing with the Nevada Secretary of States	☑YES	☐NO
g.	State of Nevada Vendor number: T81090393		
h.	Is this an Arms Length Transaction	☑YES	☐NO

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

a.	I/we have considered the reasonableness of the terms of this lease, including cost	☑YES ☐NO
b.	I/we have considered other state leased or owned space available for use by this agency	☑YES ☐NO

Authorized Signature — Date 5/29/19

Public Works Division

For Board of Examiners ☑YES ☐NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency: Gaming Control Board
1919 East College Parkway
Carson City, Nevada 89706
Mary Ashley
775.684.7701 fax 775.687.5817 mashley@gcb.nv.gov

Remarks: This is a renewal of an existing lease.

Exceptions/Special notes:

2. Name of Lessor: Knoll, Walter & Barbara
3. Address of Lessor: PO Box 110546
Campbell, California 95011
4. Property contact: The Laughlin Professional Plaza
3650 South Pointe Circle
Laughlin, Nevada 89029
Karen Maupin, Project Manager (on site)
702.298.2411 fax 702.298.4309 emergency 702.298.4633 karen@laughlinplaza.com
5. Address of Lease property: 3650 South Pointe Circle, Suite 203
Laughlin, Nevada 89029

a. Square Footage: ☐ Rentable ☑ Usable 1,293

b. Cost:

Increase %	cost per month	# of months in time frame	cost per year	time frame	**Actual** cost per square foot
	$ 2,107.59	12	$25,291.08	July 1, 2019 - June 30, 2020	$1.63
0%	$ 2,107.59	12	$25,291.08	July 1, 2020 - June 30, 2021	$1.63
2%	$ 2,159.31	12	$25,911.72	July 1, 2021 - June 30, 2022	$1.67
0%	$ 2,159.31	12	$25,911.72	July 1, 2022 - June 30, 2023	$1.67
2%	$ 2,198.10	12	$26,377.20	July 1, 2023 - June 30, 2024	$1.70
c. Total Lease Consideration:		60	$128,782.80		

d. Option to renew: ☑ Yes ☐ No 90 Renewal terms: One identical term
e. Holdover notice: # of Days required 30 Holdover terms: 5%/90
f. Term: Five (5) Years
g. Pass-thrus/CAM/Taxes ☑ Landlord ☐ Tenant
h. Utilities: ☑ Landlord ☐ Tenant
i. Janitorial: ☑ Landlord ☐ Tenant ☐ 3 day ☐ 5 day ☐ Rural 3 day ☑ Rural 5 day ☐ Other (see special notes)
j. Repairs: Major: ☑ Landlord ☐ Tenant Minor: ☑ Landlord ☐ Tenant
k. Comparable Market Rate: Not Available - Rural Area
l. Specific termination clause in lease: Breach/Default lack of funding
m. Lease will be paid for by Agency Budget Account Number: 4061

6. Purpose of the lease: To house the State Gaming Control Board, Enforcement Division
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 Expenses: Moving: $0.00 Furnishings: $0.00 Data/Phones: $0.00

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JUN 6 2019
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.
Yes_____ No _____ Dec Unit _____

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

6.6.19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a.	Nevada Business ID Number: NV20101445094	Exp: 7/31/2019		5
b.	The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC ☐ INC ☐ CORP ☐ LP ☐		
c.	Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section	☐YES	☑NO	
d.	Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section	☑YES	☐NO	
e.	Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section	☑YES	☐NO	
f.	Is the Legal Entity active and in good standing with the Nevada Secretary of States	☑YES	☐NO	
g.	State of Nevada Vendor number: T29005798			
h.	Is this an Arms Length Transaction	☑YES	☐NO	

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

a.	I/we have considered the reasonableness of the terms of this lease, including cost	☑YES	☐NO
b.	I/we have considered other state leased or owned space available for use by this agency	☑YES	☐NO

6/6/19
Authorized Signature Date
Public Works Division

For Board of Examiners ☑YES ☐NO

AFFIDAVIT OF "ARM'S LENGTH TRANSACTION"

All Parties to the LEASE AGREEMENT dated April 17, 2019, for the Demised Premises located at 3650 South Pointe Circle, Suite 203 Laughlin, Nevada 89029,

Hereby affirm that this is an "Arm's Length Transaction,"

No party to this Lease is a family member, business associate, or share a business interest with the Lessee/Tenant or their agents. Further, there are no hidden terms or special understandings between the Lessor, Lessee/Tenant or their agents.

LESSOR

WALTER H. AND BARBARA J. KNOLL

By _____
Walter H. Knoll
Owner

Date 5/8/2019

By _____
Barbara J. Knoll
Owner

Date 5/8/2019

LESSEE

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

By _____
Ward D. Patrick, PE
Administrator

Date 6/6/19

TENANT

NEVADA STATE GAMING CONTROL BOARD

By _____ for
~~Tony Alamo~~ Sandra D. Morgan
Chairman

Date 6.6.19

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

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

STATEWIDE LEASE INFORMATION

1. Agency: Nevada Gaming Control Board
1919 College Parkway
Carson City, Nevada 89706
Mary Ashley
775.684.7701 Fax: 775.684.5817 mashley@gcb.nv.gov

Remarks: Leasing Services negotiated this renewal to include a 2% reduction in biannual increases and includes tenant improvements.

Exceptions/Special notes: Improvements include: replace 2 couches, add built-in counters with outlets and chairs in lobby; replace existing countertops in the restrooms; replace faded lettering on the exterior sign

2. Name of Lessor: Marcia Schofield Trust
3. Address of Lessor: PO Box 686
Solana Beach, CA 92075
4. Property contact: Sperry Van Ness Commercial Real Estate Advisors
305 North Carson Street, Suite 200
Carson City, Nevada 89701
Dan Shaheen
775.825.3330 x106 Fax: 775.825.8048 dan.shaheen@svn.com
5. Address of Lease property: 1919 College Parkway
Carson City, Nevada 89706

a. Square Footage: ☑ Rentable ☐ Usable 32,000

b. Cost:

Increase %	cost per month	# of months in time frame	cost per year	time frame	**Actual** cost per square foot
	$ 52,567.20	12	$630,806.40	August 1, 2019 - July 31, 2020	$1.64
3%	$ 54,144.22	12	$649,730.64	August 1, 2020 - July 31, 2021	$1.69
0%	$ 54,144.22	12	$649,730.64	August 1, 2021 - July 31, 2022	$1.69
3%	$ 55,768.55	12	$669,222.60	August 1, 2022 - July 31, 2023	$1.74
0%	$ 55,768.55	12	$669,222.60	August 1, 2023 - July 31, 2024	$1.74
3%	$ 57,441.61	12	$689,299.32	August 1, 2024 - July 31, 2025	$1.79
0%	$ 57,441.61	12	$689,299.32	August 1, 2025 - July 31, 2026	$1.79
c. Total Lease Consideration:		84	$4,647,311.52		

d. Option to renew: ☑ Yes ☐ No 90 Renewal terms: One Identical Term
e. Holdover notice: # of Days required 30 Holdover terms: 5%/90
f. Term: Seven (7) Years
g. Pass-thrus/CAM/Taxes ☑ Landlord ☐ Tenant
h. Utilities: ☑ Landlord ☐ Tenant
i. Janitorial: ☑ Landlord ☐ Tenant ☐ 3 day ☑ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)
j. Repairs: Major: ☑ Landlord ☐ Tenant Minor: ☑ Landlord ☐ Tenant
k. Comparable Market Rate: $1.66 - $2.07 - Carson City Area
l. Specific termination clause in lease: Breach/Default lack of funding
m. Lease will be paid for by Agency Budget Account Number: 4061

6. Purpose of the lease: To house the Gaming Control Board
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 Expenses: Moving: $0.00 Furnishings: $0.00 Data/Phones: $0.00

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BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.
Yes_____ No _____ Dec Unit _____

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

Authorized Agency Signature — Date: 6/12/19

For Public Works Information:

8. State of Nevada Business License Information:

a.	Nevada Business ID Number: NV20131195478	Exp: 4/30/2020	110
b.	The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC ☐ INC ☐ CORP ☐ LP ☐	
c.	Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section	☐YES	☑NO
d.	Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section	☑YES	☐NO
e.	Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section	☑YES	☐NO
f.	Is the Legal Entity active and in good standing with the Nevada Secretary of States	☑YES	☐NO
g.	State of Nevada Vendor number: T81074147		
h.	Is this an Arms Length Transaction	☑YES	☐NO

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

a. I/we have considered the reasonableness of the terms of this lease, including cost	☑YES	☐NO
b. I/we have considered other state leased or owned space available for use by this agency	☑YES	☐NO

Authorized Signature — Date: 6/13/19
Public Works Division

//
For Board of Examiners ☑YES ☐NO

For Budget Division Use Only	
Reviewed by:	
Reviewed by:	6/6/19
Reviewed by:	

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

STATEWIDE LEASE INFORMATION

1. Agency: Nevada State Board of Oriental Medicine
3191 East Warm Springs Road
Las Vegas, Nevada 89120
Merle Lok
702.675.5326 Fax: 702.989.8584 omboardexecutivedirector@gmail.com

Remarks: Leasing Services negotiated this renewal for a new term.

Exceptions/Special notes: Lessor to provide janitorial services at their cost per the lease agreement.

2. Name of Lessor: Battleborn Law, LLC
3. Address of Lessor: 3191 East Warm Springs Road
Las Vegas, Nevada 89120
4. Property contact: Lisa Forrester
702.933.4444 Fax: 702.933.4445 lforrester@battlebornlaw.com
5. Address of Lease property: 3191 East Warm Springs Road
Las Vegas, Nevada 89120

a. Square Footage: ☑ Rentable ☐ Usable 250

b. Cost:

	cost per month	# of months in time frame	cost per year	time frame	**Actual** cost per square foot
Increase %	$ 500.00	12	$6,000.00	August 1, 2019 - July 31, 2020	$2.00
0%	$ 500.00	12	$6,000.00	August 1, 2020 - July 31, 2021	$2.00
c. Total Lease Consideration:		24	$12,000.00		

d. Option to renew: ☑ Yes ☐ No 90 Renewal terms: One (1) identical term
e. Holdover notice: # of Days required 30 Holdover terms: 5% / 90
f. Term: Two (2) years
g. Pass-thrus/CAM/Taxes ☑ Landlord ☐ Tenant
h. Utilities: ☑ Landlord ☐ Tenant
i. Janitorial: ☑ Landlord ☐ Tenant ☐ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☑ Other (see special notes)
j. Repairs: Major: ☑ Landlord ☐ Teriant Minor: ☑ Landlord ☐ Tenant
k. Comparable Market Rate: $1.84 - $2.42 - Las Vegas / Henderson Area
l. Specific termination clause in lease: Breach/Default lack of funding
m. Lease will be paid for by Agency Budget Account Number: B021

6. Purpose of the lease: To house the Board of Oriental Medicine
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 Expenses: Moving: $0.00 Furnishings: $0.00 Data/Phones: $0.00

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BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.
Yes_____ No _____ Dec Unit _____

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

Authorized Agency Signature — Date 5/30/19

For Public Works Information:

8. State of Nevada Business License Information:

a.	Nevada Business ID Number: NV20031070022	Exp: 5/31/2019			
b.	The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC ☑	INC ☐	CORP ☐	LP ☐
c.	Is the Contractor Exempt from obtaining a Business License: *If yes, please explain in exceptions section	☐ YES		☑ NO	
d.	Is the Contractors Name the same as the Legal Entity Name? *If no, please explain in exceptions section	☑ YES		☐ NO	
e.	Does the Contractor have a current Nevada State Business License (SBL)? *If no, please explain in exceptions section	☑ YES		☐ NO	
f.	Is the Legal Entity active and in good standing with the Nevada Secretary of States	☐ YES		☐ NO	
g.	State of Nevada Vendor number: N/A - Board Paid				
h.	Is this an Arms Length Transaction	☑ YES		☐ NO	

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

a. I/we have considered the reasonableness of the terms of this lease, including cost	☑ YES	☐ NO
b. I/we have considered other state leased or owned space available for use by this agency	☑ YES	☐ NO

Authorized Signature — Date 6/4/19
Public Works Division
PS
For Board of Examiners ☑ YES ☐ NO

AFFIDAVIT OF "ARM'S LENGTH TRANSACTION"

All Parties to the LEASE AGREEMENT dated April 15, 2019, for the Demised Premises located at 3191 East Warm Springs Road, Las Vegas, Nevada 89120,

Hereby affirm that this is an "Arm's Length Transaction,"

No party to this Lease is a family member, business associate, or share a business interest with the Lessee/Tenant or their agents. Further, there are no hidden terms or special understandings between the Lessor, Lessee/Tenant or their agents.

LESSOR

BATTLEBORN LAW, LLC

By _____
Michelle L. Allison
Manager

Date 5/2/19

LESSEE

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

By _____
Ward D. Patrick, PE
Administrator

Date 6/4/19

TENANT

NEVADA STATE BOARD OF
ORIENTAL MEDICINE

By _____
Merle Lok
Executive Director

Date 5/28/19

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	BROWN AND CALDWELL	BONDS	$106,055	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Wells Conservation Camp - Wastewater Treatment Facilities Upgrade CIP Project No. 17-M18; SPWD Contract No. 112074. This amendment increases the maximum from $26,400 to $132,455 due to the need for additional design development, construction and bidding services and additional site fees.				
		Term of Contract:	07/31/2018 - 06/30/2022	Contract # 20591		
2.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS-TOURISM	AVIAREPS JAPAN	OTHER: LODGING TAX	$800,000	
	Contract Description:	This is a new contract to provide ongoing international representation in Japan and South Korea to promote tourism in Nevada. The services will include market briefing, media relations, development and maintenance of a foreign website, sales missions, organizing familiarization tours, media planning and buying, marketing and promotions development and quarterly progress reports covering activities, media value and accomplishments.				
		Term of Contract:	07/10/2019 - 06/30/2023	Contract # 21948		
3.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - COMPUTER FACILITY	AMERICAN CHILLER SERVICE, INCORPORATED	FEE: USER	$50,000	
	Contract Description:	This is a new contract to provide ongoing repair and maintenance services for the chillers, cooling tower, water pumps and compressors at the computer facility in Carson City.				
		Term of Contract:	Upon Approval - 07/31/2021	Contract # 22000		
4.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	CHURCHILL COUNTY LIBRARY	OTHER: REVENUE	$110,000	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21708		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	HUMBOLDT COUNTY LIBRARY	OTHER: REVENUE	$108,000	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21709		
6.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY – INTER-GOVERNMENTAL TRANSFER PROGRAM	ELKO COUNTY SCHOOL DISTRICT	OTHER: REVENUE	$1,540,000	
	Contract Description:	This is a new revenue interlocal agreement to provide receipt of the non-federal share for school-based Medicaid services, medical screening and diagnostics for children who are Nevada Medicaid/Check Up eligible.				
		Term of Contract:	02/01/2019 - 06/30/2022	Contract # 21876		
7.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	WASHOE COUNTY JUVENILE SERVICES	FEDERAL	$112,000	
	Contract Description:	This is a new interlocal agreement to provide ongoing Title XIX and Title XXI federal funding for Targeted Case Management (TCM) and Administrative service cost recovery. Washoe County Juvenile Services provides TCM services to eligible recipients in accordance with the Medicaid State Plan and the Medicaid Services Manual.				
		Term of Contract:	10/01/2018 - 09/30/2022	Contract # 21655		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
8.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES	CENTURY GLASS, INC.	GENERAL	$66,476	
	Contract Description:	This is a new contract to provide replacement of identified glass doors and windows at the administration building located in Reno.				
		Term of Contract:	05/08/2019 - 08/31/2019	Contract # 21965		
9.	440	DEPARTMENT OF CORRECTIONS - PRISON DAIRY	NEVADA ORGANICS, LLC	REVENUE	$51,000	Exempt
	Contract Description:	This is the first amendment to the original revenue contract which provides reimbursement for the cost to utilize offender labor, provide occupational training for offenders and use land at Silver State Industries Prison Ranch for the purpose of compost operations. This amendment increases the maximum amount from $208,992 to $259,992 due to additional Quonset Hut lease income.				
		Term of Contract:	03/13/2018 - 02/12/2022	Contract # 17760		
10.	500	DIVISION OF MINERAL RESOURCES	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, RENO	FEE: MINING CLAIM	$180,000	
	Contract Description:	This is a new interlocal agreement to provide ongoing publication of annual mineral industry reports and for the curation and associated database management of oil, gas and geothermal drill cuttings.				
		Term of Contract:	Upon Approval - 06/30/2021	Contract # 22017		
11.	611	GAMING CONTROL BOARD - FEDERAL FORFEITURE TREASURY-NON-EXEC	WASHOE COUNTY REGIONAL PUBLIC SAFETY TRAINING CENTER EXECUTIVE BOARD	FEDERAL	$82,250	
	Contract Description:	This is a new interlocal agreement to allow regular access to and use of the Washoe County Regional Public Safety Training Center including the firearms ranges and enhanced training venues.				
		Term of Contract:	Upon Approval - 07/09/2029	Contract # 22016		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
12.	654	DEPARTMENT OF PUBLIC SAFETY - DIVISION OF EMERGENCY MANAGEMENT	WISE OAK CONSULTING, LLC	FEDERAL	$217,048	
	Contract Description:	This is a new contract to provide project management support and outreach services related to the Threat and Hazard Identification and Risk Assessment and Stakeholder Preparedness Review reports for the State and Las Vegas Urban Area Security Initiative authorities.				
		Term of Contract:	Upon Approval - 07/31/2023	Contract # 21992		
13.	702	DEPARTMENT OF WILDLIFE - HABITAT	SOUTHERN NYE COUNTY CONSERVATION DISTRICT	FEE: HABITAT CONSERVATION	$45,000	
	Contract Description:	This is the first amendment to the original interlocal agreement which provides tamarisk control through cutting and spraying, replanting of native vegetation, pond maintenance, restoration of hydrologic flows and fence maintenance and installation in Oasis Valley and Beatty. This amendment increases the maximum amount from $35,000 to $80,000 due to the increased need for these services.				
		Term of Contract:	09/18/2017 - 06/30/2020	Contract # 19192		
14.	705	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES – WATER RESOURCES	GANNETT FLEMING, INC.	GENERAL	$90,000	
	Contract Description:	This is a new contract to provide professional engineering services for the safe management of South Fork Dam.				
		Term of Contract:	Upon Approval - 07/01/2023	Contract # 22013		
15.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - WILDLAND FIRE PREVENTION PROGRAM	HUMBOLDT COUNTY	OTHER: REVENUE	$150,000	
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing services under the Wildland Fire Protection Program.				
		Term of Contract:	07/01/2019 - 06/30/2020	Contract # 22051		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
16.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - STATE REVOLVING FUND ADMINISTRATION	HILLTOP SECURITIES, INC.	FEE: LOAN ORIGINATION 50% FEDERAL 50%	$250,000	
	Contract Description:	This is a new contract to provide ongoing financial advisement/management services to assist in structuring bonds in the best interest of the programs, assist staff in forecasting and advice on financial movements that occur in the markets.				
		Term of Contract:	Upon Approval - 06/30/2023	Contract # 21952		
17.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - WATER QUALITY PLANNING	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, RENO	FEDERAL	$150,000	Exempt
	Contract Description:	This is a new interlocal agreement that continues the ongoing analysis of water, sediment and biota samples to characterize the chemical, physical and biological condition of surface waters in support of the agency's statewide surface water quality monitoring program.				
		Term of Contract:	Upon Approval - 06/30/2020	Contract # 22021		
18.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION – SAFE DRINKING WATER PROGRAM	SOUTHERN NEVADA HEALTH DISTRICT	FEDERAL	$250,000	
	Contract Description:	This is a new interlocal agreement that continues ongoing assistance in applying Nevada laws governing public water systems.				
		Term of Contract:	Upon Approval - 06/30/2021	Contract # 21647		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	709	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION – SAFE DRINKING WATER PROGRAM	WASHOE COUNTY HEALTH DISTRICT	FEDERAL	$250,000	Exempt
	Contract Description:	This is a new interlocal agreement that continues ongoing assistance in applying Nevada laws governing public water systems.				
		Term of Contract:	Upon Approval - 06/30/2021	Contract # 21641		
20.	800	DEPARTMENT OF TRANSPORTATION - TRANSPORTATION ADMINISTRATION	NORTHERN NEVADA DEVELOPMENT AUTHORITY	HIGHWAY	$189,915	
	Contract Description:	This is a new interlocal agreement to provide an economic freight study evaluating railroad needs across the Tahoe-Reno Industrial Center and Fernley areas. The study will parallel the rail plan update and help with future freight planning for the northern corridor and set the stage for how rail can better serve northern Nevada.				
		Term of Contract:	Upon Approval - 12/31/2019	Contract # 21953		
21.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	CARPENTER SELLERS DEL GATTO	OTHER: BUSINESS ENTERPRISE SET-ASIDE	$90,000	
	Contract Description:	This is a new contract to provide architectural/interior design services for a bakery and retail store located at the City of Las Vegas parking garage B.				
		Term of Contract:	Upon Approval - 06/30/2021	Contract # 21538		
22.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	CLARK COUNTY SCHOOL DISTRICT	FEDERAL	$2,236,593	
	Contract Description:	This is a new interlocal agreement that continues ongoing vocational rehabilitation services to high school students with disabilities through the Job Exploration and Expectation Program.				
		Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21583		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – TRUCKEE MEADOWS COMMUNITY COLLEGE	FEE: DIVORCE FEES FROM NEVADA COUNTIES	$122,268	
	Contract Description:	This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.				
		Term of Contract:	08/01/2019 - 07/31/2023	Contract # 21998		
24.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	COMMUNITY CHEST, INC.	FEE: DIVORCE FEES FROM NEVADA COUNTIES	$111,112	
	Contract Description:	This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.				
		Term of Contract:	08/01/2019 - 07/31/2023	Contract # 21995		
25.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	HELP OF SOUTHERN NEVADA	FEE: DIVORCE FEES FROM NEVADA COUNTIES	$867,604	
	Contract Description:	This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.				
		Term of Contract:	08/01/2019 - 07/31/2023	Contract # 21997		
26.	B001	LICENSING BOARDS AND COMMISSIONS - ACCOUNTANCY	LOUIS LING	FEE: LICENSURE	$70,000	Exempt
	Contract Description:	This is the first amendment to the original contract for legal services. This amendment extends the termination date from August 31, 2019 to August 31, 2022 and increases the maximum amount from $30,000 to $100,000 due to the continued need for these services.				
		Term of Contract:	09/01/2017 - 08/31/2022	Contract # 18971		
27.	B007	LICENSING BOARDS AND COMMISSIONS - DENTAL EXAMINERS	LEE A. DRIZIN, CHTD.	FEE: LICENSURE	$70,000	
	Contract Description:	This is a new contract for continued legal services, including district court litigation and appellate court representation.				
		Term of Contract:	07/01/2019 - 06/30/2020	Contract # 21999		

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **20591**

Amendment Number: **1**

Legal Entity Name: Brown and Caldwell

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

Contractor Name: **Brown and Caldwell**

Agency Code: **082**

Address: **3264 GONI ROAD, STE. 153**

Appropriation Unit: **1550-58**

Is budget authority available?: **Yes**

City/State/Zip **CARSON CITY, NV 89706**

If "No" please explain: Not Applicable

Contact/Phone: 775-883-4118

Vendor No.: t32005501

NV Business ID: NV19831007512

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

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

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

Agency Reference #: 112074

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/31/2018**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2022**

Contract term: **3 years and 335 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Wells Conservation Camp - Wastewater Treatment Facilities Upgrade CIP Project No. 17-M18; SPWD Contract No. 112074. This amendment increases the maximum from $26,400 to $132,455 due to the need for additional design development, construction and bidding services and additional site fees.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$26,400.00	$26,400.00	$26,400.00	Yes - Info
2.	Amount of current amendment (#1):	$106,055.00	$106,055.00	$132,455.00	Yes - Action
3.	New maximum contract amount:	$132,455.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 LEG. APPROVED CIP

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

Professional Architectural/Engineering 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. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

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

   Demonstrated the required expertise for work on this project.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

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

    Foreign Corporation

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

    Yes

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

    Yes

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/28/2019 14:12:42 PM
Division Approval	lmars1	05/28/2019 14:12:46 PM
Department Approval	lmars1	05/28/2019 14:12:50 PM
Contract Manager Approval	lmars1	05/28/2019 14:12:54 PM
Budget Analyst Approval	jrodrig9	05/30/2019 23:37:58 PM
BOE Agenda Approval	jrodrig9	05/30/2019 23:38:02 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21948**

		Legal Entity Name:	AVIAREPS JAPAN
Agency Name:	**DTCA - DIVISION OF TOURISM**	Contractor Name:	**AVIAREPS JAPAN**
Agency Code:	**101**	Address:	**INTERNATIONAL PLACE, 11-16**
Appropriation Unit:	**1522-31**		**YOTSYA SANEICHO, SHINUJUKU-KU**
Is budget authority available?:	**Yes**	City/State/Zip	**TOKYO, JAPAN, 168-008**
If "No" please explain:	Not Applicable	Contact/Phone:	ASHLEY HARVEY 009199100313
		Vendor No.:	F00000102 C
		NV Business ID:	NV20151094369

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

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

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

Agency Reference #: RFP #10TCA-S512-AM

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/10/2019**

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **06/30/2023**

   Contract term: **3 years and 356 days**

4. Type of contract: **Contract**

   Contract description: **Rep Off-Japan/S Kor**

5. Purpose of contract:

   This is a new contract to provide ongoing international representation in Japan and South Korea to promote tourism in Nevada. The services will include market briefing, media relations, development and maintenance of a foreign website, sales missions, organizing familiarization tours, media planning and buying, marketing and promotions development, and quarterly progress reports covering activities, media value and accomplishments.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$800,000.00**

   Other basis for payment: approximately $200,000 per fiscal year

II. JUSTIFICATION

7. What conditions require that this work be done?

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

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

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

9. Were quotes or proposals solicited? Yes

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

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

AVIAREPS MAKETING GARDEN HOLDINGS LTD
TAMS, INC
AVIAREPS JAPAN

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #10TCA-S512, 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: 02/21/2019 Anticipated re-bid date: 11/22/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

PARTNERSHIP

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	05/10/2019 13:45:52 PM
Division Approval	amathies	05/10/2019 13:45:54 PM
Department Approval	amathies	05/10/2019 13:45:56 PM
Contract Manager Approval	amathies	05/10/2019 13:45:58 PM
Budget Analyst Approval	lfree1	05/24/2019 14:52:38 PM
BOE Agenda Approval	lfree1	05/24/2019 14:52:40 PM
BOE Final Approval	Pending	

For Board Use Only
Date: 07/09/2019

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22000**

		Legal Entity Name:	AMERICAN CHILLER SERVICE, INCORPORATED
Agency Name:	**ADMIN - ENTERPRISE IT SERVICES**	Contractor Name:	**AMERICAN CHILLER SERVICE, INCORPORATED**
Agency Code:	**180**	Address:	**5580 Mill Street, Suite 400**
Appropriation Unit:	**1385-07**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89502**
If "No" please explain:	Not Applicable	Contact/Phone:	Ben Barlow 775-322-9900
		Vendor No.:	PUR0005542
		NV Business ID:	NV19921063155

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **07/31/2021**
   Contract term: **2 years and 31 days**

4. Type of contract: **Contract**
   Contract description: **HVAC Services**

5. Purpose of contract:
   This is a new contract to provide ongoing repair and maintenance services for the chillers, cooling tower, water pumps and compressors at the computer facility in Carson City.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$50,000.00**
   Other basis for payment: With an option to amend for FY22 and FY23.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The mainframe computer system, related components, and computer servers will not function without the proper temperature and humidity. The State is responsible for repairs to the computers if damage is caused by the environment in the computer room.

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

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

American Chiller Inc.
Ingersoll Rand/Trane US
Carrier Corp
Johnson Controls

b. Soliciation Waiver: **Not Applicable**

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

Their cost was lower than the other bids.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

American Chiller has contracted with EITS for the past 8 years and the service has been satisfactory.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

John Hannah, Facility Technician Ph: 775-684-4343

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	06/04/2019 13:27:10 PM
Division Approval	ddav12	06/04/2019 13:27:13 PM
Department Approval	ddav12	06/04/2019 13:27:17 PM
Contract Manager Approval	ddav12	06/04/2019 13:27:21 PM
Budget Analyst Approval	cpalme2	06/05/2019 11:37:58 AM
BOE Agenda Approval	nhovden	06/06/2019 13:07:47 PM
BOE Final Approval	Pending	

For Board Use Only
Date: 07/09/2019

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21708**

		Legal Entity Name:	CHURCHILL COUNTY LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**CHURCHILL COUNTY LIBRARY**
Agency Code:	**332**	Address:	**553 S. Maine Street**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Fallon, NV 89406**
If "No" please explain:	Not Applicable	Contact/Phone:	775-423-7581
		Vendor No.:	
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

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

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

Agency Reference #: ASD

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**

   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**

   If "Yes", please explain

   Revenue agreements between the Nevada Library Cooperative and 17 libraries have been created and sent to the participating libraries on April 18, 2019. Several of these contracts must pass through municipal contract approval processes, library boards of trustees, and boards of supervisors meetings for approval before returning to the agency for final approval. This is causing a delay of returning the contracts in order to meet the FY20 timeline for the continuation of these services.

3. Termination Date: **06/30/2023**
   Contract term: **4 years**

4. Type of contract: **Revenue Contract**
   Contract description: **Network of Libraries**

5. Purpose of contract:

   This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$110,000.00**

   Other basis for payment: FY20 $24,500; FY21 $26,500; FY22 $28,500 and FY23 $30,500

II. JUSTIFICATION

7. What conditions require that this work be done?

   NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative (CoOp) through a joint agreement for the improvement of library services and sharing of resources.

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

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No

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

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

   Not Applicable

   b. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    FY99 to present for Nevada State Library and Archives with good service.

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

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

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

    Cynthia O, Director, Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 08:43:18 AM
Division Approval	ssands	06/06/2019 08:43:22 AM
Department Approval	ssands	06/06/2019 08:43:26 AM
Contract Manager Approval	ssands	06/06/2019 08:43:29 AM
Budget Analyst Approval	mtum1	06/11/2019 17:35:04 PM
BOE Agenda Approval	cmurph3	06/12/2019 13:53:38 PM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Deonne Contine
Director

Tod Colegrove
Division Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
NEVADA STATE LIBRARY AND ARCHIVES
100 N. Stewart Street
Carson City, Nevada 89701
(775) 684-3313 * Fax (775) 684-3311 * TDD (775) 687-8338

June 6, 2019

TO: Matt Tuma, Executive Branch Budget Officer
Susan Brown, Director Governor's Finance Office,
Budget Division
State Of Nevada
Carson City, Nevada 89701

FROM: Tod Colegrove, Administrator
Nevada State Library, Archives and Public Records
Department of Administration
State of Nevada
Carson City, Nevada 89701

SUBJECT: Retro Memo for Churchill County Library

Revenue contracts between Nevada Library Cooperative and 17 libraries have been created and sent to the various libraries on April 18, 2019. Several of these contracts must pass through their municipal contract process and their Library Board of Trustee and Board of Supervisors board meetings for approval before returning to us for final BOE approval.

This is causing a delay of returning the contracts in order to meet our timeline of the June 2019 BOE, therefore I am respectfully requesting a reto start date of July 1, 2019 at the BOE on July 9, 2019.

Tod Colegrove, Administrator

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21709**

		Legal Entity Name:	HUMBOLDT COUNTY LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**HUMBOLDT COUNTY LIBRARY**
Agency Code:	**332**	Address:	**85 E 5TH STREET**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**WINNEMUCCA, NV 89445**
If "No" please explain:	Not Applicable	Contact/Phone:	775-623-6388
		Vendor No.:	T40139500M
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

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

General Funds	0.00 %		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 **07/01/2019**

Anticipated BOE meeting date 07/2019

Retroactive? **Yes**

If "Yes", please explain

Revenue agreements between the Nevada Library Cooperative and 17 libraries have been created and sent to the participating libraries on April 18, 2019. Several of these contracts must pass through municipal contract approval processes, library boards of trustees, and boards of supervisors meetings for approval before returning to the agency for final approval. This is causing a delay of returning the contracts in order to meet the FY20 timeline for the continuation of these services.

3. Termination Date: **06/30/2023**

Contract term: **4 years**

4. Type of contract: **Revenue Contract**

Contract description: **Network of Libraries**

5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$108,000.00**

Other basis for payment: FY20 $23,500; FY21 $25,500; FY22 $28,500 and FY23 $30,500

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

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

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

FY99 to present for Nevada State Library and Archives with good service.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cynthia O., Director, Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 08:41:08 AM
Division Approval	ssands	06/06/2019 08:41:10 AM
Department Approval	ssands	06/06/2019 08:41:13 AM
Contract Manager Approval	ssands	06/06/2019 08:41:18 AM
Budget Analyst Approval	mtum1	06/11/2019 17:09:44 PM
BOE Agenda Approval	cmurph3	06/12/2019 13:53:25 PM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Deonne Contine
Director

Tod Colegrove
Division Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
NEVADA STATE LIBRARY AND ARCHIVES
100 N. Stewart Street
Carson City, Nevada 89701
(775) 684-3313 * Fax (775) 684-3311 * TDD (775) 687-8338

June 6, 2019

TO: Matt Tuma, Executive Branch Budget Officer
Susan Brown, Director Governor's Finance Office,
Budget Division
State Of Nevada
Carson City, Nevada 89701

FROM: Tod Colegrove, Administrator
Nevada State Library, Archives and Public Records
Department of Administration
State of Nevada
Carson City, Nevada 89701

SUBJECT: Retro Memo for Humboldt County Library

Revenue contracts between Nevada Library Cooperative and 17 libraries have been created and sent to the various libraries on April 18, 2019. Several of these contracts must pass through their municipal contract process and their Library Board of Trustee and Board of Supervisors board meetings for approval before returning to us for final BOE approval.

This is causing a delay of returning the contracts in order to meet our timeline of the June 2019 BOE, therefore I am respectfully requesting a reto start date of July 1, 2019 at the BOE on July 9, 2019.

Tod Colegrove, Administrator

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21876**

		Legal Entity Name:	Elko County School District
Agency Name:	**DHHS - HEALTH CARE FINANCING & POLICY**	Contractor Name:	**Elko County School District**
Agency Code:	**403**	Address:	**850 Elm Street**
Appropriation Unit:	**3157-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Elko, NV 89801**
If "No" please explain:	Not Applicable	Contact/Phone:	775-738-5196
		Vendor No.:	
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

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

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

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2019**

   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**

   If "Yes", please explain

   The contract requires a retroactive start date to allow the School District to make payment of the state share of school based services to DHCFP and for the State to make payment on behalf of the School District for services rendered.

3. Termination Date: **06/30/2022**

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

4. Type of contract: **Interlocal Agreement**

   Contract description: **School Based Service**

5. Purpose of contract:

   This is a new revenue interlocal agreement to provide receipt of the non-federal share for school- based Medicaid services, medical screening and diagnostics for children who are Nevada Medicaid/Check Up eligible.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$1,540,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

   School Based Child Health Services was established to allow for Medicaid reimbursement for the medical screening and diagnostic services provided by the School District to Nevada Medicaid/Check Up eligible children and medical treatment services provided for Medicaid/Check Up eligible children who have an Individualized Education Program (IEP) and are enrolled in the School Districts Special Education Program.

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

   State agencies do not have the expertise or availability 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. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pcolegro	05/06/2019 08:29:39 AM
Division Approval	vmilazz1	05/06/2019 14:41:53 PM
Department Approval	mwinebar	05/27/2019 12:13:09 PM
Contract Manager Approval	dsisc1	05/30/2019 09:55:18 AM
Budget Analyst Approval	laaron	06/03/2019 11:06:28 AM
BOE Agenda Approval	bwooldri	06/04/2019 10:43:05 AM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director

SUZANNE BIERMAN, JD, MPH
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY
1100 East William Street, Suite 101
Carson City, Nevada 89701
Telephone (775) 684-3676 • Fax (775) 687-3893
http://dhcfp.nv.gov

MEMORANDUM

Date: May 1st, 2019

To: Lynnette Aaron, Executive Branch Officer I

Through: Richard Whitley, Director

From: Vincent Milazzo, DHCFP

Re: Elko County School District

This memorandum requests that the above subject contract be approved for a retroactive start date effective February 1, 2019. The contract requires a retroactive start date to allow Elko County School District to make payment of the State share of school based services to DHCFP by Intergovernmental Transfers (IGT) and for DHCFP to make payment on behalf of the school district for services rendered. This contract was delayed due to negotiations with the county. To prevent a Retro Memo from being required in the future, the School District interlocal contract will be started six months before the start date.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21655**

		Legal Entity Name:	WASHOE, COUNTY OF
Agency Name:	**DHHS - HEALTH CARE FINANCING & POLICY**	Contractor Name:	**WASHOE COUNTY JUVENILE SERVICES**
Agency Code:	**403**	Address:	**PO BOX 11130**
Appropriation Unit:	**3158-24**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89520-0027**
If "No" please explain:	Not Applicable	Contact/Phone:	775-325-7801
		Vendor No.:	T40283400V
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

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

	General Funds	0.00 %	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 **10/01/2018**

Anticipated BOE meeting date 07/2019

Retroactive? **Yes**

If "Yes", please explain

This contract is retroactive because of the delay in the cost reporting and ongoing negotiations with the county and the state that extended longer than anticipated.

3. Termination Date: **09/30/2022**

Contract term: **4 years**

4. Type of contract: **Interlocal Agreement**

Contract description: **TCM /Admin Services**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing Title XIX and Title XXI federal funding for Targeted Case Management (TCM) and Administrative service cost recovery. Washoe County Juvenile Services provides TCM services to eligible recipients in accordance with the Medicaid State Plan and the Medicaid Services Manual.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$112,000.00**

Other basis for payment: FY19: $25,000; FY20: $27,000; FY21: $29,000; FY22: $31,000

II. JUSTIFICATION

7. What conditions require that this work be done?

TCM services are provided per Medicaid State Plan Amendment and the Nevada Medicaid Services Manual.

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

State agencies do not have the staff available to provide these services and this contract benefits Washoe County 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. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Yes, this contractor was engaged under contract previously with DHCFP from October 1, 2014 tp September 30, 2018 with satisfactory performance.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pcolegro	05/14/2019 13:23:07 PM
Division Approval	vmilazz1	05/21/2019 11:11:38 AM
Department Approval	mwinebar	05/27/2019 12:41:33 PM
Contract Manager Approval	dsisc1	05/30/2019 09:51:59 AM
Budget Analyst Approval	laaron	06/03/2019 10:41:34 AM
BOE Agenda Approval	bwooldri	06/04/2019 10:45:54 AM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director

SUZANNE BIERMAN, JD, MPH
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY
1100 East William Street, Suite 101
Carson City, Nevada 89701
Telephone (775) 684-3676 • Fax (775) 687-3893
http://dhcfp.nv.gov

MEMORANDUM

Date: March 21, 2019

To: Bessie Wooldridge, Executive Branch Officer I

Through: Richard Whitley, Director

From: Vincent Milazzo, DHCFP

Re: Washoe County Juvenile Services

This memorandum requests that the above subject contract be approved for a retroactive start date effective October 1, 2018. This contract was delayed due to negotiations with the county and budget reporting for previous quarters to calculate the budget for the above requested contract. To prevent a Retro Memo from being required in the future, the county and the state will continue to work closely to negotiate contracts in a more timely manner.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21965**

		Legal Entity Name:	CENTURY GLASS, INC.
Agency Name:	**DHHS - DIVISION OF CHILD AND FAMILY SERVICES**	Contractor Name:	**CENTURY GLASS, INC.**
Agency Code:	**409**	Address:	**1950 ZINC ST**
Appropriation Unit:	**3281-95**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89502**
If "No" please explain:	Not Applicable	Contact/Phone:	Tina Scarselli 775-786-0766
		Vendor No.:	T29020292
		NV Business ID:	NV20001414722

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/08/2019**

Anticipated BOE meeting date 07/2019

Retroactive? **Yes**

If "Yes", please explain

A retroactive contract is requested in order to provide window and glass door replacement services for the administration building. This was for a previously approved Deferred Maintenance project. A Request for Proposal was issued multiple times with no response. After discussion with both the Purchasing Division and the Governor's Finance Office the Division was authorized to obtain quotes from vendors. The retroactive contract was necessary to complete the contract before the FY closing.

3. Termination Date: **08/31/2019**

Contract term: **115 days**

4. Type of contract: **Contract**

Contract description: **Window, Door Rplcmnt**

5. Purpose of contract:

This is a new contract to provide replacement of identified glass doors and windows at the administration building located in Reno.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$66,476.00**

Other basis for payment: $65,976 entire project; $500 for contingencies

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a deferred maintenance project to replace certain glass doors and windows that are in excess of 30 years old and not energy efficient.

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

This contract includes the purchase and installation of specially cut glass to fit window frames designed in 1977. State employees do not have the expertise to perform this specialized work.

9. Were quotes or proposals solicited? Yes

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

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

Nevada Glasss
Desert Glass
Century Glass
Custom Glass
Capital Glass

b. Soliciation Waiver: **Not Applicable**

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

This vendor best meets the needs of the agency.

d. Last bid date: 04/30/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Imran Hyman, Admin Services Officer 2 Ph: 775-688-1636

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ihyman	05/23/2019 16:56:48 PM
Division Approval	mgalli	05/24/2019 09:53:59 AM
Department Approval	mwinebar	05/29/2019 18:29:03 PM
Contract Manager Approval	sknigge	05/30/2019 09:57:05 AM
Budget Analyst Approval	laaron	05/31/2019 12:43:19 PM
BOE Agenda Approval	bwooldri	06/04/2019 10:28:46 AM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor

STATE OF NEVADA

Richard Whitley
Director
Department of Health and Human Services

Ross Armstrong
Administrator
Division of Child and Family Services

Department of Health and Human Services
Division of Child and Family Services
Northern Nevada Child and Adolescent Services
2655 Enterprise Road
Reno, Nevada 89512
Phone: (775) 688-1600 Fax: (775) 688-1616

MEMORANDUM

TO: Aaron Frantz, Executive Branch Budget Officer I
Department of Administration

THROUGH: Richard Whitley, Director
Department of Health and Human Services

FROM: Mandi Davis, Deputy Administrator
Division of Child and Family Services

DATE: 5/23/2019

SUBJECT: Retroactive Contract – Century Glass Inc. CETS #21965

A retroactive effective date of May 8, 2019 is requested for the Contract between the Division of Child and Family Services (DCFS) and Century Glass, Inc. in order to provide window and glass door replacement services for the administration building at 2655 Enterprise Road in Reno.

The administration building was built in 1977 and deferred maintenance was approved in the current biennium to fund replacement of window and glass doors to increase heating, ventilation, and air conditioning efficiency. The difficulty with finding a vendor to bid on this project resulted in the delay in preparing a contract.

Below is a timeline of events causing delay:

5/22/18 – The 1st Request for Proposals (RFP) was initiated.
10/3/18 – The 1st RFP was released (there was an internal delay).
11/1/18 – The 1st RFP closed but there were no bidders.
The Division worked with the Purchasing Division to simplify the RFP based upon vendor responses.
12/14/18 – The 2nd RFP was issued.
1/4/19 – The 2nd RFP closed and again there were no bidders.
1/23/19 – The Purchasing Division directed the Division to consult State Public Works to identify a vendor.
2/5/19 – State Public Works referred the Division to a general contractor.
3/14/19 – The general contractor provided a quote to the Division for $93,170. The quote exceeded available funding and did not provide a breakdown of costs.

3/20/19 – The Purchasing Division would not allow the Division to just obtain three quotes.
3/25/19 – The Division provided notice of the specific amount available to fund the project to the general contractor and asked for a quote with increased detail.
4/18/19 – The general contractor provided a quote for $65,000 to only complete a portion of the window replacements. This was within available funding. According to the quote, it would take 13 weeks to complete the project (only 10 weeks remained in the fiscal year). The quote did not provide a breakdown of costs.
The Division discussed the situation and timing of both the project time and the contract approval time with the Purchasing Division and Governor's Finance Office. Due to the lack of detail in the general contractor's proposal, the Governor's Finance Office would not approve placement of this contract on the Board of Examiner's agenda. The Purchasing Division authorized DCFS to obtain three (3) quotes.
4/24/19 – The Division notified the general contractor that other options were being pursued.

The Division solicited five (5) other vendors and only received one (1) quote. Other vendors were either too busy to visit the facility or did not respond.

The vendor was authorized to order materials in order to ensure the product was received timely enabling the vendor to complete the project in SFY19. Therefore, in order to complete the work before closing the fiscal year, we are requesting retroactive approval of this Contract.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-7942.

ih/MD

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17760**

Amendment Number: **1**

Legal Entity Name: Nevada Organics, LLC

Agency Name: **DEPARTMENT OF CORRECTIONS**

Contractor Name: **Nevada Organics, LLC**

Agency Code: **440**

Address: **PO BOX 2713**

Appropriation Unit: **3727-00**

Is budget authority available?: **Yes**

City/State/Zip **Jackson, WY 83001**

If "No" please explain: Not Applicable

Contact/Phone: Dane Buk, Owner 307/732-2794

Vendor No.:

NV Business ID: NV20171732676

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/13/2018**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **02/12/2022**

Contract term: **3 years and 337 days**

4. Type of contract: **Revenue Contract**

Contract description: **Inmate Training**

5. Purpose of contract:

This is the first amendment to the original revenue contract which provides reimbursement for the cost to utilize offender labor, provide occupational training for offenders and use land at Silver State Industries Prison Ranch for the purpose of compost operations. This amendment increases the maximum amount from $208,992 to $259,992 due to additional Quonset Hut lease income.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$208,992.00	$208,992.00	$208,992.00	Yes - Action
2.	Amount of current amendment (#1):	$51,000.00	$51,000.00	$51,000.00	Yes - Action
3.	New maximum contract amount:	$259,992.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Per NRS 209.461 authorizes the State of Nevada, Nevada Department of Corrections (NDOC), by and through its Director to provide offender work, contractual activity or business activity, subject to the approval of the Board of State Prison Commissioners and the State Board of Examiners. This contract will allow NDOC to provide work and occupational training for offenders through Nevada Organics LLC.

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. Soliciation Waiver: **Exempt (Per statute)**

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

   NRS 209.391. This contractor was chosen because they approached NDOC.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

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

    LLC

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

    Yes

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

    Yes

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddastal	04/09/2019 10:56:58 AM
Division Approval	amonro1	04/09/2019 11:20:30 AM
Department Approval	sewart	04/09/2019 11:29:52 AM
Contract Manager Approval	aroma2	06/12/2019 08:29:05 AM
Budget Analyst Approval	bmacke1	06/12/2019 08:29:22 AM
BOE Agenda Approval	nhovden	06/12/2019 10:23:13 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: **22017**

		Legal Entity Name:	Board of Regents OBO - University of Nevada, Reno
Agency Name:	**COMMISSION ON MINERAL RESOURCE**	Contractor Name:	**Board of Regents OBO - University of Nevada, Reno**
Agency Code:	**500**	Address:	**UNR Controller's Office**
Appropriation Unit:	**4219-09**		**Mail Stop 0124**
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89557-0124**
If "No" please explain:	Not Applicable	Contact/Phone:	Thomas A. Landis 775-784-4040
		Vendor No.:	D35000816
		NV Business ID:	NV20161295653

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

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

General Funds	0.00 %	X	Fees	**100.00 %**	**Mining Claim**
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 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **06/30/2021**

   Contract term: **2 years**

4. Type of contract: **Interlocal Agreement**

   Contract description: **Industry Reports**

5. Purpose of contract:

   This is a new interlocal agreement to provide ongoing publication of annual mineral industry reports and for the curation and associated database management of oil, gas and geothermal drill cuttings.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$180,000.00**

   Other basis for payment: Fixed price; $90,000 for Fiscal Year 2020 and $90,000 for Fiscal Year 2021

II. JUSTIFICATION

7. What conditions require that this work be done?

   Under the authority of NRS 522.040 and pursuant to NAC 522.215 and NAC 522.510 two sets of drill cuttings and one copy of all logging surveys are to be filed by oil and gas operators with the Nevada Bureau of Mines and Geology (NBMG) to be made available for public inspection when the records are no longer confidential. Similar requirements exist for geothermal operators under the authority of NRS 534A.090 and pursuant to NAC 534A.310 and NAC 534A.550. The curation and public availability of these records are critical to further exploration of oil, gas and geothermal resources in Nevada. Under authority of NRS 513.073, the Division is to encourage exploration of oil, gas, and geothermal energy and minerals within this State and collect and disseminate information pertaining to any program administered by the Division.

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

   For curation and public availability of oil, gas, and geothermal records, the Nevada Bureau of Mines and Geology (NBMG) utilizes the same staff, student resources, scanning equipment, tracking software, online services and warehouse space as is currently utilized for general geological information, maps, samples and reports. The Division does not have sufficient staff, expertise, and resources necessary to publish mineral industry and exploration reports and certain special reports which may be requested from the Commission on Mineral Resources.

9. Were quotes or proposals solicited? No

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

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

   Not Applicable

   b. Soliciation Waiver: **Not Applicable**

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

   At the August 23, 2018 quarterly public meeting of the Commission on Mineral Resources, the Commission approved the Division's proposed FY21/22 biennial budget which included funding a new agreement with the Nevada Bureau of Mines and Geology for $90,000 in fiscal years 2020 and 2021, Item III. A. in attached minutes of that meeting.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dvisher	06/04/2019 13:08:37 PM
Division Approval	dvisher	06/04/2019 13:08:40 PM
Department Approval	dvisher	06/04/2019 13:08:47 PM
Contract Manager Approval	dvisher	06/04/2019 13:08:50 PM
Budget Analyst Approval	mtum1	06/07/2019 15:47:12 PM
BOE Agenda Approval	cmurph3	06/14/2019 12:57:20 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22016**

		Legal Entity Name:	Washoe County RPSTC Executive Board
Agency Name:	**GCB - GAMING CONTROL BOARD**	Contractor Name:	**Washoe County RPSTC Executive Board**
Agency Code:	**611**	Address:	**5190 Spectrum Blvd**
Appropriation Unit:	**4066-14**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89512**
If "No" please explain:	Not Applicable	Contact/Phone:	775-789-5500
		Vendor No.:	
		NV Business ID:	not applicable

To what State Fiscal Year(s) will the contract be charged? **2020-2030**

What is the source of funds that will be used to pay the contractor? 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 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **07/09/2029**
   Contract term: **10 years and 11 days**

4. Type of contract: **Interlocal Agreement**
   Contract description: **Washoe Range Use**

5. Purpose of contract:
   This is a new interlocal agreement to allow regular access to and use of the Washoe County Regional Public Safety Training Center including the firearms ranges and enhanced training venues.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$82,250.00**
   Other basis for payment: Total contract amount ($82,250.00) payable upon execution.

II. JUSTIFICATION

7. What conditions require that this work be done?
   NCGB Enforcement agents are required to firearms qualify once per month upon hire for six months, and quarterly thereafter, in addition to other training. These agents need a suitable range to satisfy the requirements and conduct training activities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   The NGCB Enforcement agents will be using Washoe County RPSTC's Firearms Ranges.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	klay0	06/04/2019 11:57:36 AM
Division Approval	klay0	06/04/2019 11:57:40 AM
Department Approval	klay0	06/04/2019 11:57:43 AM
Contract Manager Approval	klay0	06/04/2019 11:57:45 AM
Budget Analyst Approval	lfree1	06/11/2019 09:53:09 AM
BOE Agenda Approval	lfree1	06/11/2019 09:57:21 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: **21992**

		Legal Entity Name:	Wise Oak Consulting, LLC
Agency Name:	**DPS-EMERGENCY MANAGEMENT**	Contractor Name:	**Wise Oak Consulting, LLC**
Agency Code:	**654**	Address:	**9815 J Sam Furr Rd.**
Appropriation Unit:	**3673-34**		**SUITE 223**
Is budget authority available?:	**Yes**	City/State/Zip	**Huntersville, NC 28078**
If "No" please explain:	Not Applicable	Contact/Phone:	Randy Brawley 704-572-7333
		Vendor No.:	
		NV Business ID:	NV20191407912

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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

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

Agency Reference #: RFP #65DPS-S617

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **07/31/2023**
   Contract term: **4 years and 31 days**

4. Type of contract: **Contract**
   Contract description: **THIRA/SPR**

5. Purpose of contract:

   This is a new contract to provide project management support and outreach services related to the Threat and Hazard Identification and Risk Assessment and Stakeholder Preparedness Review reports for the state and Las Vegas Urban Area Security Initiative authorities.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$217,048.00**
   Payment for services will be made at the rate of $54,262.00 per fiscal year

II. JUSTIFICATION

7. What conditions require that this work be done?

   The THIRA and SPR consequence analysis are required to be completed for Nevada to be eligible for all federal preparedness grants.

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

   DEM staff as well as staff at local and tribal jurisdictions do participate in the overall effort to collect data required by these reports, however, neither DEM nor local or tribal jurisdictions have the technical expertise or manpower available each year to do the complex research needed to meet the level of detail required for these reports.

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):

Hagerty Consulting
Ankura Consulting Group
Filler Security Strategies

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #65DPS-S617, 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: 04/19/2019 Anticipated re-bid date: 04/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

No If "No", to a. AND b., please explain why the contractor does not have an SBL or an exemption.

application is in process

18. Not Applicable

19. Agency Field Contract Monitor:

Eric Wilson, ASO I Ph: 775-687-0316
Judith Lyman, MA I Ph: 775-687-0324
Lori DeGristina, GPA II Ph: 775-687-0445

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jlun1	06/03/2019 13:32:17 PM
Division Approval	nkephart	06/10/2019 08:25:32 AM
Department Approval	cboegle	06/10/2019 08:30:13 AM
Contract Manager Approval	cboegle	06/10/2019 08:30:17 AM
Budget Analyst Approval	jrodrig9	06/10/2019 12:33:48 PM
BOE Agenda Approval	jrodrig9	06/10/2019 12:33:51 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19192**

		Amendment Number:	**1**
		Legal Entity Name:	Southern Nye County Conservation District
Agency Name:	**DEPARTMENT OF WILDLIFE**	Contractor Name:	**Southern Nye County Conservation District**
Agency Code:	**702**	Address:	**401 South Frontage Road**
Appropriation Unit:	**4467-14**		**#301**
Is budget authority available?:	**Yes**	City/State/Zip	**Pahrump, NV 89048-2169**
If "No" please explain:	Not Applicable	Contact/Phone:	Natalie Spicer 775/531-5819
		Vendor No.:	T81001163
		NV Business ID:	Government Entity

To what State Fiscal Year(s) will the contract be charged? **2018-2020**

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

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

Agency Reference #: 18-15

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/18/2017**

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Previously Approved Termination Date: **06/30/2020**

   Contract term: **2 years and 286 days**

4. Type of contract: **Interlocal Agreement**

   Contract description: **Amargosa Toads**

5. Purpose of contract:

   This is the first amendment to the original interlocal agreement which provides tamarisk control through cutting and spraying, replanting of native vegetation, pond maintenance, restoration of hydrologic flows and fence maintenance and installation in Oasis Valley and Beatty. This amendment increases the maximum amount from $35,000 to $80,000 due to the increased need for these services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$35,000.00	$35,000.00	$35,000.00	Yes - Info
2.	Amount of current amendment (#1):	$45,000.00	$45,000.00	$80,000.00	Yes - Action
3.	New maximum contract amount:	$80,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

   Endemic species such as Amargosa toad and other co-occurring species are limited to approximately 12 miles near Beatty, Nevada. These species are critically imperiled unless habitat protections are put in place.

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 implement this habitat restoration projects.

9. Were quotes or proposals solicited? No

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

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

   Not Applicable

   b. Soliciation Waiver: **Not Applicable**

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

   Government entity

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	zcosio	05/31/2019 14:02:14 PM
Division Approval	eobrien	05/31/2019 14:02:42 PM
Department Approval	eobrien	05/31/2019 14:02:46 PM
Contract Manager Approval	nroble1	06/07/2019 09:08:47 AM
Budget Analyst Approval	cpalme2	06/07/2019 09:23:06 AM
BOE Agenda Approval	nhovden	06/07/2019 17:18:03 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22013**

		Legal Entity Name:	Gannett Fleming, Inc.
Agency Name:	**DCNR - DIVISION OF WATER RESOURCES**	Contractor Name:	**Gannett Fleming, Inc.**
Agency Code:	**705**	Address:	**585 W. 500 S., Suite 250**
Appropriation Unit:	**4171-15**		
Is budget authority available?:	**Yes**	City/State/Zip	**Bountiful, UT 84010**
If "No" please explain:	Not Applicable	Contact/Phone:	Gregory Richards 717 827-7207
		Vendor No.:	
		NV Business ID:	NV19931034047

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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

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 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/01/2023**
   Contract term: **4 years and 1 day**
4. Type of contract: **Contract**
   Contract description: **South Fork Eng Svcs**
5. Purpose of contract:

This is a new contract to provide professional engineering services for the safe management of South Fork Dam.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$90,000.00**
   Other basis for payment: Payment to be made as services are requested/provided upon receipt of a complete invoice with backup documentation.

II. JUSTIFICATION

7. What conditions require that this work be done?

All dams are inspected by a third party engineer to ensure the safety of the structure, but the South Fork Dam has never been inspected by a third party / outside entity.

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

The Nevada Division of Water Resources (NDWR) has been conducting inspections over the last 30 years; however, it is standard practice to have an outside entity perform a visual inspection and conduct a comprehensive review every 5 years. NDWR does not have adequate time, staff ability, or expertise necessary to conduct this comprehensive review.

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):

NEWFIELDS
GANNETT FLEMING, INC.
MCMILLEN JACOBS
DYER ENGINEERING

b. Soliciation Waiver: **Not Applicable**

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

Vendor was chosen based on committee proposal review using pre-determined evaluation criteria. This vendor received the highest average score from the review committee.

d. Last bid date: 03/07/2019 Anticipated re-bid date: 03/07/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Chris Thorson, Manager II Ph: 775-684-2803

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kwilliam	06/04/2019 10:05:24 AM
Division Approval	kwilliam	06/04/2019 10:05:26 AM
Department Approval	kwilliam	06/04/2019 10:05:31 AM
Contract Manager Approval	kwilliam	06/04/2019 10:05:33 AM
Budget Analyst Approval	cpalme2	06/05/2019 14:13:31 PM
BOE Agenda Approval	nhovden	06/06/2019 12:55:55 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 CONTRACT

1. Contract Number: **22051**

		Legal Entity Name:	Humboldt County
Agency Name:	**DCNR - FORESTRY DIVISION**	Contractor Name:	**Humboldt County**
Agency Code:	**706**	Address:	**50 West 5th Street**
Appropriation Unit:	**4194-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Winnemucca, NV 89445**
If "No" please explain:	Not Applicable	Contact/Phone:	775-623-6300
		Vendor No.:	
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

Agency Reference #: NDF19-048

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**
   If "Yes", please explain
   NDF did not receive signed agreement from Humboldt County in time to meet BOE deadline for June meeting.

3. Termination Date: **06/30/2020**
   Contract term: **1 year**

4. Type of contract: **Revenue Contract**
   Contract description: **Wildland Fire Protec**

5. Purpose of contract:
   This is a new revenue interlocal agreement to provide ongoing services under the Wildland Fire Protection Program.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$150,000.00**
   Payment for services will be made at the rate of $37,500.00 per Quarter
   Other basis for payment: Payable in advance on the first of each quarter beginning July 1, 2019 for State Fiscal Year 2020.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The Nevada Division of Forestry and Humboldt County will work closely together to maintain effective wildfire management to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which the 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. Soliciation Waiver: **Not Applicable**

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

Not Applicable

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Humboldt County is currently under contract for the Wildland Fire Protection Program and has been under contract since July, 2013.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Boullier, Ron, State Fire Program Manager Ph: 775-684-2556

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgree6	06/11/2019 17:03:46 PM
Division Approval	kkester	06/13/2019 14:10:43 PM
Department Approval	kkester	06/13/2019 14:10:46 PM
Contract Manager Approval	jcoope8	06/13/2019 14:47:44 PM
Budget Analyst Approval	cpalme2	06/14/2019 07:21:41 AM
BOE Agenda Approval	cmurph3	06/14/2019 10:35:55 AM
BOE Final Approval	Pending	

BRADLEY CROWELL, *Director*
Department of Conservation and Natural Resources

STEVE SISOLAK
Governor

KACEY KC
State Forester/Firewarden

STATE OF NEVADA
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
NEVADA DIVISION OF FORESTRY
2478 Fairview Drive
Carson City, Nevada 89701
Phone (775) 684-2500 Fax (775) 684-2570

MEMORANDUM

DATE: June 11, 2019

TO: Curtis Palmer, Executive Branch Budget Officer
Governor's Finance Office

FROM: Kacey KC, State Forester

RE: Request for Retroactive start date approval for WFPP Contract with Humboldt County, CETS #22051

This memorandum requests that the above referenced Nevada Division of Forestry (NDF) contract be approved with a retroactive effective date of July 1, 2019. It is of critical importance that the Division implements this revenue contract in order to continue to procure resources that will provide protection of life and property for the citizens of this State.

NDF and Humboldt County have been in negotiation for continued participation in the Wildland Fire Protection Program for several months. It has always been the intention of both parties for this agreement to be effective on July 1, 2019 as the current contract for this service expires on June 30, 2019. A delay in getting this agreement on the Humboldt County Commissioners' meeting agenda prevented NDF from meeting the Board of Examiners' deadline for the June meeting.

Thank you for your consideration of this request. Should you have any questions, or require additional information, please do not hesitate to contact me at 775.684.2501.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21952**

		Legal Entity Name:	Hilltop Securities, Inc.
Agency Name:	**DCNR - ENVIRONMENTAL PROTECTION**	Contractor Name:	**Hilltop Securities, Inc.**
Agency Code:	**709**	Address:	**1201 Elm Street Suite 3500**
Appropriation Unit:	**3189 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Dallas, TX 75270-2108**
If "No" please explain:	Not Applicable	Contact/Phone:	Anne Burger Entrekin 210-308-2200
		Vendor No.:	T29037258
		NV Business ID:	NV20091051906

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

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

	General Funds	0.00 %	X	Fees	**50.00 % Loan Origination**
X	Federal Funds	**50.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP70CNR-S528 / DEP20-001

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

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **06/30/2023**

   Contract term: **4 years**

4. Type of contract: **Contract**

   Contract description: **Financal Advisement**

5. Purpose of contract:

   This is a new contract to provide ongoing financial advisement/management services to assist in structuring bonds in the best interest of the programs, assist staff in forecasting and advice on financial movements that occur in the markets.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$250,000.00**

   Other basis for payment: As invoiced by the Contractor and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

   Financial advisement is needed to structure bonds for the best interest of the Programs, assist State personnel in forecasting, and advise on financial movements that occur in the markets.

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

   The Program requires specialized knowledge in financial markets and federal policy. Outside vendors with years of experience in financial markets, certified credentials, ongoing education, and interstate knowledge provide an invaluable service to our Program.

9. Were quotes or proposals solicited? Yes

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

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

Public Financial Advisement Inc
Hobbs, Ong & Associates
Hilltop Securiteis Inc
JNA Consulting Group

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP#70-CNR-S528 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: 03/14/2019 Anticipated re-bid date: 03/14/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Previous Contract # 16645 with NDEP expiring June 30, 2019. - All work completed satisfactorily

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

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

Yes

19. Agency Field Contract Monitor:

Marcy McDermitt, Admin Asst Ph: 775-687-9436

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jcoope5	05/13/2019 12:07:08 PM
Division Approval	vking	05/30/2019 14:18:35 PM
Department Approval	vking	05/30/2019 14:18:41 PM
Contract Manager Approval	ssimpso2	06/03/2019 07:57:10 AM
Budget Analyst Approval	cpalme2	06/05/2019 11:22:04 AM
BOE Agenda Approval	nhovden	06/06/2019 13:12:32 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: **22021**

		Legal Entity Name:	Board of Regents Nevada System of Higher Education OBO the Nevada
Agency Name:	**DCNR - ENVIRONMENTAL PROTECTION**	Contractor Name:	**Board of Regents Nevada System of Higher Education OBO the Nevada**
Agency Code:	**709**	Address:	**State Public Health Laborator**
Appropriation Unit:	**3193-12**		**UNR Mailstop 385**
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89557-0240**
If "No" please explain:	Not Applicable	Contact/Phone:	Stephanie Van Hooser 775-682-6205
		Vendor No.:	D35000816
		NV Business ID:	Governmental Agency

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

Agency Reference #: DEP20-012

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

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **06/30/2020**

   Contract term: **1 year**

4. Type of contract: **Interlocal Agreement**

   Contract description: **Analysis of water**

5. Purpose of contract:

   This is a new interlocal agreement that continues the ongoing analysis of water, sediment and biota samples to characterize the chemical, physical and biological condition of surface waters in support of the agency's statewide surface water quality monitoring program.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$150,000.00**

   Other basis for payment: As invoiced monthly

II. JUSTIFICATION

7. What conditions require that this work be done?

   The federal Clean Water Act Section 106 and 40 Code of Federal Regulations 130.4(a) require states to develop and implement a surface water quality monitoring program to characterize the water quality status of waters of the state. The U.S. Environmental Protection Agency provides federal 106 funding to the Nevada Division of Environmental Protection to carry out the monitoring program.

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

   Nevada Division of Environmental Protection does not have the laboratory facilities necessary to analyze water samples.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Soliciation Waiver: **Exempt (Per statute)**

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

The Nevada State Public Health Laboratory (NSPHL) is the recognized laboratory for the State of Nevada and has analyzed NDEP's water samples since the water quality monitoring program began in the 1970s.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

John Heggeness, Envirionmental Scientist Ph: 775-687-9449

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ahanso1	06/06/2019 08:29:59 AM
Division Approval	ssimpso2	06/12/2019 12:04:50 PM
Department Approval	ssimpso2	06/12/2019 12:04:53 PM
Contract Manager Approval	ssimpso2	06/12/2019 12:04:57 PM
Budget Analyst Approval	cpalme2	06/12/2019 12:27:23 PM
BOE Agenda Approval	cmurph3	06/14/2019 10:36:14 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: **21647**

		Legal Entity Name:	Southern Nevada Health District
Agency Name:	**DCNR - ENVIRONMENTAL PROTECTION**	Contractor Name:	**Southern Nevada Health District**
Agency Code:	**709**	Address:	**PO Box 3902**
Appropriation Unit:	**3197-10**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89127-3902**
If "No" please explain:	Not Applicable	Contact/Phone:	John Shannon 702-759-0875
		Vendor No.:	T27001231B
		NV Business ID:	Government Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2021**

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

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

Agency Reference #: 101

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 06/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years and 30 days**

4. Type of contract: **Interlocal Agreement**
   Contract description: **Water Law/Mgmt Svcs**

5. Purpose of contract:
   This is a new interlocal agreement that continues ongoing assistance in applying Nevada laws governing public water systems.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$250,000.00**
   Other basis for payment: Invoiced expenses per month not to exceed $125,000. per year.

II. JUSTIFICATION

7. What conditions require that this work be done?
   NRS 445A.925 requires the NDEP and district boards of health to implement Nevada laws and regulations covering public water systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NRS 445A.925 requires the NDEP and district boards of health to implement Nevada's public water system laws within their jurisdiction. Implementation at the local level allows the agency to be more responsive to public health issues and emergencies.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

17.73 %

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Nguyen, My-Linh, Bureau Chief Ph: 775/687-9515

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ahanso1	05/29/2019 07:56:21 AM
Division Approval	mnguyen	05/31/2019 11:28:43 AM
Department Approval	mnguyen	05/31/2019 11:28:51 AM
Contract Manager Approval	kkochen	05/31/2019 11:38:38 AM
Budget Analyst Approval	cpalme2	06/05/2019 13:28:17 PM
BOE Agenda Approval	nhovden	06/07/2019 11:35:17 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: **21641**

		Legal Entity Name:	Washoe County Health District
Agency Name:	**DCNR - ENVIRONMENTAL PROTECTION**	Contractor Name:	**Washoe County Health District**
Agency Code:	**709**	Address:	**1001 EAST NINTH STREET**
Appropriation Unit:	**3197-16**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89512-2845**
If "No" please explain:	Not Applicable	Contact/Phone:	JAMES ENGLISH 775-328-2610
		Vendor No.:	T40283400Q
		NV Business ID:	GOVERNMENT ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

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

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

Agency Reference #: 101

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Interlocal Agreement**
   Contract description: **Water Law/Mgmt Srvcs**

5. Purpose of contract:
   This is a new interlocal agreement that continues ongoing assistance in applying Nevada laws governing public water systems.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$250,000.00**
   Other basis for payment: Invoiced expenses per Month not to exceed $125,000 per year.

II. JUSTIFICATION

7. What conditions require that this work be done?
   NRS 445A.925 requires the NDEP and district boards of health to implement Nevada laws and regulations covering public water systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NRS 445A.925 requires district boards of health to implement Nevada public water system laws within their jurisdiction. Implementation as the local level allows the agency to be more responsive to public health issues and emergencies.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable

b. Soliciation Waiver: **Exempt (Per statute)**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

17.8 %

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Contractor has performed these same services for the Health Division/Bureau of Health Protection Services until July of 2005, and then for NDEP from July 2005 until the present time. Most recent contract services have been performed satisfactorily.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

My-Linh Nguyen, Bureau Chief, Program & Supervising Manager Ph: 775-687-9515

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rbusto	06/03/2019 15:03:33 PM
Division Approval	mnguyen	06/04/2019 11:03:33 AM
Department Approval	mnguyen	06/04/2019 11:03:38 AM
Contract Manager Approval	kkochen	06/04/2019 13:19:27 PM
Budget Analyst Approval	cpalme2	06/07/2019 09:30:16 AM
BOE Agenda Approval	nhovden	06/07/2019 17:15:31 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: **21953**

		Legal Entity Name:	Northern Nevada Development Authority
Agency Name:	**DEPARTMENT OF TRANSPORTATION**	Contractor Name:	**Northern Nevada Development Authority**
Agency Code:	**800**	Address:	**704 West Nye Lane**
Appropriation Unit:	**4660-06**		**Suite 201**
Is budget authority available?:	**Yes**	City/State/Zip	**Carson City, NV 89703**
If "No" please explain:	Not Applicable	Contact/Phone:	Rob Hooper 775-883-4413
		Vendor No.:	
		NV Business ID:	NV19811008120

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

Agency Reference #: P188-19-800

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2019**
   Contract term: **183 days**
4. Type of contract: **Interlocal Agreement**
   Contract description: **Rail Report**
5. Purpose of contract:

This is a new interlocal agreement to provide an economic freight study evaluating railroad needs across the Tahoe Reno Industrial Center and Fernley areas. The study will parallel the rail plan update and help with future freight planning for the northern corridor and set the stage for how rail can better serve northern Nevada.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$189,915.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

To deliver a report on the TRI Center and Fernley areas including a new multimodal freight facility. This study will be parallel to the rail plan update and help with future freight planning for the northern corridor. This study will help us to set the stage for how rail can better serve northern Nevada and will complement and enhance the analysis begun by the state rail plan update.

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

This is an Interlocal Agreement that will help us to have a regional development authority (RDA) under the auspices of the Governor's Office of Economic Development.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

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

    Non-profit Corporation

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

    Yes

17. Not Applicable

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jcutts	05/13/2019 09:50:06 AM
Division Approval	jcutts	05/13/2019 09:50:10 AM
Department Approval	jcutts	05/13/2019 09:50:13 AM
Contract Manager Approval	jcutts	05/13/2019 09:50:15 AM
Budget Analyst Approval	bmacke1	06/04/2019 15:15:28 PM
BOE Agenda Approval	jrodrig9	06/08/2019 00:35:01 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: **21538**

		Legal Entity Name:	CARPENTER SELLERS DEL GATTO
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**CARPENTER SELLERS DEL GATTO**
Agency Code:	**901**	Address:	**ARCHITECTS PC**
Appropriation Unit:	**3253-10**		**8882 SPANISH RIDGE AVE**
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89148-1303**
If "No" please explain:	Not Applicable	Contact/Phone:	RICK SELLERS 702/251-8896
		Vendor No.:	T80997582
		NV Business ID:	NV19871041301

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

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

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Business Enterprise Set-Aside**

Agency Reference #: 3306-21-BEN

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Contract**
   Contract description: **Carpenter Sellers**

5. Purpose of contract:

This is a new contract to provide architectural/interior design services for a bakery and retail store located at the City of Las Vegas parking garage B.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$90,000.00**
   Other basis for payment: As invoiced per the contract. The contract shall not exceed $90,000.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

Business Enterprises of Nevada (BEN) is a program, established by Federal (Randolph-Sheppard Act) and State (NRS 426.630 thru 426.720) laws, to provide a priority right for individuals who are legally blind or visually impaired, to operate food, beverage, and vending in federal, state and local public buildings. Individuals receive training and on-the-job experience in managing and operating snack bars, cafeterias, vending machine routes and other businesses located in public buildings. BEN also provides on-going support with repairs, maintenance and upgrades of the snack bars and cafeterias.

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

State employees do not have the skills or certifications.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No

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

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

Per NAC 333.150(2)b(3). This is the architect that the city of Las Vegas is using for the overall planning for the Symphony Park project, of which this is a small part.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

The vendor has been providing satisfactory service to various state agencies since 1999.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Domestic Professional Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Jessica Peters, BEO II Ph: 702-486-2960

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmartin7	02/12/2019 14:00:27 PM
Division Approval	kdesoci1	06/05/2019 09:08:17 AM
Department Approval	kdesoci1	06/05/2019 09:08:19 AM
Contract Manager Approval	mjohns43	06/05/2019 09:46:54 AM
Budget Analyst Approval	dbaughn	06/11/2019 09:17:44 AM
BOE Agenda Approval	tgreenam	06/11/2019 10:21:47 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: **21583**

		Legal Entity Name:	Clark County School District
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**Clark County School District**
Agency Code:	**901**	Address:	**5100 West Sahara Avenue**
Appropriation Unit:	**3265-12**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89146**
If "No" please explain:	Not Applicable	Contact/Phone:	Deanna Jaskolski 702-799-5471
		Vendor No.:	T40231800
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

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

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

Agency Reference #: 3302-21-REHAB

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**

   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**

   If "Yes", please explain

   The contract has been in discussion for several months. due to the requirement of the contract being on the Board of Trustee's May 2019 agenda, the contract was not signed in time to make the June BOE.

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Interlocal Agreement**
   Contract description: **2019 CCSD JEEP**

5. Purpose of contract:

   This is a new interlocal agreement that continues ongoing vocational rehabilitation services to high school students with disabilities through the Job Exploration and Expectation Program.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$2,236,592.98**

   Other basis for payment: Clark County School District agrees to provide services for: SFY20: $338,970.41; SFY21: $355,079.57. Rehabilitation Division agrees to provide services for : SFY20: $752,460.00; SFY21 $790,083.00. Total cost of the contract shall not exceed $2,236,592.98.

II. JUSTIFICATION

7. What conditions require that this work be done?

   Cooperation and coordination of services between the Vocational Rehabilitation and School Districts is a high priority focus by the Rehabilitation Services Administration, US Department of Education to better serve high school students with disabilities.

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

   The Division does not have the staff or the funding to perform these services.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

N/A

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

The vendor has provided satisfactory services to Rehabilitation since 2012.

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Sheena Childers, Rehab Manager Ph: 702-486-5234

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mjohns43	05/17/2019 10:25:51 AM
Division Approval	kdesoci1	06/03/2019 11:34:26 AM
Department Approval	kdesoci1	06/03/2019 11:34:29 AM
Contract Manager Approval	mjohns43	06/03/2019 13:57:30 PM
Budget Analyst Approval	dbaughn	06/05/2019 10:31:18 AM
BOE Agenda Approval	tgreenam	06/10/2019 14:23:00 PM
BOE Final Approval	Pending	

State of Nevada
Department of Employment, Training and Rehabilitation

REHABILITATION DIVISION

MEMORANDUM

DATE: May 31, 2019

TO: Susan Brown
Board of Examiners

FROM: Dr. Tiffany Tyler-Garner, Director, Department of Employment, Training and Rehabilitation

Contract# 3302-21-REHAB CETS# 21583

SUBJECT: Retroactive contract for ongoing vocational rehabilitation services to students with disabilities who are attending Clark County School District high school.

The Department of Employment, Training and Rehabilitation (DETR) respectfully requests approval of the attached contract with the Clark County School District, retroactive to July 1, 2019. This contract provides ongoing vocational rehabilitation services to students with disabilities attending Clark County School District high school and resources will be combined to provide vocational rehabilitation services through the Job Exploration and Expectation Program.

The services rendered by the Clark County School District in cooperation and coordination between Vocational Rehabilitation and the school districts is a high priority focus by the Rehabilitation Services Administration, US Department of Education to better serve high school students with disabilities. To avoid additional delay in providing services, the department is requesting BOE approval effective July 1, 2019.

This contract has been in discussions for several months. Due to the requirement of the contract being on the Board of Trustee's agenda for the May 2019, the contract was not signed in time to make the June BOE.

Thank you for your consideration of this request.

500 East Third Street • Carson City, Nevada 89713 • (775) 684-3901 • Fax (775) 684-0327
www.nvdetr.org

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21998**

		Legal Entity Name:	BOARD OF REGENTS-TMCC
Agency Name:	**DETR - EMPLOYMENT SECURITY**	Contractor Name:	**BOARD OF REGENTS-TMCC**
Agency Code:	**902**	Address:	**TMCC CONTROLLERS OFFICE**
Appropriation Unit:	**4770-16**		**7000 DANDINI BLVD RDMT 200A**
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89512-3999**
If "No" please explain:	Not Applicable	Contact/Phone:	Laura Vargas 775/673-7155
		Vendor No.:	D35000812
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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

General Funds	0.00 %	X	Fees	**100.00 %**	**Divorce Fees from Nevada Counties**
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: RFP# 90DETR-S576

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **07/31/2023**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **Displaced Homemaker**

5. Purpose of contract:
   This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$122,268.00**
   Payment for services will be made at the rate of $30,567.00 per year
   Other basis for payment: As invoiced by the Contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The State is required by NRS for the establishment of services for displaced homemakers.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Specialized skills are required for 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):
   HELP of Southern Nevada
   Truckee Meadows Community College
   Community Chest, Inc.

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #90DETR-S576, 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: 04/15/2019 Anticipated re-bid date: 03/15/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DETR - current contract services has been satisfactory

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	aallen	06/03/2019 15:15:07 PM
Division Approval	kdesoci1	06/03/2019 16:01:02 PM
Department Approval	kdesoci1	06/03/2019 16:01:05 PM
Contract Manager Approval	mjohns43	06/04/2019 07:15:31 AM
Budget Analyst Approval	dbaughn	06/05/2019 15:36:21 PM
BOE Agenda Approval	tgreenam	06/07/2019 08:35:31 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: **21995**

		Legal Entity Name:	COMMUNITY CHEST, INC.
Agency Name:	**DETR - EMPLOYMENT SECURITY**	Contractor Name:	**COMMUNITY CHEST, INC.**
Agency Code:	**902**	Address:	**991 South C Street**
Appropriation Unit:	**4770-16**		**PO BOX 980**
Is budget authority available?:	**Yes**	City/State/Zip	**VIRGINIA CITY, NV 89440-0980**
If "No" please explain:	Not Applicable	Contact/Phone:	Kallie Day 775/847-9311
		Vendor No.:	T80951469
		NV Business ID:	NV19911013020

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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

General Funds	0.00 %	X	Fees	**100.00 %**	**Divorce Fees from Nevada Counties**
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: RFP# 90-DETR-S576

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **07/31/2023**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **Displaced Homemaker**

5. Purpose of contract:
   This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$111,112.00**
   Other basis for payment: As invoiced by the Contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The State is required by NRS for the establishment of services for displaced homemakers

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Specialized skills are required for 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):
   HELP of Southern Nevada
   Community Chest, Inc.
   Truckee Meadows Community College
   b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #90DETR-S576, 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: 04/15/2019 Anticipated re-bid date: 03/15/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DETR - current contract services has been satisfactory

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

null, null Ph: null
null, null Ph: null
null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jbende2	05/31/2019 10:06:31 AM
Division Approval	rolso1	06/03/2019 09:24:41 AM
Department Approval	kdesoci1	06/03/2019 11:25:08 AM
Contract Manager Approval	mjohns43	06/03/2019 12:02:37 PM
Budget Analyst Approval	dbaughn	06/05/2019 15:28:19 PM
BOE Agenda Approval	tgreenam	06/07/2019 09:16:39 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21997**

		Legal Entity Name:	HELP OF SOUTHERN NEVADA
Agency Name:	**DETR - EMPLOYMENT SECURITY**	Contractor Name:	**HELP OF SOUTHERN NEVADA**
Agency Code:	**902**	Address:	**COURTNEY CHILDRENS FOUNDATION**
Appropriation Unit:	**4770-16**		**1640 E FLAMINGO RD STE 100**
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89119-5280**
If "No" please explain:	Not Applicable	Contact/Phone:	Denise Gee 702/369-4357
		Vendor No.:	T80351170D
		NV Business ID:	NV19701000894

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

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

General Funds	0.00 %	X	Fees	**100.00 %**	**Divorce fees from Nevada Counties**
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: RFP# 90DETR-S576

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **07/31/2023**
   Contract term: **4 years**
4. Type of contract: **Contract**
   Contract description: **Displaced Homemaker**
5. Purpose of contract:

This is a new contract to provide ongoing services for the education and counseling of displaced homemakers, specifically designed to enable displaced homemakers to obtain and retain appropriate employment.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$867,604.00**
   Other basis for payment: As invoiced by the Contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State is required by NRS for the establishment of services for displaced homemakers.

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

Specialized skills are required for 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):

Community Chest, Inc.
HELP of Southern Nevada
Truckee Meadows Community College

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP #90DETR-S576, 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: 04/15/2019 Anticipated re-bid date: 01/31/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DETR - current contract services has been satisfactory

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jbende2	05/31/2019 10:07:23 AM
Division Approval	rolso1	06/03/2019 09:25:57 AM
Department Approval	kdesoci1	06/03/2019 11:25:51 AM
Contract Manager Approval	mjohns43	06/03/2019 13:50:06 PM
Budget Analyst Approval	dbaughn	06/05/2019 15:29:29 PM
BOE Agenda Approval	tgreenam	06/07/2019 09:18:38 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: **18971**

		Amendment Number:	**1**
		Legal Entity Name:	Louis Ling
Agency Name:	**BDC LICENSING BOARDS & COMMISSIONS**	Contractor Name:	**Louis Ling**
Agency Code:	**BDC**	Address:	**933 Gear Street**
Appropriation Unit:	**B001 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89503**
If "No" please explain:	Not Applicable	Contact/Phone:	775-233-9099
		Vendor No.:	
		NV Business ID:	NV20171383755

To what State Fiscal Year(s) will the contract be charged? **2018-2023**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **08/31/2019**

Contract term: **5 years**

4. Type of contract: **Contract**

Contract description: **Legal Services**

5. Purpose of contract:

This is the first amendment to the original contract for legal services. This amendment extends the termination date from August 31, 2019 to August 31, 2022 and increases the maximum amount from $30,000 to $100,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$30,000.00	$30,000.00	$30,000.00	Yes - Info
2.	Amount of current amendment (#1):	$70,000.00	$70,000.00	$100,000.00	Yes - Action
3.	New maximum contract amount:	$100,000.00			
	and/or the termination date of the original contract has changed to:	08/31/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board periodically finds it necessary to engage an Independent Contractor for the purpose of accomplishing work of the Board under statute authority. NRS 333.700 authorizes the hiring of independent legal counsel.

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

There is no legal expertise within the Board. Legal services to be provided by the Contractor pertain to a specific area of knowledge. There is also a need for continuity of services.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Soliciation Waiver: **Exempt (Per statute)**

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

The Contractor has provided legal services for the Board for numerous years and possesses the necessary expertise resulting in continuity of knowledge, continuing services and reduction of cost.

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vwind1	05/28/2019 15:25:16 PM
Division Approval	vwind1	05/28/2019 15:25:21 PM
Department Approval	vwind1	05/28/2019 15:25:25 PM
Contract Manager Approval	vwind1	05/28/2019 15:25:30 PM
Budget Analyst Approval	lfree1	06/06/2019 10:34:12 AM
BOE Agenda Approval	lfree1	06/06/2019 10:35:35 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21999**

		Legal Entity Name:	Lee A. Drizin, Chtd.
Agency Name:	**BDC LICENSING BOARDS & COMMISSIONS**	Contractor Name:	**Lee A. Drizin, Chtd.**
Agency Code:	**BDC**	Address:	**2460 Professional Court, Suite**
Appropriation Unit:	**B007 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89128**
If "No" please explain:	Not Applicable	Contact/Phone:	Lee Drizin 702-798-4955
		Vendor No.:	
		NV Business ID:	NV20031316720

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**
   If "Yes", please explain

   Dental Board provided retroactive memorandum, requesting no interruption in the legal services.

3. Termination Date: **06/30/2020**
   Contract term: **1 year**

4. Type of contract: **Contract**
   Contract description: **Legal Services**

5. Purpose of contract:

   This is a new contract for continued legal services, including district court litigation and appellate court representation.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$70,000.00**
   Payment for services will be made at the rate of $300.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

   That Board requires independent outside legal counsel to advise Board Members, Board General Counsel and Board staff and to provide counsel to litigate current cases filed through District Court or any appeals through the Nevada Supreme Court. NRS 631.190 authorizes the Board to hire legal counsel to assist the Board.

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

   Independent legal counsel is needed to assist in current cases within District Court and any appeals that may arise in the Nevada Supreme Court. Mr. Drizin was approved by the BOE under a previous contract for services which will expire. This contract is an extension of services based on his knowledge of the matters and continuity of counsel.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

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

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

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Previously approved contract for legal counsel services for the Nevada State Board of Dental Examiners

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

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

    Not Applicable

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

    Nevada Corporation

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

    Yes

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

    Yes

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vwind1	05/30/2019 11:17:40 AM
Division Approval	vwind1	05/30/2019 11:17:44 AM
Department Approval	vwind1	05/30/2019 11:17:48 AM
Contract Manager Approval	vwind1	05/30/2019 11:17:52 AM
Budget Analyst Approval	lfree1	06/06/2019 11:28:16 AM
BOE Agenda Approval	lfree1	06/06/2019 11:30:36 AM
BOE Final Approval	Pending	

Nevada State Board of Dental Examiners

6010 S. Rainbow Boulevard, Building A, Suite 1 • Las Vegas, Nevada 89118 • (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

Memorandum

Date: June 6, 2019

To: Laura Freed, Deputy Administrator

From: Debra Shaffer-Kugel, Ex. Director
Nevada State Board of Dental Examiners

Re: Contract Submission for Lee Drizin, Esquire

The Nevada State Board of Dental Examiners has approved a new contract with Lee Drizin, Esquire. This contract is a continuation of an existing contract which expires on June 30, 2019.

The Board requests the contract upon BOE approval be retro-active to July 1, 2019 to avoid interruption in his legal representation of the Board, Board Members and Staff with the ongoing litigation(s) in District Court.

Should you have any questions please feel free to contact me at dashaffer@nsbde.nv.gov or at (702) 486-7044.

Thank you.

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.		VARIOUS STATE AGENCIES	ALEJANDRO P YANEZ, PH.D, HSPP, ESQ	OTHER: VARIOUS AGENCIES	$400,000	
	Contract Description:	This is a new contract to provide psychology services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21959		
2.		VARIOUS STATE AGENCIES	ARROYO MEDICAL, INC.	OTHER: VARIOUS AGENCIES	$500,000	
	Contract Description:	This is a new contract to provide acute medical services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21987		
3.		VARIOUS STATE AGENCIES	CINTAS CORPORATION	OTHER: VARIOUS AGENCIES	$1,500,000	
	Contract Description:	This is a new contract to provide laundry services to various state agencies.				
		Term of Contract:	07/10/2019 - 06/30/2022	Contract # 19942		
4.		VARIOUS STATE AGENCIES	FUNCTIONAL PATHWAYS OF TENNESSEE, LLC	OTHER: VARIOUS AGENCIES	$4,000,000	
	Contract Description:	This is a new contract to provide physical, occupational and speech therapy services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21970		
5.		VARIOUS STATE AGENCIES	GROW THERAPY NV, LLC	OTHER: VARIOUS AGENCIES	$400,000	
	Contract Description:	This is a new contract to provide speech therapy and counseling services statewide.				
		Term of Contract:	Upon Approval - 06/30/2020	Contract # 21932		
6.		VARIOUS STATE AGENCIES	HELP OF SOUTHERN NEVADA	OTHER: VARIOUS AGENCIES	$750,000	
	Contract Description:	This is a new contract to provide homeless youth services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21941		
7.		VARIOUS STATE AGENCIES	HAIR STUDIO, INC.	OTHER: VARIOUS AGENCIES	$300,000	
	Contract Description:	This is a new contract to provide aquatic therapy services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22001		
8.		VARIOUS STATE AGENCIES	LAS VEGAS EVALUATION SERVICES	OTHER: VARIOUS AGENCIES	$300,000	
	Contract Description:	This is a new contract to provide psychological, pyschoeducational and various other cognitive assessment services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21951		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
9.		VARIOUS STATE AGENCIES	NIEVES B. AIRADO DBA AIRADO'S CARE	OTHER: VARIOUS AGENCIES	$600,000	
	Contract Description:	This is a new contract to provide elder care assistance services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21993		
10.		VARIOUS STATE AGENCIES	OLIVIA M. BEAUFORD DBA THE LANGUAGE CONNECTION	OTHER: VARIOUS AGENCIES	$100,000	
	Contract Description:	This is a new contract to provide on-site and remote language translation services statewide.				
		Term of Contract:	06/10/2019 - 01/15/2022	Contract # 22052		
11.		VARIOUS STATE AGENCIES	PILOT THOMAS LOGISTICS	OTHER: VARIOUS AGENCIES	$15,000,000	
	Contract Description:	This is a new contract to provide bulk fuel purchase and delivery services statewide on an as needed basis.				
		Term of Contract:	Upon Approval - 01/31/2020	Contract # 22005		
12.		VARIOUS STATE AGENCIES	RURAL NEVADA COUNSELING	OTHER: VARIOUS AGENCIES	$800,000	
	Contract Description:	This is a new contract to provide substance abuse counseling services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21976		
13.		VARIOUS STATE AGENCIES	STARK MEDICINE MCKAY, KHURANA, JEIDER, PLLC	OTHER: VARIOUS AGENCIES	$600,000	
	Contract Description:	This is a new contract to provide applied behavioral analysis services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22015		
14.		VARIOUS STATE AGENCIES	STARK MEDICINE MCKAY, KHURANA, JEIDER, PLLC	OTHER: VARIOUS AGENCIES	$600,000	
	Contract Description:	This is a new contract to provide psychiatry services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22014		
15.		VARIOUS STATE AGENCIES	SARINA KAY ROSS	OTHER: VARIOUS AGENCIES	$250,000	
	Contract Description:	This is a new contract to provide job development and occupational training services statewide.				
		Term of Contract:	07/13/2019 - 06/30/2022	Contract # 21972		
16.		VARIOUS STATE AGENCIES	TAHOE HOUSE FAMILY SERVICES, LLC	OTHER: VARIOUS AGENCIES	$750,000	
	Contract Description:	This is the first amendment to the original contract to provide group home services statewide. This amendment increases the maximum amount from $250,000 to $1,000,000 due to a higher than expected need for these services.				
		Term of Contract:	03/12/2019 - 06/30/2022	Contract # 21444		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
17.		VARIOUS STATE AGENCIES	UNIVERSAL EDUCATION COMPANY DBA UEC USA	OTHER: VARIOUS AGENCIES	$300,000	
	Contract Description:	This is a new contract to provide job development services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 21950		

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21959**

		Legal Entity Name:	Alejandro P Yanez, Ph.D, HSPP, ESQ
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Alejandro P Yanez, Ph.D, HSPP, ESQ**
Agency Code:	**MSA**	Address:	**588 Doletto Street**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89138**
If "No" please explain:	Not Applicable	Contact/Phone:	Alejandro Yanez 702-540-8978
		Vendor No.:	T29041951
		NV Business ID:	NV20111771580

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **Medical Provider**

5. Purpose of contract:
   This is a new contract to provide psychology services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$400,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/13/2019 15:07:55 PM
Division Approval	mstewa10	05/13/2019 15:07:57 PM
Department Approval	mstewa10	05/13/2019 15:07:59 PM
Contract Manager Approval	mstewa10	05/13/2019 15:08:02 PM
Budget Analyst Approval	aurruty	05/22/2019 17:26:30 PM
BOE Agenda Approval	lfree1	05/24/2019 16:32:31 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: **21987**

		Legal Entity Name:	Arroyo Medical, Inc.
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Arroyo Medical, Inc.**
Agency Code:	**MSA**	Address:	**118 E. Haskell St.**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Winnemucca , NV 89445**
If "No" please explain:	Not Applicable	Contact/Phone:	Richard Brecheen 307-413-1254
		Vendor No.:	T29042185
		NV Business ID:	NV20191073049

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **Medical Services**

5. Purpose of contract:
   This is a new contract to provide acute medical services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$500,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/29/2019 14:24:32 PM
Division Approval	jthom17	05/29/2019 14:24:35 PM
Department Approval	jthom17	05/29/2019 14:24:38 PM
Contract Manager Approval	rvradenb	05/29/2019 14:25:39 PM
Budget Analyst Approval	aurruty	06/07/2019 15:31:21 PM
BOE Agenda Approval	lfree1	06/10/2019 09:30:11 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: **19942**

		Legal Entity Name:	CINTAS CORPORATION
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**CINTAS CORPORATION**
Agency Code:	**MSA**	Address:	**1312 Capitol Blvd #102**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89434**
If "No" please explain:	Not Applicable	Contact/Phone:	Daniel Rodrigues 530-321-0218
		Vendor No.:	T32002621
		NV Business ID:	NV20001284939

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: 3485-AM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/10/2019**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **2 years and 356 days**

4. Type of contract: **MSA**

Contract description: **Laundry Services**

5. Purpose of contract:

This is a new contract to provide laundry services to various state agencies.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$1,500,000.00**

Other basis for payment: Various rates per required items, see contractor's cost proposal which is provided on Attachment CC of the contract.

II. JUSTIFICATION

7. What conditions require that this work be done?

Several State agencies require laundry services in the course of their daily operations.

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 type of facility needed to handle 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):

Brady Linen Services, LLC
Cintas
Aramark Uniform Services
Alsco, Inc.

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFP 3485, and in accordance with NRS 333, the selected vendor was one of the highest scoring proposers as determined by an independently appointed evaluation committee.

d. Last bid date: 01/22/2018 Anticipated re-bid date: 04/04/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

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

    Nevada Corporation

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

    Yes

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

    Yes

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/08/2019 10:52:32 AM
Division Approval	mstewa10	05/08/2019 10:52:36 AM
Department Approval	mstewa10	05/08/2019 10:52:38 AM
Contract Manager Approval	amorfin	05/08/2019 10:54:45 AM
Budget Analyst Approval	aurruty	05/23/2019 14:22:43 PM
BOE Agenda Approval	lfree1	05/24/2019 16:53:28 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: **21970**

		Legal Entity Name:	FUNCTIONAL PATHWAYS OF TENNESSEE, LLC
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**FUNCTIONAL PATHWAYS OF TENNESSEE, LLC**
Agency Code:	**MSA**	Address:	**10133 SHERRILL BLVD STE 200**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**KNOXVILLE, TN 37932-3347**
If "No" please explain:	Not Applicable	Contact/Phone:	Linda Morse 865/392-2833
		Vendor No.:	T29026908
		NV Business ID:	NV20111085153

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **3 years**

4. Type of contract: **MSA**

Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide physical, occupational and speech therapy services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$4,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/22/2019 10:16:10 AM
Division Approval	jthom17	05/22/2019 10:16:13 AM
Department Approval	jthom17	05/22/2019 10:19:09 AM
Contract Manager Approval	rvradenb	05/22/2019 10:58:41 AM
Budget Analyst Approval	lfree1	05/24/2019 17:01:50 PM
BOE Agenda Approval	lfree1	05/24/2019 17:01:53 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: **21932**

		Legal Entity Name:	Grow Therapy NV, LLC
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Grow Therapy NV, LLC**
Agency Code:	**MSA**	Address:	**9321 Colorful Rainbow Ave**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas , NV 89166**
If "No" please explain:	Not Applicable	Contact/Phone:	Jenniger Noon 541-218-9129
		Vendor No.:	T29042099
		NV Business ID:	NV20181823113

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

Agency Reference #: RM107

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2020**

Contract term: **1 year**

4. Type of contract: **MSA**

Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide speech therapy and counseling services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$400,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Partnership

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/09/2019 09:21:55 AM
Division Approval	mstewa10	05/09/2019 09:21:59 AM
Department Approval	mstewa10	05/09/2019 09:22:02 AM
Contract Manager Approval	mstewa10	05/09/2019 09:22:06 AM
Budget Analyst Approval	aurruty	05/22/2019 15:05:28 PM
BOE Agenda Approval	lfree1	05/24/2019 16:49:34 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21941**

		Legal Entity Name:	HELP OF SOUTHERN NEVADA
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**HELP OF SOUTHERN NEVADA**
Agency Code:	**MSA**	Address:	**1640 E FLAMINGO RD STE 100**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89119-5280**
If "No" please explain:	Not Applicable	Contact/Phone:	Fuilala Riley 702/369-4357
		Vendor No.:	T80351170D
		NV Business ID:	NV19701000894

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM167

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **NonMedical Provider**

5. Purpose of contract:
   This is a new contract to provide homeless youth services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$750,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/09/2019 09:21:21 AM
Division Approval	mstewa10	05/09/2019 09:21:24 AM
Department Approval	mstewa10	05/09/2019 09:21:27 AM
Contract Manager Approval	mstewa10	05/09/2019 09:21:30 AM
Budget Analyst Approval	aurruty	05/22/2019 16:55:37 PM
BOE Agenda Approval	lfree1	05/22/2019 16:56:43 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: **22001**

		Legal Entity Name:	Hair Studio, Inc.
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Hair Studio, Inc.**
Agency Code:	**MSA**	Address:	**3430 Executive Pointe Way**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Carson City, NV 89706**
If "No" please explain:	Not Applicable	Contact/Phone:	Starr Nixdorf 775-883-4434
		Vendor No.:	T32008160
		NV Business ID:	NV20051398530

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **Medical Provider**

5. Purpose of contract:
   This is a new contract to provide aquatic therapy services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$300,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/31/2019 11:38:03 AM
Division Approval	mstewa10	05/31/2019 11:38:06 AM
Department Approval	mstewa10	05/31/2019 11:38:09 AM
Contract Manager Approval	rvradenb	05/31/2019 11:43:36 AM
Budget Analyst Approval	aurruty	06/07/2019 14:56:22 PM
BOE Agenda Approval	lfree1	06/10/2019 09:35:03 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: **21951**

		Legal Entity Name:	LAS VEGAS EVALUATION SERVICES
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**LAS VEGAS EVALUATION SERVICES**
Agency Code:	**MSA**	Address:	**1887 ROXBURY LN**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89119-5144**
If "No" please explain:	Not Applicable	Contact/Phone:	Valerie Tolbert 702/476-9997
		Vendor No.:	T29040601
		NV Business ID:	NV20181230668

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM167

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **3 years**

4. Type of contract: **MSA**

Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide psychological, pyschoeducational and various other cognitive assessment services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$300,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 05/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Not Applicable

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

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

    Not Applicable

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

    LLC

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

    Yes

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

    Yes

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

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/15/2019 08:12:42 AM
Division Approval	jthom17	05/15/2019 08:12:45 AM
Department Approval	jthom17	05/15/2019 08:12:47 AM
Contract Manager Approval	rvradenb	05/15/2019 08:34:59 AM
Budget Analyst Approval	aurruty	05/22/2019 17:29:48 PM
BOE Agenda Approval	lfree1	05/24/2019 15:27:46 PM
BOE Final Approval	Pending	

For Board Use Only
Date: 07/09/2019

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21993**

		Legal Entity Name:	Nieves B. Airado
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Nieves B. Airado dba Airado's Care**
Agency Code:	**MSA**	Address:	**4726 Plata Del Sol Dr.**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89121**
If "No" please explain:	Not Applicable	Contact/Phone:	Nieves Brito Airado 702-433-8820
		Vendor No.:	T32007988
		NV Business ID:	NV20141630040

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM167

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **NonMedical Provider**

5. Purpose of contract:
   This is a new contract to provide elder care assistance services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$600,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

No b. If "No", please explain:

Contractor name is a DBA of the legal entity.

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/29/2019 14:24:54 PM
Division Approval	jthom17	05/29/2019 14:24:57 PM
Department Approval	jthom17	05/29/2019 14:24:59 PM
Contract Manager Approval	rvradenb	05/29/2019 14:25:55 PM
Budget Analyst Approval	aurruty	06/07/2019 16:09:42 PM
BOE Agenda Approval	lfree1	06/10/2019 09:29:00 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: **22052**

		Legal Entity Name:	Olivia M. Beauford dba The Language Connection
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Olivia M. Beauford dba The Language Connection**
Agency Code:	**MSA**	Address:	**5250 Neil Rd #310 D**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno , NV 89502**
If "No" please explain:	Not Applicable	Contact/Phone:	Olivia M. Beauford 775-323-7883
		Vendor No.:	T32000095
		NV Business ID:	NV20141143250

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

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

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

Agency Reference #: RV359

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/10/2019**

Anticipated BOE meeting date 08/2019

Retroactive? **Yes**

If "Yes", please explain

The Purchasing Division on behalf of multiple state agencies, released a mandatory statewide RFQ for translation and interpretation services. This removed previously used vendors and created a back log of claims for divisions within DETR. This vendor was previously engaged with the state prior to the release of the statewide solicitation. To help address the back log of claims, we ask that this contract be approved as retroactive to support the services needed for language translation.

3. Termination Date: **01/15/2022**

Contract term: **2 years and 220 days**

4. Type of contract: **MSA**

Contract description: **Translation Services**

5. Purpose of contract:

This is a new contract to provide on-site and remote language translation services statewide.

6. NEW CONTRACT

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

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to support these required services.

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

The required services require certifications to facilitate translation and interpretation services in specialized situations.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 05/21/2019 Anticipated re-bid date: 06/15/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

    Not Applicable

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

    No

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

    No

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

    No If "Yes", please explain

    Not Applicable

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

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

    Department of Employment Training and Rehabilitation, work deemed satisfactory

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

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

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Sole Proprietor

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

    Yes

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

    No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

    Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstar2	06/11/2019 16:05:34 PM
Division Approval	mstar2	06/11/2019 16:05:38 PM
Department Approval	ldeloach	06/11/2019 16:27:15 PM
Contract Manager Approval	rvradenb	06/11/2019 16:30:46 PM
Budget Analyst Approval	lfree1	06/17/2019 14:48:59 PM
BOE Agenda Approval	lfree1	06/17/2019 14:49:02 PM
BOE Final Approval	Pending	

Steve Sisolak
Governor

Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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

MEMORANDUM

To:	Susan Brown, Director, Governor's Finance Office
From:	Kevin D. Doty, Administrator State Purchasing
Date:	6/07/2019
Subject:	Retroactive Memo – Olivia M Beauford dba The Language Connection

On December 4th, 2018 the Department of Administration, Purchasing Division awarded contracts to multiple vendors to provide services for Translation and Interpretation. The awarded statewide contracts are mandatory for state agencies use. This action removed previously contracted entities and individuals who provided The Department of Employment, Training and Rehabilitation (DETR), Bureau of Disabilities Adjudication (BDA) and Vocational Rehabilitation (VR) with onsite and on-demand translation for medical appointments and claims for the United States Social Security Administration (SSA) benefits. The awarded vendors have been unable to meet the demand or the availability to support the on-demand need for VR and the BDA. This has led to a backlog of claims resulting in an all stop for processing by two months. Without the retroactive status the final claim approval will not happen until after end of August 2019. The expectation to review and process claims for citizens seeking Federal benefits is less than 30 days. DETR is required by the Federal Government to immediately address this situation.

Therefore, the Nevada Department of Administration's Purchasing Division, in partnership with DETR, has recruited previous vendors and individuals to provide this continued support for the most vulnerable of Nevada's citizens. Olivia M. Beauford dba The Language Connection, is one of the vendors whose services in translation will allow for the current demands of the SSA and Rehabilitation Services Administration (RSA) to be addressed by VR and the BDA. Oliva M. Beauford is a sole proprietor and was challenged to meet the same requirements as the other vendors and entities awarded contracts on the Translation and Interpretation Services solicitation. After successful contract requirement negotiations, we are seeking to award Olivia M. Beauford with a retro-active contract so she may start work upon receiving the Vendor, The Deputy Attorney General, and the Purchasing Administrator's signatures anticipated to be June 10th, 2019.

We therefore request that this contract be accepted with a retroactive start date June 10th, 2019

Kevin D. Doty
Acting Administrator State Purchasing

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22005**

		Legal Entity Name:	Pilot Thomas Logistics
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Pilot Thomas Logistics**
Agency Code:	**MSA**	Address:	**995 McCarran Blvd.**
Appropriation Unit:	**9999 - All Categories**		**Suite 103**
Is budget authority available?:	**Yes**	City/State/Zip	**Sparks, NV 89115**
If "No" please explain:	Not Applicable	Contact/Phone:	Paul Anderson 775-848-0834
		Vendor No.:	PUR0004763
		NV Business ID:	NV20151241185

To what State Fiscal Year(s) will the contract be charged? **2020**

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

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

Agency Reference #: NF - RFQ 3064

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **01/31/2020**

Contract term: **214 days**

4. Type of contract: **MSA**

Contract description: **Bulk Fuel Purchase**

5. Purpose of contract:

This is a new contract to provide bulk fuel purchase and delivery services statewide on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$15,000,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for bulk fuel and delivery services.

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

The State does not employ bulk fuel and delivery services.

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):

River City Petroleum
Rebel Oil Company
Flyers Energy

b. Soliciation Waiver: **Not Applicable**

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

Pursuant to RFQ 3064 and in accordance with NRS 333, this vendor met the qualifications of the RFQ and is one of 10 vendors selected.

d. Last bid date: Anticipated re-bid date: 10/10/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Thomas is the currant contract holder for the RFP 3125, Fuel Cars Lock and previous contract under RFQ 3064 Bulk Fuel and Delivery Services.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-684-0175

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	06/04/2019 10:33:57 AM
Division Approval	jthom17	06/04/2019 10:34:01 AM
Department Approval	ldeloach	06/04/2019 10:53:42 AM
Contract Manager Approval	nfese1	06/04/2019 11:19:45 AM
Budget Analyst Approval	aurruty	06/10/2019 14:03:32 PM
BOE Agenda Approval	lfree1	06/10/2019 15:57:54 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: **21976**

		Legal Entity Name:	RURAL NEVADA COUNSELING
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**RURAL NEVADA COUNSELING**
Agency Code:	**MSA**	Address:	**720 S MAIN ST STE C**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**YERINGTON, NV 89447-2474**
If "No" please explain:	Not Applicable	Contact/Phone:	Tenea Smith 775/463-6597
		Vendor No.:	T80819840
		NV Business ID:	NV19731004866

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **3 years**

4. Type of contract: **MSA**

Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide substance abuse counseling services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$800,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/22/2019 10:19:51 AM
Division Approval	jthom17	05/22/2019 10:19:55 AM
Department Approval	jthom17	05/22/2019 10:19:59 AM
Contract Manager Approval	rvradenb	05/22/2019 14:32:57 PM
Budget Analyst Approval	lfree1	05/29/2019 11:00:06 AM
BOE Agenda Approval	lfree1	05/29/2019 11:00:09 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: **22015**

		Legal Entity Name:	STARK Medicine McKay, Khurana, Jeider, PLLC
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**STARK Medicine McKay, Khurana, Jeider, PLLC**
Agency Code:	**MSA**	Address:	**dba Nevada Mental Health**
Appropriation Unit:	**9999 - All Categories**		**8845 W. Flamingo Rd. St. 210**
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89148**
If "No" please explain:	Not Applicable	Contact/Phone:	Ken McKay 7024408430
		Vendor No.:	T27042884
		NV Business ID:	NV20181844109

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM167

2. Contract start date:

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

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **3 years**

4. Type of contract: **MSA**

Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide applied behavioral analysis services statewide.

6. NEW CONTRACT

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

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	06/04/2019 10:24:06 AM
Division Approval	jthom17	06/04/2019 10:24:08 AM
Department Approval	jthom17	06/04/2019 10:24:11 AM
Contract Manager Approval	rvradenb	06/04/2019 10:25:29 AM
Budget Analyst Approval	aurruty	06/08/2019 15:19:49 PM
BOE Agenda Approval	lfree1	06/10/2019 09:26:34 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: **22014**

		Legal Entity Name:	STARK Medicine McKay, Khurana, Jeider, PLLC
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**STARK Medicine McKay, Khurana, Jeider, PLLC**
Agency Code:	**MSA**	Address:	**dba Nevada Mental Health**
Appropriation Unit:	**9999 - All Categories**		**8845 W. Flamingo Rd. St. 210**
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89148**
If "No" please explain:	Not Applicable	Contact/Phone:	Ken McKay 702-440-8430
		Vendor No.:	T27042884
		NV Business ID:	NV20181844109

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: RM107

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **Medical Providers**

5. Purpose of contract:
   This is a new contract to provide psychiatry services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$600,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 03/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	06/04/2019 10:24:25 AM
Division Approval	jthom17	06/04/2019 10:24:28 AM
Department Approval	jthom17	06/04/2019 10:24:31 AM
Contract Manager Approval	rvradenb	06/04/2019 10:25:04 AM
Budget Analyst Approval	aurruty	06/08/2019 15:15:11 PM
BOE Agenda Approval	lfree1	06/10/2019 09:27:51 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: **21972**

		Legal Entity Name:	Sarina Kay Ross
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Sarina Kay Ross**
Agency Code:	**MSA**	Address:	**3759 Autumn Colors Drive**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Elko, NV 89801**
If "No" please explain:	Not Applicable	Contact/Phone:	Sarina Ross 775-385-9403
		Vendor No.:	T29041362
		NV Business ID:	NV20181725683

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: TB165

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/13/2019**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**

Contract term: **2 years and 353 days**

4. Type of contract: **MSA**

Contract description: **Job Development**

5. Purpose of contract:

This is a new contract to provide job development and occupational training services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$250,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

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

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 05/30/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

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

Yes

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

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/29/2019 11:17:03 AM
Division Approval	jthom17	05/29/2019 11:17:06 AM
Department Approval	jthom17	05/29/2019 11:17:09 AM
Contract Manager Approval	tsmit2	05/29/2019 11:18:03 AM
Budget Analyst Approval	lfree1	05/29/2019 11:56:23 AM
BOE Agenda Approval	lfree1	05/29/2019 11:56:25 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: **21444**

		Amendment Number:	**1**
		Legal Entity Name:	TAHOE HOUSE FAMILY SERVICES, LLC
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**TAHOE HOUSE FAMILY SERVICES, LLC**
Agency Code:	**MSA**	Address:	**650 HILLCREST DR**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89509-3655**
If "No" please explain:	Not Applicable	Contact/Phone:	Wade Skipper 775/378-6722
		Vendor No.:	T32006531
		NV Business ID:	NV20141690880

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

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

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

Agency Reference #: RM167

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/12/2019**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2022**

Contract term: **3 years and 111 days**

4. Type of contract: **MSA**

Contract description: **NonMedical Provider**

5. Purpose of contract:

This is the first amendment to the original contract to provide group home services statewide. This amendment increases the maximum amount from $250,000 to $1,000,000 due to a higher than expected need for these services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$250,000.00	$250,000.00	$250,000.00	Yes - Action
2.	Amount of current amendment (#1):	$750,000.00	$750,000.00	$750,000.00	Yes - Action
3.	New maximum contract amount:	$1,000,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency does not have the personnel to provide these services.

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

This is a specialized service that must be provided by specially trained individuals.

9. Were quotes or proposals solicited? No

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

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

b. Soliciation Waiver: **Not Applicable**

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

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstewa10	05/31/2019 11:40:15 AM
Division Approval	mstewa10	05/31/2019 11:40:18 AM
Department Approval	mstewa10	05/31/2019 11:40:21 AM
Contract Manager Approval	rvradenb	06/14/2019 13:22:16 PM
Budget Analyst Approval	aurruty	06/14/2019 15:36:54 PM
BOE Agenda Approval	lfree1	06/17/2019 14:50:44 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21950**

		Legal Entity Name:	Universal Education Company dba UEC USA
Agency Name:	**MSA MASTER SERVICE AGREEMENTS**	Contractor Name:	**Universal Education Company dba UEC USA**
Agency Code:	**MSA**	Address:	**2470 Saint Rose Parkway, suite**
Appropriation Unit:	**9999 - All Categories**		
Is budget authority available?:	**Yes**	City/State/Zip	**Henderson, NV 89074**
If "No" please explain:	Not Applicable	Contact/Phone:	Victor Kwan 702-997-5788
		Vendor No.:	
		NV Business ID:	NV20151600875

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

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

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

Agency Reference #: TB165

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years**

4. Type of contract: **MSA**
   Contract description: **Job Development**

5. Purpose of contract:
   This is a new contract to provide job development services statewide.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$300,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? Yes
   a. List the names of vendors that were solicited to submit proposals (include at least three):

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

d. Last bid date: 05/30/2018 Anticipated re-bid date: 05/15/2018

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	05/15/2019 08:08:38 AM
Division Approval	jthom17	05/15/2019 08:08:41 AM
Department Approval	jthom17	05/15/2019 08:08:45 AM
Contract Manager Approval	rvradenb	05/15/2019 08:35:12 AM
Budget Analyst Approval	lfree1	05/24/2019 14:53:47 PM
BOE Agenda Approval	lfree1	05/24/2019 14:53:50 PM
BOE Final Approval	Pending	

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	LEGAL WINGS, INC.	GENERAL	$45,000	
	Contract Description:	This is a new contract to provide ongoing courier services for the Las Vegas Office.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21991		
2.	030	ATTORNEY GENERAL'S OFFICE - NATIONAL SETTLEMENT ADMINISTRATION	TRANSUNION RISK & ALTERNATIVE	OTHER: SETTLEMENT FUNDS	$36,880	
	Contract Description:	This is a new contract to provide ongoing public records search services and access to Transunion's TLO Data system for the Investigations and Extraditions Units. This tool provides public records information access for use in locating witnesses, victims and subjects and provides background information on persons relative to active investigations, such as vehicles, liens, collections, limited criminal history, prior addresses, associates, family, etc., as well as searches of relevant social media information.				
		Term of Contract:	05/01/2018 - 04/30/2022	Contract # 21973		
3.	040	SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE	TRUEIT	GENERAL	$29,782	
	Contract Description:	This is the second amendment to the original contract which provides technical and functional remote support for the Microsoft Dynamics GreatPlains system used as the accounting and business management software suite. This amendment extends the termination date from June 30, 2019 to June 30, 2020 and provides additional hours of service and support for FY 19 to enable go-live integration for the e-SOS replacement project, provides for continued services for FY 20.				
		Term of Contract:	03/23/2017 - 06/30/2020	Contract # 18474		
4.	040	SECRETARY OF STATE'S OFFICE - NOTARY TRAINING - NON-EXEC	ICS LEARNING GROUP, INC.	FEE: NOTARY	$24,995	
	Contract Description:	This is the third amendment to the original contract which provides a detailed design of the Secretary of State's Electronic Notary Training Course. This amendment extends the termination date from June 30, 2019 to June 30, 2020 and increases the maximum amount from $24,995 to $49,990 due to the continued need for these services.				
		Term of Contract:	05/04/2017 - 06/30/2020	Contract # 18465		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	B&L BACKFLOW TESTING SPECIALIST, LLC	OTHER: BUILDING RENT	$20,000	
	Contract Description:	This is the first amendment to the original contract which provides ongoing backflow testing repair and cleaning services for state-owned facilities in the northern Nevada area. This amendment increases the maximum amount from $20,000 to $40,000 due to higher than projected usage.				
		Term of Contract:	05/01/2017 - 04/30/2021	Contract # 18545		
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	BRET ALLEN DBA NEWT CONCRETE CONSTRUCTION	OTHER: BUILDING RENT	$39,382	
	Contract Description:	This is a new contract to provide for concrete repair, removal, and maintenance to sidewalks, driveways, and walkways as needed for state-owned facilities in the northern Nevada area.				
		Term of Contract:	05/24/2019 - 04/30/2023	Contract # 21752		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - BUILDINGS AND GROUNDS	STATEWIDE TRAFFIC SAFETY & SIGNS, INC.	OTHER: BUILDING RENT	$25,000	
	Contract Description:	This is a new contract to provide traffic control devices as-needed for state-owned buildings in southern Nevada.				
		Term of Contract:	05/24/2019 - 03/30/2023	Contract # 21690		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	FRAME ARCHITECTURE, INC.	BONDS	$15,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Governor's Mansion Roof Membrane Replacement CIP project, to include roofing design and consulting services for the installation of a single-ply roofing membrane to of the Governor's Building and Operations Building in Carson City: CIP Project No. 17-S01-10I; SPWD Contract No. 112615.				
		Term of Contract:	05/24/2019 - 06/30/2022	Contract # 21962		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	KONAKIS ENGINEERING, LLC	GENERAL	($10,055)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Youth Training Center Water System Feasibility Study: CIP Project No. 15-S04(D); SPWD Contract No. 110318. This amendment decreases the maximum amount from $27,600 to $17,545 to complete the task and close out the contract. There are no outstanding obligations remaining on this contract.				
		Term of Contract:	05/12/2016 - 06/30/2019	Contract # 17720		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PURCELL KROB ELECTRICAL PROFESSIONALS	GENERAL	($10,139)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering cost estimating services in support of the development of the 2017 CIP: CIP Project No. 15-S04; SPWD Contract No. 110330. This amendment decreases the maximum amount from $15,000 to $4,861.25 due to the close out the contract. There are no outstanding obligations remaining on this contract.				
		Term of Contract:	05/11/2016 - 06/30/2019	Contract # 17764		
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS DIVISION	SAAREM CONSULTING ENGINEERS, LLC	OTHER: AGENCY FUNDED CIP	$31,800	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Nevada Army National Guard Army Aviation Support Facility - Rooftop HVAC Unit Replacement CIP project, to include the replacement of 41 rooftop heating ventilation and air conditioning units, in-duct hot water heating coils, and the temperature control systems serving the facility: CIP Project No. 19-A012; SPWD Contract No. 112600.				
		Term of Contract:	05/24/2019 - 06/30/2023	Contract # 21917		
12.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	ERMIAS ABRAHAM	OTHER: CHARGES FOR SERVICES/WORKERS COMP	$49,998	
	Contract Description:	This is a new contract to provide ongoing professional translation and interpreter services.				
		Term of Contract:	07/01/2019 - 06/30/2021	Contract # 22002		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
13.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	JORGE RODRIGUEZ	OTHER: CHARGES FOR SERVICES/WORKERS COMP	$49,998	
	Contract Description:	This is a new contract to provide ongoing professional translation and interpreter services.				
		Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21776		
14.	130	DEPARTMENT OF TAXATION	RS CONSULTING SERVICES, LLC	GENERAL	$29,250	
	Contract Description:	This is a new contract to develop the Nevada Census website.				
		Term of Contract:	06/13/2019 - 09/30/2019	Contract # 22034		
15.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - COMPUTER FACILITY	KML ENTERPRISES CAREER DEVELOPMENT, LLC DBA NEW HORIZONS LEARNING GROUP	GENERAL	$24,995	
	Contract Description:	This is a new contract to provide on-site training classes.				
		Term of Contract:	06/05/2019 - 06/30/2019	Contract # 21996		
16.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	SCHNEIDER ELECTRIC BUILDINGS AMERICAS, INC.	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	$12,000	
	Contract Description:	This is a new contract to provide remote monitoring of heating ventilation and air conditioning control systems and ensure the systems are functioning properly and at greatest efficiency.				
		Term of Contract:	06/01/2019 - 05/31/2022	Contract # 21956		
17.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	SCHNEIDER ELECTRIC BUILDINGS AMERICAS, INC.	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	$12,777	
	Contract Description:	This is a new contract to provide maintenance and service on air conditioning and vacuum systems.				
		Term of Contract:	07/01/2019 - 06/30/2020	Contract # 21958		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
18.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	ESMERALDA COUNTY LIBRARIES	OTHER: REVENUE	$15,700	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21727		
19.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	MINERAL COUNTY LIBRARY	OTHER: REVENUE	$42,000	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21726		
20.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	PERSHING COUNTY LIBRARY	OTHER: REVENUE	$39,500	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21723		
21.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	SIERRA NEVADA COLLEGE - PRIM LIBRARY	OTHER: REVENUE	$25,700	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/23/2023	Contract # 21722		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
22.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	STOREY COUNTY COMMUNITY LIBRARY	OTHER: REVENUE	$12,600	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21729		
23.	332	DEPARTMENT OF ADMINISTRATION - STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS - LIBRARY COOPERATIVE	TONOPAH LIBRARY DISTRICT	OTHER: REVENUE	$19,000	
	Contract Description:	This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21717		
24.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	DELTA FIRE SYSTEMS, INC.	GENERAL	$17,214	
	Contract Description:	This is the first amendment to the original contract which provides ongoing quarterly and annual fire alarm inspections of Buildings 25 and 26 on the agency campus pursuant to Nevada State Fire Marshal licensing and Joint Commission accreditation requirements. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $14,290 to $31,504 due to the continued need for these services. Additionally, this amendment adds buildings 1, 3 and 5 plus emergency services to the scope of services.				
		Term of Contract:	09/01/2017 - 06/30/2021	Contract # 18872		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
25.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	ENVIRONMENTAL RESOURCES, INC.	GENERAL	$24,000	
	Contract Description:	This is the first amendment to the original contract which provides plumbing services on a 24/7 basis on the Reno campus. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $24,000 to $48,000 due to the continued need for these services.				
		Term of Contract:	11/20/2017 - 06/30/2021	Contract # 19262		
26.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	CARAHSOFT TECHNOLOGY CORPORATION	FEDERAL	$15,011	
	Contract Description:	This is the second amendment to the original work plan which provides a cloud-hosted software application used to track Naloxone, including licensing, subscription and various activities to set up and deploy the application. This amendment increases the maximum amount from $27,767.80 to $49,775.90 due to an increase in software licenses.				
		Term of Contract:	07/03/2018 - 06/30/2020	Contract # 20322		
27.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - COMMUNITY HEALTH SERVICES	LANDER COUNTY	OTHER: REVENUE	$22,040	
	Contract Description:	This is the first amendment to the original revenue interlocal agreement which provides individual and family health services utilizing the state's community health nurses and adds the new county assessment to the scope of work. The amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $91,582 to $113,622 due to the continued need for these services.				
		Term of Contract:	07/01/2017 - 06/30/2021	Contract # 19289		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
28.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	RENO CARSON MESSENGER SERVICE, INC.	OTHER: STATE SHARE OF COLLECTIONS 34% FEDERAL 66%	$49,128	
	Contract Description:	This is a new contract to provide ongoing courier services for legal documents.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21859		
29.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ENERGY ASSISTANCE PROGRAM	THREE SQUARE	OTHER: UNIVERSAL ENERGY CHARGE 68% FEDERAL 32%	$11,080	
	Contract Description:	This is a new contract to provide ongoing services for intake sites to provide application assistance for home energy benefits to low income and senior populations.				
		Term of Contract:	06/17/2019 - 06/30/2022	Contract # 21872		
30.	431	OFFICE OF THE MILITARY	ETCHEMENDY ENGINEERING, INC.	GENERAL 50% FEDERAL 50%	$49,800	Professional Service
	Contract Description:	This is a new contract to provide mechanical engineering and related services on an as needed basis for Nevada National Guard facilities.				
		Term of Contract:	05/24/2019 - 06/21/2021	Contract # 21768		
31.	431	OFFICE OF THE MILITARY	FIRE PROTECTION SERVICE DBA MOUNTAIN ALARM	FEDERAL	$48,000	
	Contract Description:	This is a new contract to provide ongoing certified alarm system monitoring and dispatching services for all arms, ammunition, explosive, and mission-essential areas at Nevada Guard facilities throughout the state in accordance with National Army Guard regulations.				
		Term of Contract:	05/30/2019 - 06/01/2023	Contract # 21985		
32.	431	OFFICE OF THE MILITARY	FENCING SPECIALISTS, INC.	FEDERAL	$12,016	
	Contract Description:	This is a new contract to provide installation security fencing for Nevada National Guard location in Las Vegas.				
		Term of Contract:	05/24/2019 - 05/01/2020	Contract # 21902		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
33.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	RIDGE HOUSE, INC.	FEDERAL	$47,812	Professional Service
	Contract Description:	This is a new contract to provide ongoing re-entry services for a minimum of 48 inmates scheduled to be released from the Warm Springs Correctional Center. Services are part of Nevada's strategic recidivism reduction plan to assist offenders with the completion of a re-entry plan as they prepare to transition from incarceration to the community.				
		Term of Contract:	10/01/2018 - 09/30/2019	Contract # 21908		
34.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	RIDGE HOUSE, INC.	GENERAL	$24,897	
	Contract Description:	This is a new contract to provide ongoing re-entry services for a minimum of 48 inmates scheduled to be released from the Northern Nevada Transitional Housing. Services are part of Nevada's strategic recidivism reduction plan to assist offenders with the completion of a re-entry plan as they prepare to transition from incarceration to the community.				
		Term of Contract:	07/01/2018 - 12/31/2019	Contract # 21868		
35.	550	DEPARTMENT OF AGRICULTURE - VETERINARY MEDICAL SERVICES	LIFE TECHNOLOGIES CORPORATION	GENERAL	$38,310	
	Contract Description:	This is a new contract to provide ongoing preventative maintenance on the animal disease lab testing equipment.				
		Term of Contract:	06/12/2019 - 06/30/2022	Contract # 21963		
36.	550	DEPARTMENT OF AGRICULTURE - AGRICULTURE ADMINISTRATION	AMERICAN CHILLER SERVICE, INC.	OTHER: COST ALLOCATION	$15,446	
	Contract Description:	This is a new contract to provide ongoing preventative maintenance of the heating, ventilation, and air conditioning central plant equipment.				
		Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21984		
37.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	BONNIE J. WILLERS	HIGHWAY	$49,680	
	Contract Description:	This is a new contract to provide professional assistance to optimize the capabilities of the vehicle fleet management system.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 21967		
38.	652	DEPARTMENT OF PUBLIC SAFETY - DIVISION OF PAROLE AND PROBATION	USOFT B.V.	GENERAL	$12,000	
	Contract Description:	This is a new contract to provide a software upgrade to the Offender Tracking Information System.				
		Term of Contract:	05/24/2019 - 06/30/2019	Contract # 21663		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
39.	702	DEPARTMENT OF WILDLIFE - WILDLIFE CIP - NON-EXEC	CARDNO	BONDS	$47,598	Professional Service
	Contract Description:	This is a new contract to provide civil engineering design services at Marlette Lake located in Washoe County.				
		Term of Contract:	05/24/2019 - 12/31/2020	Contract # 21595		
40.	702	DEPARTMENT OF WILDLIFE - HABITAT	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNIVERSITY OF NEVADA, RENO	FEE: HABITAT CONSERVATION	$19,777	
	Contract Description:	This is a new interlocal contract to provide analysis on timelines and potential causes of pika extirpation across northwestern Nevada.				
		Term of Contract:	06/07/2019 - 06/30/2020	Contract # 21388		
41.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	BLUE SUN BOAT RENTALS, LLC	OTHER: REVENUE	$10,000	
	Contract Description:	This is a new revenue contract to rent up to four power boats to visitors from Lake Tahoe Nevada State Park.				
		Term of Contract:	06/07/2019 - 10/01/2019	Contract # 22008		
42.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	MUTINY DIVERS	OTHER: REVENUE	$10,000	
	Contract Description:	This is a new contract to provide scuba classes and tours at Lake Tahoe Nevada State Park.				
		Term of Contract:	06/13/2019 - 04/30/2020	Contract # 22038		
43.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	NEVADA ADVENTURES, LLC	OTHER: REVENUE	$10,000	
	Contract Description:	This is a new revenue contract to provide kayak, paddleboard, snowshoe, hiking and mountain bike tours to visitors at Lake Tahoe Nevada State Park.				
		Term of Contract:	06/07/2019 - 04/30/2020	Contract # 22024		
44.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	TAHOE BOAT RENTALS, LLC	OTHER: REVENUE	$10,000	
	Contract Description:	This is a new revenue contract to provide boat rentals to visitors at Lake Tahoe Nevada State Park.				
		Term of Contract:	06/12/2019 - 10/01/2019	Contract # 22025		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
45.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	TAHOE JETOVATOR, LLC	OTHER: REVENUE	$10,000	
	Contract Description:	This is a new revenue contract to provide motorized watercrafts to visitors at Lake Tahoe Nevada State Park.				
		Term of Contract:	06/07/2019 - 10/01/2019	Contract # 22011		
46.	742	DEPARTMENT OF BUSINESS AND INDUSTRY - DIVISION OF INDUSTRIAL RELATIONS	BOARD OF REGENTS NEVADA SYSTEM OF HIGHER EDUCATION OBO - UNIVERSITY OF NEVADA, RENO	OTHER: WORKERS' COMPENSATION SAFETY FUND	$11,750	
	Contract Description:	This is a new interlocal contract to provide consultation and technical assistance regarding compliance with the Americans with Disabilities Act, concerning the provision of effective communication, auxiliary aids and service, and modifications of policies and procedures.				
		Term of Contract:	10/15/2018 - 01/31/2022	Contract # 21961		
47.	749	DEPARTMENT OF BUSINESS AND INDUSTRY - ATHLETIC COMMISSION	FRANCISCO J. SOTO	FEE: ATHLETIC COMMISSION GATE FEES 90% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 10%	$20,000	Exempt
	Contract Description:	This is a new contract to provide unarmed combat inspector services during Athletic Commission weigh-ins and events.				
		Term of Contract:	06/10/2019 - 06/30/2023	Contract # 21710		
48.	749	DEPARTMENT OF BUSINESS AND INDUSTRY - ATHLETIC COMMISSION	YEE ADVANCED ORTHOPEDICS & SPORTS MEDICINE, LLC	GENERAL	$18,750	
	Contract Description:	This is the first amendment to the original contract which provides medical records review and research related to unarmed combat. This amendment extends the termination date from June 30, 2019 to September 30, 2019 and increases the maximum amount from $300,000 to $318,750 due to the continued need for these services				
		Term of Contract:	07/01/2015 - 09/30/2019	Contract # 16660		
49.	756	DEPARTMENT OF BUSINESS AND INDUSTRY - DIVISION OF MORTGAGE LENDING	STEVE SPYROPOULOS	GENERAL 19.7% FEE: LICENSING 80.3%	$29,995	
	Contract Description:	This is a new contract to provide information system documentation services, addressing in detail the requirements and business rules for the Division of Mortgage Lending and the Real Estate Division.				
		Term of Contract:	05/23/2019 - 06/28/2019	Contract # 21960		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
50.	810	DEPARTMENT OF MOTOR VEHICLES - AUTOMATION	GARTNER, INC.	HIGHWAY	$30,506	Sole Source
	Contract Description:	This is a new Work Plan under Master Service Agreement contract #18964 which provides research and advisory services related to information technology to the Department of Motor Vehicles, Vehicle Information Technology Division, to include, but not limited to, providing information about best practices related to cloud services, mobile application development, network design, system strategy, and modernizing computer application solutions.				
		Term of Contract:	05/24/2019 - 06/30/2020	Contract # 21829		
51.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	ADVANCED PRO REMEDIATION, LLC	OTHER: BUSINESS ENTERPRISE SET-ASIDE	$15,000	
	Contract Description:	This is a new contract to provide ongoing emergency on-call remediation/restoration services for the Business Enterprise of Nevada food service locations in southern Nevada.				
		Term of Contract:	10/01/2019 - 09/30/2023	Contract # 21957		
52.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	VORTEX INDUSTRIES, INC.	OTHER: BUSINESS ENTERPRISE SET-ASIDE	$10,000	
	Contract Description:	This is the second amendment to the original contract which provides ongoing maintenance and repair of air curtain doors, automatic doors, gates and grills, commercial roll up doors, overhead doors, entrance doors and loading dock equipment at all Business Enterprise of Nevada locations in southern Nevada. This amendment increases the maximum amount from $7,000 to $17,000 due to the continued need for these services. This amendment also inserts the attachment "Provisions for Contracts under Federal Awards" into Incorporated Documents due to new Federal requirements.				
		Term of Contract:	01/11/2017 - 12/31/2020	Contract # 18166		
53.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	BOARD OF REGENTS NEVADA SYSTEM OF HIGHER EDUCATION OBO - WESTERN NEVADA COLLEGE	GENERAL 21.3% FEDERAL 78.7%	$26,285	
	Contract Description:	This is a new interlocal agreement to provide Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).				
		Term of Contract:	05/28/2019 - 06/30/2021	Contract # 21570		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
54.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	BOARD OF REGENTS NEVADA SYSTEM OF HIGHER EDUCATION OBO - TRUCKEE MEADOWS COMMUNITY COLLEGE	GENERAL 21.3% FEDERAL 78.7%	$29,010	
	Contract Description:	This is a new interlocal agreement to provide Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).				
		Term of Contract:	06/10/2019 - 09/30/2020	Contract # 21914		
55.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	ODYSSEY CHARTER SCHOOL OF NEVADA	GENERAL 21.3% FEDERAL 78.7%	$20,280	
	Contract Description:	This is a new interlocal agreement to provide Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).				
		Term of Contract:	05/31/2019 - 06/30/2020	Contract # 21782		
56.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - VOCATIONAL REHABILITATION	WASHOE COUNTY SCHOOL DISTRICT	GENERAL 21.3% FEDERAL 78.7%	$12,000	
	Contract Description:	This is a new interlocal agreement to provide Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).				
		Term of Contract:	05/31/2019 - 05/31/2020	Contract # 21964		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
57.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY DIVISION	BRIGGS ELECTRIC, INC.	GENERAL 1.9% OTHER: 29.1% FEDERAL 69%	$20,000	
	Contract Description:	This is the first amendment to the original contract which provides electrical services for agencies in northern Nevada on an as needed basis. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $10,500 to $30,500 due to the continued need for these services. This amendment inserts the attachment "Provisions for Contracts under Federal Award" into Incorporated documents due to new Federal requirements.				
		Term of Contract:	05/16/2017 - 06/30/2021	Contract # 18717		

For Board Use Only
Date: 06/04/2019

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21991**

		Legal Entity Name:	LEGAL WINGS, INC.
Agency Name:	**ATTORNEY GENERAL'S OFFICE**	Contractor Name:	**LEGAL WINGS, INC.**
Agency Code:	**030**	Address:	**DOCUMENT SERVICES**
Appropriation Unit:	**1030-04**		**1118 Freemont St.**
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89101**
If "No" please explain:	Not Applicable	Contact/Phone:	702-384-0305
		Vendor No.:	T80945612A
		NV Business ID:	NV19841012894

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

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

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

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **Courier Service**

5. Purpose of contract:
   This is a new contract to provide ongoing courier services for the Attorney General's Las Vegas Office.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$45,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   Legal Wings will provide courier services for the Las Vegas Offices of the Attorney General to various courts.

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 this type of service

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Action Process Service
   Legal Process Service
   Legal Wings
   LPS
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   Legal Wings was reasonable in pricing and consistent in services provided.

d. Last bid date: 02/08/2019 Anticipated re-bid date: 02/08/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

The Office of the Attorney General has used Legal Wings and they have provided satisfactory service.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cschonl1	05/30/2019 09:17:23 AM
Division Approval	cschonl1	05/30/2019 09:17:25 AM
Department Approval	cschonl1	05/30/2019 09:17:30 AM
Contract Manager Approval	cschonl1	05/30/2019 09:19:18 AM
Budget Analyst Approval	jrodrig9	06/04/2019 23:17:56 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21973**

		Legal Entity Name:	TRANSUNION RISK & ALTERNATIVE
Agency Name:	**ATTORNEY GENERAL'S OFFICE**	Contractor Name:	**TRANSUNION RISK & ALTERNATIVE**
Agency Code:	**030**	Address:	**DATA SOLUTIONS, INC.**
Appropriation Unit:	**1045-23**		**PO BOX 209047**
Is budget authority available?:	**Yes**	City/State/Zip	**DALLAS, TX 75320-9047**
If "No" please explain:	Not Applicable	Contact/Phone:	561-208-9158
		Vendor No.:	T32002776A
		NV Business ID:	NV19991001068

To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	**X**	Other funding	**100.00 % Settlement funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/01/2018**
   Anticipated BOE meeting date 07/2019

   Retroactive? **Yes**

   If "Yes", please explain

   We request this contract to be retroactive to May 1, 2018 due to the lengthy negotiations that it has taken to finalize the terms with the contractor.

3. Termination Date: **04/30/2022**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **Public records datab**

5. Purpose of contract:

   This is a new contract that provides ongoing public records searche services and access to Transunion's TLO Data system for the Investigations and Extraditions Units. This tool provides public records information access for use in locating witnesses, victims and subjects and provides background information on persons relative to active investigations, such as vehicles, liens, collections, limited criminal history, prior addresses, associates, family, etc., as well as searches of relevant social media information.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$36,880.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

   The Investigations Unit often needs assistance in matters to locate people using a public records search or using research for prior address locations. This database will allow them to properly research individuals to aide their investigations brought forth from a continuous flow of complaints and subsequent criminal investigations.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

   State employees do not have the expertise needed.

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):

Lexis Nexis
Accurint
Transunion, LLC

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Transunion, LLC was selected over the other two companies because it was more cost effective and a more accurate product for the research that it would be used for.

d. Last bid date: 09/01/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Shaun Bowen, Deputy Chief Investigator Ph: 775-684-1187

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cschonl1	05/21/2019 13:15:33 PM
Division Approval	cschonl1	05/21/2019 13:15:35 PM
Department Approval	cschonl1	05/21/2019 13:15:37 PM
Contract Manager Approval	cschonl1	05/21/2019 13:15:38 PM
Budget Analyst Approval	jrodrig9	05/24/2019 18:42:01 PM

File Name: BA 1045 Controact 21973 - Retro Memo.doc PDF Conversion Status is Pending

For Board Use Only
Date: 06/06/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18474**

		Amendment Number:	**2**
		Legal Entity Name:	TRUEIT
Agency Name:	**SECRETARY OF STATE'S OFFICE**	Contractor Name:	**TRUEIT**
Agency Code:	**040**	Address:	**745 31ST AVE E STE 120**
Appropriation Unit:	**1050-26**		
Is budget authority available?:	**Yes**	City/State/Zip	**WEST FARGO, ND 58078-8327**
If "No" please explain:	Not Applicable	Contact/Phone:	ERIN MARR 402-875-5741
		Vendor No.:	T29041933
		NV Business ID:	NV20191178539

To what State Fiscal Year(s) will the contract be charged? **2017-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/23/2017**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**
   Contract term: **3 years and 100 days**
4. Type of contract: **Contract**
   Contract description: **Remote Support**
5. Purpose of contract:

This is the second amendment to the original contract which provides technical and functional remote support for the Microsoft Dynamics GreatPlains system used as the accounting and business management software suite. This amendment provides additional hours of service and support for FY 19 to enable go-live integration for the e-SOS replacement project, provides for continued services for FY 20 and extends the termination date from June 30, 2019 to June 30, 2020.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$9,975.00	$9,975.00	$9,975.00	No
	a. Amendment 1:	$9,975.00	$19,950.00	$19,950.00	Yes - Info
2.	Amount of current amendment (#2):	$29,782.50	$29,782.50	$49,732.50	Yes - Info
3.	New maximum contract amount:	$49,732.50			
	and/or the termination date of the original contract has changed to:	06/30/2020			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Microsoft Dynamics GP System will provide technical and functional remote support by a qualified individual with extensive knowledge specific to the implementation and configuration of the Secretary of State's need and the ability to provide remote support.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no agency or State employees who are specifically trained on Microsoft Dynamics Great Plains System used by the Secretary of State as the accounting and business management software.

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. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLP

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	shudder	05/16/2019 15:16:40 PM
Division Approval	shudder	05/16/2019 15:16:44 PM
Department Approval	shudder	05/16/2019 15:16:48 PM
Contract Manager Approval	svaldez	05/30/2019 14:37:25 PM

EITS Approval	daxtel1	05/31/2019 15:01:22 PM
Budget Analyst Approval	lfree1	06/06/2019 10:58:57 AM

For Board Use Only
Date: 06/11/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18465**

Amendment Number: **3**

Legal Entity Name: ICS Learning Group INC

Agency Name: **SECRETARY OF STATE'S OFFICE**
Agency Code: **040**
Appropriation Unit: **1057-12**
Is budget authority available?: **Yes**
If "No" please explain: Not Applicable

Contractor Name: **ICS Learning Group INC**
Address: **822 Ritchie Hwy**
City/State/Zip **Pasadena, MD 21122**
Contact/Phone: 410-975-9440
Vendor No.: PUR0005722
NV Business ID: NV20171260565

To what State Fiscal Year(s) will the contract be charged? **2017-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	**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 **05/04/2017**
   Anticipated BOE meeting date 07/2020

Retroactive? **No**
If "Yes", please explain
Not Applicable

3. Previously Approved Termination Date: **07/01/2019**
   Contract term: **3 years and 58 days**

4. Type of contract: **Contract**
   Contract description: **E-Notary Contract**

5. Purpose of contract:
This is the third amendment to the original contract which provides a detailed design of the Secretary of State's Electronic Notary Training Course. This amendment extends the termination date from June 30, 2019 to June 30, 2020 and increases the maximum amount from $24,995 to $49,990 due to the continued need for these services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$24,995.00	$24,995.00	$24,995.00	Yes - Info
	a. Amendment 1:	$0.00	$0.00	$24,995.00	No
	b. Amendment 2:	$0.00	$0.00	$24,995.00	No
2.	Amount of current amendment (#3):	$24,995.00	$24,995.00	$49,990.00	Yes - Info
3.	New maximum contract amount:	$49,990.00			
	and/or the termination date of the original contract has changed to:	06/30/2020			

II. JUSTIFICATION

7. What conditions require that this work be done?
Statutory Compliance with NRS 240.195 The Electronic Notarization Act

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the resources or the expertise to provide these services

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Other

Non-Title 7 business

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	shudder	05/30/2019 10:06:41 AM
Division Approval	shudder	05/30/2019 10:06:44 AM
Department Approval	shudder	05/30/2019 10:06:48 AM
Contract Manager Approval	svaldez	06/10/2019 16:05:33 PM
Budget Analyst Approval	aurruty	06/11/2019 09:58:46 AM

For Board Use Only
Date: 05/30/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18545**

Amendment Number: **1**

Legal Entity Name: B&L BACKFLOW TESTING SPECIALIST LLC

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**

Contractor Name: **B&L BACKFLOW TESTING SPECIALIST LLC**

Agency Code: **082**

Address: **PO BOX 4867**

Appropriation Unit: **1349-12**

Is budget authority available?: **Yes**

City/State/Zip **INCLINE VILLAGE, NV 89450-4867**

If "No" please explain: Not Applicable

Contact/Phone: 775-831-0123

Vendor No.: T80999361

NV Business ID: NV20021021494

To what State Fiscal Year(s) will the contract be charged? **2017-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Building Rent Income Revenue**

Agency Reference #: ASD 2465483

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/01/2017**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **04/30/2021**

Contract term: **4 years**

4. Type of contract: **Contract**

Contract description: **Backflow testing**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing backflow testing repair and cleaning services for state-owned facilities in the northern Nevada area. This amendment increases the maximum amount from $20,000 to $40,000 due to higher than projected usage and continue need for these services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$20,000.00	$20,000.00	$20,000.00	Yes - Info
2.	Amount of current amendment (#1):	$20,000.00	$20,000.00	$40,000.00	Yes - Info
3.	New maximum contract amount:	$40,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

This work is required by the State Health Department to protect potable water systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of manpower, equipment and experience.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of multiple backflow testing contractors on file with Buildings and Grounds. Per SAM 0338.0 each contractor will be contracted to submit bids for available jobs.

d. Last bid date: 03/01/2017 Anticipated re-bid date: 03/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

2002 to current Building and Grounds, service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	05/09/2019 14:32:55 PM
Division Approval	ssands	05/09/2019 14:33:00 PM
Department Approval	ssands	05/09/2019 14:33:05 PM
Contract Manager Approval	ssands	05/28/2019 16:09:48 PM
Budget Analyst Approval	jrodrig9	05/30/2019 23:29:44 PM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21752**

		Legal Entity Name:	NEWT CONCRETE CONSTRUCTION
Agency Name:	**ADMIN - STATE PUBLIC WORKS DIVISION**	Contractor Name:	**Bret Allen, dba**
Agency Code:	**082**	Address:	**PO BOX 20104**
Appropriation Unit:	**1349-12**		
Is budget authority available?:	**Yes**	City/State/Zip	**CARSON CITY, NV 89721**
If "No" please explain:	Not Applicable	Contact/Phone:	775-851-2466
		Vendor No.:	T29035167
		NV Business ID:	NV20101212689

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**BUILDING RENTAL FEE REVENUE**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **04/30/2023**
   Contract term: **3 years and 342 days**

4. Type of contract: **Contract**
   Contract description: **Concrete**

5. Purpose of contract:
   This is a new contract which provides for concrete repair, removal, and maintenance to sidewalks, driveways, and walkways as needed for state-owned facilities in the northern Nevada area.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$39,382.00**
   Other basis for payment: Concrete worker, $64/per hour; concrete worker overtime $96/per hour; skidsteer w/operator $149/per hour; skidsteer w/ demo breaker 7 operator $249/per hour.

II. JUSTIFICATION

7. What conditions require that this work be done?
   To provide concrete repair, removal, and maintenance to sidewalks, driveways, and walkways at the request and approval of B&G personnel.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   B&G personnel does not have the expertise.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is an open-ended contract Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 03/06/2019 Anticipated re-bid date: 03/06/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Sole proprietor

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Michael Johnson, Facilities Manager Ph: 684-1880

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	05/07/2019 15:23:34 PM
Division Approval	ssands	05/07/2019 15:23:41 PM
Department Approval	ssands	05/07/2019 15:23:45 PM
Contract Manager Approval	ssands	05/07/2019 15:23:50 PM
Budget Analyst Approval	jrodrig9	05/24/2019 15:41:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21690**

		Legal Entity Name:	STATEWIDE TRAFFIC SAFETY & SIGNS, Inc.
Agency Name:	**ADMIN - STATE PUBLIC WORKS DIVISION**	Contractor Name:	**STATEWIDE TRAFFIC SAFETY & SIGNS, Inc.**
Agency Code:	**082**	Address:	**5035 SCHUSTER STREET**
Appropriation Unit:	**1349-12**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89118**
If "No" please explain:	Not Applicable	Contact/Phone:	702-318-7035
		Vendor No.:	PUR0005387
		NV Business ID:	NV20121712524

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Building Rental Income Revenue**

Agency Reference #: ASD 2831866

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **03/30/2023**
   Contract term: **3 years and 311 days**
4. Type of contract: **Contract**
   Contract description: **Traffic Control**
5. Purpose of contract:

This is a new contract to provide traffic control devices as-needed for state-owned buildings in southern Nevada.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$25,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings and Grounds are concerned with the safety, health and working conditions 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 equipment 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):

The Barricade Company
Statewide Traffic Safety & Signs
Master of Barricades

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

this is one of three vendors who perform the same service and per SAM 0338.0, all vendors will be asked to bid on projects as they become available.

d. Last bid date: 02/27/2019 Anticipated re-bid date: 01/27/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Martin Fisher, Facilities Manager Ph: 702-486-4099

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	05/01/2019 14:13:39 PM
Division Approval	ssands	05/01/2019 14:13:42 PM
Department Approval	ssands	05/01/2019 14:13:45 PM
Contract Manager Approval	ssands	05/01/2019 14:13:49 PM
Budget Analyst Approval	jrodrig9	05/24/2019 13:59:12 PM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21962**

		Legal Entity Name:	FRAME ARCHITECTURE, INC.
Agency Name:	**ADMIN - STATE PUBLIC WORKS DIVISION**	Contractor Name:	**FRAME ARCHITECTURE, INC.**
Agency Code:	**082**	Address:	**4090 S MCCARRAN BLVD. SUITE E**
Appropriation Unit:	**1585-43**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89502-7529**
If "No" please explain:	Not Applicable	Contact/Phone:	775-827-9977
		Vendor No.:	T29014981
		NV Business ID:	NV20031302154

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %	X	Bonds	**100.00 %**
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 112615

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years and 38 days**
4. Type of contract: **Contract**
   Contract description: **Arch/Eng**
5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Governor's Mansion Roof Membrane Replacement CIP project, to include roofing design and consulting services for the installation of a single-ply roofing membrane to of the Governor's Building and Operations Building in Carson City: CIP Project No. 17-S01-10I; SPWD Contract No. 112615.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$15,000.00**
   Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Lutz, Andrew, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/14/2019 15:05:21 PM
Division Approval	lmars1	05/14/2019 15:05:25 PM
Department Approval	lmars1	05/14/2019 15:05:29 PM
Contract Manager Approval	lmars1	05/14/2019 15:05:32 PM
Budget Analyst Approval	jrodrig9	05/24/2019 15:26:02 PM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17720**

Amendment Number: **1**

Legal Entity Name: Konakis Engineering, LLC

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**

Contractor Name: **Konakis Engineering, LLC**

Agency Code: **082**

Address: **225 Silver Street**
Suite 106

Appropriation Unit: **1585-41**

Is budget authority available?: **Yes**

City/State/Zip **Elko, NV 89801**

If "No" please explain: Not Applicable

Contact/Phone: Ferron Konakis 775-738-5319

Vendor No.:

NV Business ID: NV20061220904

To what State Fiscal Year(s) will the contract be charged? **2016-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 110318

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/12/2016**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **3 years and 49 days**

4. Type of contract: **Contract**

Contract description: **Arch/Eng Serv**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Youth Training Center Water System Feasibility Study: CIP Project No. 15-S04(D); SPWD Contract No. 110318. This amendment decreases the maximum amount from $27,600 to $17,545 to complete the task and closing out the contract. There are no outstanding obligation remaining on this contract.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$27,600.00	$27,600.00	$27,600.00	Yes - Info
2.	Amount of current amendment (#1):	-$10,055.00	-$10,055.00	$17,545.00	Yes - Info
3.	New maximum contract amount:	$17,545.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2015 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. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

   c. Why was this contractor chosen in preference to other?

   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    SPWD, currently and/or in the past for various amounts with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

    LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

    Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

    Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/13/2019 10:30:59 AM
Division Approval	lmars1	05/13/2019 10:31:03 AM
Department Approval	lmars1	05/13/2019 10:31:08 AM
Contract Manager Approval	lmars1	05/13/2019 10:31:12 AM
Budget Analyst Approval	jrodrig9	05/24/2019 14:10:25 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **17764**

		Amendment Number:	**1**
		Legal Entity Name:	PURCELL KROB ELECTRICAL PROFESSIONALS
Agency Name:	**ADMIN - STATE PUBLIC WORKS DIVISION**	Contractor Name:	**PURCELL KROB ELECTRICAL PROFESSIONALS**
Agency Code:	**082**	Address:	**dba, PK ELECTRICAL, INC.**
Appropriation Unit:	**1585-41**		**681 SIERRA ROSE DR., STE B**
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89511**
If "No" please explain:	Not Applicable	Contact/Phone:	775-826-9010
		Vendor No.:	T81016802
		NV Business ID:	NV19961128650

To what State Fiscal Year(s) will the contract be charged? **2016-2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 11030

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/11/2016**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**
   Contract term: **3 years and 50 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 professional architectural/engineering cost estimating services in support of the development of the 2017 CIP: CIP Project No. 15-S04; SPWD Contract No. 110330. This amendment decreases the maximum amount from $15,000 to $4,861.25 due to the close out of the contract. There are no outstanding obligations remaining on this contract.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$15,000.00	$15,000.00	$15,000.00	Yes - Info
2.	Amount of current amendment (#1):	-$10,138.75	-$10,138.75	$4,861.25	Yes - Info
3.	New maximum contract amount:	$4,861.25			

II. JUSTIFICATION

7. What conditions require that this work be done?

2015 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. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

   c. Why was this contractor chosen in preference to other?

   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    SPWD, currently and/or in the past for various amounts with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

    Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

    Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

    Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/29/2019 09:34:40 AM
Division Approval	lmars1	05/29/2019 09:34:45 AM
Department Approval	lmars1	05/29/2019 09:34:49 AM
Contract Manager Approval	lmars1	05/29/2019 09:34:53 AM
Budget Analyst Approval	jrodrig9	05/30/2019 23:10:41 PM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21917**

		Legal Entity Name:	SAAREM CONSULTING ENGINEERS, LLC
Agency Name:	**ADMIN - STATE PUBLIC WORKS DIVISION**	Contractor Name:	**SAAREM CONSULTING ENGINEERS, LLC**
Agency Code:	**082**	Address:	**2188 ALFRED WAY**
Appropriation Unit:	**All Appropriations**		
Is budget authority available?:	**No**	City/State/Zip	**CARSON CITY, NV 89703-7128**
If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3650, expenditure category 10, Army Facility.		Contact/Phone:	775-772-9846
		Vendor No.:	T32004288
		NV Business ID:	NV20151426231

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Agency Funded CIP**

Agency Reference #: 112600

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years and 38 days**
4. Type of contract: **Contract**
   Contract description: **Arch/Eng**
5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Nevada Army National Guard Army Aviation Support Facility - Rooftop HVAC Unit Replacement CIP project, to include the replacement of 41 rooftop Heating Ventilation/Air Conditioning units, in-duct hot water heating coils, and the temperature control systems serving the facility: CIP Project No. 19-A012; SPWD Contract No. 112600.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$31,800.00**
   Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Bassi, Brian, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/07/2019 08:10:55 AM
Division Approval	lmars1	05/07/2019 08:10:59 AM
Department Approval	lmars1	05/07/2019 08:11:03 AM
Contract Manager Approval	lmars1	05/07/2019 08:11:07 AM
Budget Analyst Approval	jrodrig9	05/24/2019 15:32:30 PM

For Board Use Only
Date: 06/14/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22002**

		Legal Entity Name:	ERMIAS ABRAHAM
Agency Name:	**ADMIN - HEARINGS AND APPEALS DIVISION**	Contractor Name:	**ERMIAS ABRAHAM**
Agency Code:	**089**	Address:	**343 RAVENSMERE AVE.**
Appropriation Unit:	**1015-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89123-7429**
If "No" please explain:	Not Applicable	Contact/Phone:	702-427-8215
		Vendor No.:	T29040295
		NV Business ID:	NV20191404338

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	**X**	Other funding	**100.00 % Charges for Services/Workers Comp**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 06/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Contract**
   Contract description: **Interpreter**

5. Purpose of contract:
   This is a new contract to provide professional translation and interpreter services.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$49,998.00**
   Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The Division is required by statute to provide interpreter services to non-English speaking injured workers to be properly represented in appeal hearings.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Employees do not have the language skills needed for this job.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

The vendor is one of several interpreters available to Hearings and Appeals

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Curiel, Vanessa, Admin. Assist Ph: 702-486-2525

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	06/12/2019 13:26:51 PM
Division Approval	lmars1	06/12/2019 13:26:54 PM
Department Approval	lmars1	06/12/2019 13:26:56 PM
Contract Manager Approval	lmars1	06/12/2019 13:26:59 PM
Budget Analyst Approval	cbrekken	06/14/2019 13:23:55 PM

For Board Use Only
Date: 05/31/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21776**

		Legal Entity Name:	JORGE RODRIGUEZ
Agency Name:	**ADMIN - HEARINGS AND APPEALS DIVISION**	Contractor Name:	**JORGE RODRIGUEZ**
Agency Code:	**089**	Address:	**PO BOX 31165**
Appropriation Unit:	**1015-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89173-1165**
If "No" please explain:	Not Applicable	Contact/Phone:	702-755-2232
		Vendor No.:	T29016727A
		NV Business ID:	NV20141157139

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Charges for Services/Workers Comp**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 06/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Contract**
   Contract description: **Interpreter**

5. Purpose of contract:
   This is a new contract to provide ongoing professional translation and interpreter services.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$49,998.00**
   Other basis for payment: Progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?
   The Division is required by statute to provide interpreter services to non-English speaking injured workers so that they are represented at appeals hearings

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Employees do have the needed language skills to complete the job.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

This contractor is one of several which provide interpreter services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Curiel, Vanessa, null Ph: 702-486-2525

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	05/28/2019 11:47:58 AM
Division Approval	lmars1	05/28/2019 11:48:01 AM
Department Approval	lmars1	05/28/2019 11:48:03 AM
Contract Manager Approval	lmars1	05/28/2019 11:48:06 AM
Budget Analyst Approval	cbrekken	05/31/2019 13:49:08 PM

For Board Use Only
Date: 06/13/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22034**

		Legal Entity Name:	RS CONSULTING SERVICES LLC
Agency Name:	**DEPARTMENT OF TAXATION**	Contractor Name:	**RS CONSULTING SERVICES LLC**
Agency Code:	**130**	Address:	**2318 COPPER SPRINGS DRIVE**
Appropriation Unit:	**2361-26**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89521**
If "No" please explain:	Not Applicable	Contact/Phone:	RAMESH SEGU 775/230-9871
		Vendor No.:	
		NV Business ID:	NV20061047362

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/13/2019**
   Anticipated BOE meeting date 08/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **09/30/2019**
   Contract term: **109 days**

4. Type of contract: **Contract**
   Contract description: **Census website**

5. Purpose of contract:
   This is a new contract to provide the development of the Nevada State Census website.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$29,250.00**
   Payment for services will be made at the rate of $130.00 per per hour

II. JUSTIFICATION

7. What conditions require that this work be done?
   This website accommodates the 2020 census survey and is scheduled to go live by July 2019.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   The contractor has the expertise to build the website scheduled to go live by July 2019.

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):
   RS Consulting Services LLC
   Link Technologies
   Multidots Inc.
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

This vendor was more experienced with census websites.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jgiesle2	06/10/2019 16:06:01 PM
Division Approval	jgiesle2	06/10/2019 16:06:03 PM
Department Approval	jgiesle2	06/10/2019 16:06:05 PM
Contract Manager Approval	hfield	06/10/2019 16:20:57 PM
EITS Approval	daxtel1	06/11/2019 20:18:57 PM
Budget Analyst Approval	aurruty	06/13/2019 08:55:53 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21996**

		Legal Entity Name:	KML ENTERPRISES CAREER DEVELOPMENT LLC DBA
Agency Name:	**ADMIN - ENTERPRISE IT SERVICES**	Contractor Name:	**KML ENTERPRISES CAREER DEVELOPMENT LLC DBA**
Agency Code:	**180**	Address:	**NEW HORIZONS LEARNING CENTERS**
Appropriation Unit:	**1385-30**		**1900 S. State College Blvd.100**
Is budget authority available?:	**Yes**	City/State/Zip	**Anaheim, CA 92806**
If "No" please explain:	Not Applicable	Contact/Phone:	David Hahn 775-300-7130
		Vendor No.:	T29038002A
		NV Business ID:	NV20161437429

To what State Fiscal Year(s) will the contract be charged? **2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/05/2019**

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Termination Date: **06/30/2019**

   Contract term: **25 days**

4. Type of contract: **Contract**

   Contract description: **On-Site Training**

5. Purpose of contract:

   This is a new contract which provides On-Site training classes.

6. NEW CONTRACT

   The maximum amount of the contract for the term of the contract is: **$24,995.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

   Training Courses "Project Management Skills for Non-Project Managers" and "Change Management" were chosen for the Enterprise IT Services, Open Systems Group, as an overall necessity in successfully completing daily tasks and projects, as well as giving understanding on how change is implemented and tools for managing reactions.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

   The State does not offer these specific courses.

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):

   KML Enterprises dba New Horizons Learning Grp
   Udemy
   Global Knowledge

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was able to offer these classes as an on-site training for the classes we needed.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Sean Montierth, Open Systems Manager Ph: 775-684-4313

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	06/03/2019 13:12:47 PM
Division Approval	ddav12	06/03/2019 13:12:51 PM
Department Approval	ddav12	06/03/2019 13:12:55 PM
Contract Manager Approval	ddav12	06/03/2019 13:12:58 PM
Budget Analyst Approval	cpalme2	06/05/2019 13:09:23 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21956**

		Legal Entity Name:	SCHNEIDER ELECTRIC BUILDINGS AMERICAS INC
Agency Name:	**DEPARTMENT OF VETERANS SERVICES**	Contractor Name:	**SCHNEIDER ELECTRIC BUILDINGS AMERICAS INC**
Agency Code:	**240**	Address:	**731 Pilot Roard**
Appropriation Unit:	**2561-07**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89119**
If "No" please explain:	Not Applicable	Contact/Phone:	Mike Ashworth 7028968300
		Vendor No.:	PUR0001005D
		NV Business ID:	NV20071402383

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %		Fees	0.00 %
X	Federal Funds	**65.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %	X	Other funding	**35.00 % Private/County**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **05/31/2022**
   Contract term: **3 years**
4. Type of contract: **Contract**
   Contract description: **HVAC Monitoring**
5. Purpose of contract:

This is a new contract to provide remote monitoring of HVAC control systems for the Southern Nevada State Veterans Home and ensure the systems are functioning properly and at the greatest efficiency.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$12,000.00**
   Other basis for payment: $3.438.00 - (Year 1); $3,541.40 (Year 2); $3,647.00 (Year 3) payable in quarterly installments

II. JUSTIFICATION

7. What conditions require that this work be done?

HVAC system controls at SNSVH are monitored remotely for proper function. The safety and well-being of the residents relies on proper functioning of these HVAC systems.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No State agencies or employees provide this service.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

ABS Systems - Las Vegas, NV
Schneider Electric Buildings America - Las Vegas, NV
Quality Mechanical - Las Vegas, NV

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best pricing; familiarity with systems.

d. Last bid date: 04/01/2019 Anticipated re-bid date: 03/25/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDVS/SNSVH. Vendor has performed services at the Southern Nevada State Veterans Home in the past and those services were performed satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	agarland	05/30/2019 10:08:39 AM
Division Approval	agarland	05/30/2019 10:08:42 AM
Department Approval	agarland	05/30/2019 10:08:45 AM
Contract Manager Approval	agarland	05/30/2019 14:36:21 PM
Budget Analyst Approval	bmacke1	05/30/2019 15:00:27 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21958**

		Legal Entity Name:	SCHNEIDER ELECTRIC BUILDINGS AMERICAS INC
Agency Name:	**DEPARTMENT OF VETERANS SERVICES**	Contractor Name:	**SCHNEIDER ELECTRIC BUILDINGS AMERICAS INC**
Agency Code:	**240**	Address:	**731 Pilot Road**
Appropriation Unit:	**2561-07**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89119**
If "No" please explain:	Not Applicable	Contact/Phone:	Mike Ashworth 702-896-8300
		Vendor No.:	PUR0001005D
		NV Business ID:	NV20071402383

To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %		Fees	0.00 %
X	Federal Funds	**65.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %	X	Other funding	**35.00 % Private/County**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2020**
   Contract term: **1 year**
4. Type of contract: **Contract**
   Contract description: **HVAC Maintenance**
5. Purpose of contract:

This is a new contract to provide maintenance and service on air conditioning and vacuum systems at the Southern Nevada State Veterans Home.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$12,777.00**
   Payment for services will be made at the rate of $1,064.75 per month
   Other basis for payment: equal monthly installment

II. JUSTIFICATION

7. What conditions require that this work be done?

Maintain proper working order of air conditioning equipment and vacuum system. Provide HVAC preventative maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Requires special skills and tools. No State agencies or employees provide this service.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Johnson Controls
Schneider Electric Buildings America's, Inc.
Envise

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best price and familiarity with the facility and equipment.

d. Last bid date: 03/29/2019 Anticipated re-bid date: 03/31/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDVS/SNSVH. Vendor has performed services at the Southern Nevada State Veterans Home in the past. Services were satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	agarland	05/30/2019 10:08:15 AM
Division Approval	agarland	05/30/2019 10:08:17 AM
Department Approval	agarland	05/30/2019 10:08:20 AM
Contract Manager Approval	agarland	05/30/2019 10:08:23 AM
Budget Analyst Approval	bmacke1	05/30/2019 14:39:28 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: **21727**

		Legal Entity Name:	ESMERALDA COUNTY LIBRARIES
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**ESMERALDA COUNTY LIBRARIES**
Agency Code:	**332**	Address:	**PO BOX 128**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**SILVERPEAK, NV 89047-0128**
If "No" please explain:	Not Applicable	Contact/Phone:	775-937-2215
		Vendor No.:	T81000318
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**

4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**

5. Purpose of contract:
   This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$15,700.00**
   Other basis for payment: FY20 $3,400; FY21 $3,700; FY22 $4,100 and FY23 $4,500

II. JUSTIFICATION

7. What conditions require that this work be done?
   NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cynthia O., Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 09:51:48 AM
Division Approval	ssands	06/06/2019 09:51:51 AM
Department Approval	ssands	06/06/2019 09:51:55 AM
Contract Manager Approval	ssands	06/06/2019 09:51:59 AM
Budget Analyst Approval	mtum1	06/12/2019 17:49:18 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21726**

		Legal Entity Name:	MINERAL COUNTY LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**MINERAL COUNTY LIBRARY**
Agency Code:	**332**	Address:	**PO BOX 1390**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**HAWTHORNE, NV 89415**
If "No" please explain:	Not Applicable	Contact/Phone:	775-945-2778
		Vendor No.:	
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**
4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**
5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$42,000.00**
   Other basis for payment: FY20 $9,000; FY21 $10,000; FY22 $11,000 and FY23 $12,000

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cynthia O., Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 09:49:32 AM
Division Approval	ssands	06/06/2019 09:49:34 AM
Department Approval	ssands	06/06/2019 09:49:38 AM
Contract Manager Approval	ssands	06/06/2019 09:49:42 AM
Budget Analyst Approval	mtum1	06/12/2019 17:48:31 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21723**

		Legal Entity Name:	PERSHING COUNTY LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**PERSHING COUNTY LIBRARY**
Agency Code:	**332**	Address:	**1125 CENTRAL**
Appropriation Unit:	**2895-00**		**PO BOX 781**
Is budget authority available?:	**Yes**	City/State/Zip	**LOVELOCK, NV 89419**
If "No" please explain:	Not Applicable	Contact/Phone:	775-273-2216
		Vendor No.:	T810033480
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**
4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**
5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$39,500.00**
   Other basis for payment: FY20 $8,750; FY21 $9,500; FY22 $10,250 and FY23 $11,000

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:
    Cynthia O., Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:
    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 09:52:47 AM
Division Approval	ssands	06/06/2019 09:52:50 AM
Department Approval	ssands	06/06/2019 09:52:53 AM
Contract Manager Approval	ssands	06/06/2019 09:52:56 AM
Budget Analyst Approval	mtum1	06/12/2019 17:47:31 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21722**

		Legal Entity Name:	SIERRA NEVADA COLLEGE - PRIM LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**SIERRA NEVADA COLLEGE - PRIM LIBRARY**
Agency Code:	**332**	Address:	**999 TAHOE BLVD.**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**INCLINE VILLAGE, NV 89451-9500**
If "No" please explain:	Not Applicable	Contact/Phone:	775-831-1314
		Vendor No.:	T40239300
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/23/2023**
   Contract term: **3 years and 358 days**
4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**
5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$25,700.00**
   Other basis for payment: FY20 $5,900; FY21 $6,300; FY22 $6,600 and FY23 $6,900

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:
    Cynthia O., Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:
    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/06/2019 09:50:48 AM
Division Approval	ssands	06/06/2019 09:50:51 AM
Department Approval	ssands	06/06/2019 09:50:54 AM
Contract Manager Approval	ssands	06/06/2019 09:50:57 AM
Budget Analyst Approval	mtum1	06/12/2019 17:46:26 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21729**

		Legal Entity Name:	STOREY COUNTY COMMUNITY LIBRARY
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**STOREY COUNTY COMMUNITY LIBRARY**
Agency Code:	**332**	Address:	**175 CAESON Street**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**VIRGINIA CITY, NV 89440**
If "No" please explain:	Not Applicable	Contact/Phone:	775-847-0956
		Vendor No.:	
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**
4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**
5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$12,600.00**

Other basis for payment: FY20 $2,850; FY21 $3,050; FY22 $3,250 and FY23 $3,450

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Cynthia O, Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	05/30/2019 15:34:44 PM
Division Approval	ssands	05/30/2019 15:34:47 PM
Department Approval	ssands	05/30/2019 15:34:50 PM
Contract Manager Approval	ssands	05/30/2019 15:44:15 PM
Budget Analyst Approval	mtum1	06/12/2019 17:42:48 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21717**

		Legal Entity Name:	TONOPAH LIBRARY DISTRICT
Agency Name:	**ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS**	Contractor Name:	**TONOPAH LIBRARY DISTRICT**
Agency Code:	**332**	Address:	**167 Central Street**
Appropriation Unit:	**2895-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**TONOPAH, NV 89049**
If "No" please explain:	Not Applicable	Contact/Phone:	775-482-3374
		Vendor No.:	T80044560G
		NV Business ID:	GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**County Participation Funds**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**
4. Type of contract: **Cooperative Agreement**
   Contract description: **Network of Libraries**
5. Purpose of contract:

This is a new revenue cooperative agreement that continues to provide a regional network of libraries known as the Nevada Library Cooperative for the improvement of library services and the sharing of resources.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$19,000.00**
   Other basis for payment: FY20 $4,300; FY21 $4,600; FY22 $4,900 and FY23 $5,200

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 379.147-379.150 permits the parties to maintain a regional network of libraries known as Nevada Library Cooperative through a joint agreement for the improvement of library services and sharing of resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Library Cooperative, created by an agreement under NRS 277.080-279 and NRS 379.150, is a consortium of libraries and related agencies that share vital library and technological resources. In order to meet this goal, member libraries pool their resources and collectively leverage their economic strength to do more together than one member could ever accomplish on their own.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    FY99 to present for Nevada State Library and Archives with good service.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

    Cynthia O, Director Nevada Library Cooperative Ph: 775-431-0097

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	05/14/2019 16:09:51 PM
Division Approval	ssands	05/14/2019 16:09:54 PM
Department Approval	ssands	05/14/2019 16:09:57 PM
Contract Manager Approval	ssands	05/14/2019 16:10:00 PM
Budget Analyst Approval	mtum1	06/12/2019 17:44:40 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18872**

Amendment Number: **1**

Legal Entity Name: DELTA FIRE SYSTEMS, INC

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**

Contractor Name: **DELTA FIRE SYSTEMS, INC**

Agency Code: **406**

Address: **1655 Marietta Way #106**

Appropriation Unit: **3162-07**

Is budget authority available?: **Yes**

City/State/Zip **Sparks, NV 89431**

If "No" please explain: Not Applicable

Contact/Phone: HARRY GLEDHILL 775-359-0396

Vendor No.: T80922753B

NV Business ID: NV19691001803

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: C 16021

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2017**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **3 years and 303 days**

4. Type of contract: **Contract**

Contract description: **Alarm Inspection**

5. Purpose of contract:

This is the first amendment to the original contract to provide ongoing quarterly/annual fire alarm inspections of Buildings 25 and 26 on the agency campus pursuant to Nevada State Fire Marshal licensing and Joint Commission accreditation requirements. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $14,290.00 to $31,504.00 due to the continued need for these services. Additionally, this amendment adds buildings 1, 3 and 5 plus emergency services to the scope of services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$14,290.00	$14,290.00	$14,290.00	Yes - Info
2.	Amount of current amendment (#1):	$17,214.00	$17,214.00	$31,504.00	Yes - Info
3.	New maximum contract amount:	$31,504.00			
	and/or the termination date of the original contract has changed to:	06/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The National Fire Protection Association (NFPA) requires that all fire protection systems be tested by personnel that are qualified and experienced in the inspection, testing and maintenance of fire systems. It is imperative these inspections be carried out to ensure the life, safety and well being of staff and patients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have certification for this type of work.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Delta Fire Systems
Desert Fire
Ferguson and Fire

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor is an authorized manufacturer repair and service company. It also provided the lowest cost for the services required.

d. Last bid date: 04/08/2017 Anticipated re-bid date: 12/27/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor for NNAMHS since 11/2017 - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	05/03/2019 14:17:02 PM

Division Approval	rmorse	05/03/2019 14:17:05 PM
Department Approval	mwinebar	06/04/2019 11:31:40 AM
Contract Manager Approval	rmorse	06/04/2019 15:48:43 PM
Budget Analyst Approval	afrantz	06/12/2019 11:38:07 AM

For Board Use Only
Date: 05/30/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19262**

Amendment Number: **1**

Legal Entity Name: ENVIRONMENTAL RESOURCES, INC.

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**

Contractor Name: **ENVIRONMENTAL RESOURCES, INC.**

Agency Code: **406**

Address: **DBA EASY ROOTER**
125 London Drive

Appropriation Unit: **3162-07**

Is budget authority available?: **Yes**

City/State/Zip **Sparks, NV 89434-5600**

If "No" please explain: Not Applicable

Contact/Phone: Dennis Smock 775/331-3636

Vendor No.: T81092524A

NV Business ID: NV19901008172

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: C 16016

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/20/2017**

Anticipated BOE meeting date 06/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **3 years and 222 days**

4. Type of contract: **Contract**

Contract description: **PLUMBING SERVICE**

5. Purpose of contract:

This is the first amendment to the original contract which provides plumbing services on a 24/7 on the Reno campus. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $24,000.00 to $48,000.00 to allow for a two year extension.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$24,000.00	$24,000.00	$24,000.00	Yes - Info
2.	Amount of current amendment (#1):	$24,000.00	$24,000.00	$48,000.00	Yes - Info
3.	New maximum contract amount:	$48,000.00			
	and/or the termination date of the original contract has changed to:	06/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

Northern Nevada Adult Mental Health Services and Lake's Crossing Center sewer lines are old and get clogged with tree root requiring heavy machinery to clear blockages. Due to the old interior plumbing, lines get blockages that require clearing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Maintenance staff can clean and/or service minor problems. The facility does not have the necessary equipment for severe problems.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Jet plumbing
Environmental Resources Inc., dba Easy Rooter
Roto Rooter

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor gives both facilities a preferred customer discount on labor and agreed to the labor costs over term of contract.

d. Last bid date: 07/18/2017 Anticipated re-bid date: 03/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor with DPBH since 2017 - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	04/08/2019 11:25:51 AM
Division Approval	rmorse	04/08/2019 11:25:55 AM
Department Approval	mwinebar	04/29/2019 08:28:56 AM

Contract Manager Approval	rmorse	05/10/2019 13:26:07 PM
Budget Analyst Approval	afrantz	05/30/2019 08:25:47 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: **20322**

Amendment Number: **2**

Legal Entity Name: CARAHSOFT TECHNOLOGY CORPORATION

Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**

Contractor Name: **CARAHSOFT TECHNOLOGY CORPORATION**

Agency Code: **406**

Address: **1860 MICHAEL FARADAY DR STE 100**

Appropriation Unit: **3170-20**

Is budget authority available?: **Yes**

City/State/Zip **RESTON, VA 20190-5328**

If "No" please explain: Not Applicable

Contact/Phone: Stephen Dickerson 703/673-3524

Vendor No.: PUR0004357

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	Fees	0.00 %
X	Federal Funds	**100.00 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: SA 16556

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/03/2018**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2020**

Contract term: **1 year and 363 days**

4. Type of contract: **Other (include description): MSA Work Plan**

Contract description: **Cloud Services**

5. Purpose of contract:

This is the second amendment to the original work plan which provides a cloud-hosted software application used to track Naloxone, including licensing and subscription and various activities to set up and deploy the application. This amendment increases the maximum amount from $27,767.80 to $49,775.90 due to an increase in software licenses.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$27,767.80	$27,767.80	$27,767.80	Yes - Info
	a. Amendment 1:	$6,997.30	$6,997.30	$34,765.10	No
2.	Amount of current amendment (#2):	$15,010.80	$22,008.10	$49,775.90	Yes - Info
3.	New maximum contract amount:	$49,775.90			

II. JUSTIFICATION

7. What conditions require that this work be done?

This service agreement allows for the hosting of the Salesforce software application to track the request and distribution of Naloxone units as required under the Opioid STR grant.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Hosted system software license and subscription which the State must order through an outside vendor.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Quotes and proposals were solicited for the Statewide bid through Purchasing Division.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This contract is under a master service agreement with Nevada State Purchasing since 9/17 - Satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	06/03/2019 13:47:50 PM
Division Approval	rmorse	06/03/2019 13:47:55 PM
Department Approval	mwinebar	06/05/2019 12:52:55 PM
Contract Manager Approval	rmorse	06/06/2019 13:35:30 PM
EITS Approval	daxtel1	06/06/2019 15:39:34 PM
Budget Analyst Approval	afrantz	06/12/2019 13:32:32 PM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19289**

		Amendment Number:	**1**
		Legal Entity Name:	Lander County
Agency Name:	**DHHS - PUBLIC AND BEHAVIORAL HEALTH**	Contractor Name:	**Lander County**
Agency Code:	**406**	Address:	**50 State Route 305**
Appropriation Unit:	**3224-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Battle Mountain, NV 89820**
If "No" please explain:	Not Applicable	Contact/Phone:	Keith Westengard 775-635-2885
		Vendor No.:	T40262000
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Revenue**

Agency Reference #: C 16126

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2017**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**
   Contract term: **4 years**

4. Type of contract: **Revenue Contract**
   Contract description: **Family Services**

5. Purpose of contract:

This is the first amendment to the original revenue interlocal agreement that continues to provide individual and family health services utilizing the state's community health nurses. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $91,582.00 to $113,622.00 due to the continued need for theses services. Additionally, this amendment adds the new county assessment to the scope of services.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$91,582.00	$91,582.00	$91,582.00	Yes - Action
2.	Amount of current amendment (#1):	$22,040.00	$22,040.00	$22,040.00	Yes - Info
3.	New maximum contract amount:	$113,622.00			
	and/or the termination date of the original contract has changed to:	06/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Public and Behavioral Health, Community Health 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. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The state and counties provide services to each other on a continuous basis - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	04/22/2019 10:28:42 AM
Division Approval	rmorse	04/22/2019 10:28:46 AM
Department Approval	mwinebar	06/05/2019 13:11:24 PM
Contract Manager Approval	rmorse	06/07/2019 14:55:34 PM
Budget Analyst Approval	afrantz	06/12/2019 13:31:29 PM

For Board Use Only
Date: 06/17/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21859**

		Legal Entity Name:	RENO CARSON MESSENGER SERVICE, INC.
Agency Name:	**DHHS - WELFARE AND SUPPORTIVE SERVICES**	Contractor Name:	**RENO CARSON MESSENGER SERVICE, INC.**
Agency Code:	**407**	Address:	**185 MARTIN ST.**
Appropriation Unit:	**3238-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89509**
If "No" please explain:	Not Applicable	Contact/Phone:	Johnno Lazetich 775-322-2424
		Vendor No.:	T60159830
		NV Business ID:	NV19931072732

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %		Fees	0.00 %
X	Federal Funds	**66.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %	X	Other funding	**34.00 % State Share of Collections**

Agency Reference #: 407

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 06/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**
4. Type of contract: **Contract**
   Contract description: **Courier Services**
5. Purpose of contract:

This is a new contract to provide ongoing courier services for legal documents in Northern Nevada and rural areas for the Child Support Enforcement Program.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$49,128.00**
   Other basis for payment: $597.00 per month for SFY 20-21; $1,450.00 per month for SFY 22-23

II. JUSTIFICATION

7. What conditions require that this work be done?

The Child Support Enforcement Program requires timely delivery of legal documents to the various Public Assistance Offices and District Attorney Offices in Northern Nevada. These documents, which expedite child support payments, medical benefits and other financial assistance to custodial parents and their children are important for enforcement of the regulations of the Child Support Program.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Child Support Enforcement Program staff do not have the resources to travel to the various Public Assistance Offices, Law Offices and Judicial Courts on an ongoing weekly basis.

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):

Bootleg Courier Co.
Aerotek
Reno Carson Messenger
TCs Courier

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Reno Carson Messenger Service was the only vendor to submit a proposal. This vendor has been providing ongoing courier services to the division in a satisfactory manner.

d. Last bid date: 03/15/2019 Anticipated re-bid date: 02/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with DWSS and providing satisfactory service.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Cathy Kaplan, Child Support Enforcement Program Chief Ph: 775) 684-0752

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorense	05/13/2019 13:10:37 PM
Division Approval	bberry	05/29/2019 16:51:27 PM
Department Approval	mwinebar	06/04/2019 08:07:07 AM
Contract Manager Approval	mpomerle	06/05/2019 11:03:10 AM
Budget Analyst Approval	laaron	06/17/2019 08:58:58 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21872**

		Legal Entity Name:	THREE SQUARE
Agency Name:	**DHHS - WELFARE AND SUPPORTIVE SERVICES**	Contractor Name:	**THREE SQUARE**
Agency Code:	**407**	Address:	**4190 N PECOS RD**
Appropriation Unit:	**4862-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89115-0187**
If "No" please explain:	Not Applicable	Contact/Phone:	Ruby Scott 702-909-5593
		Vendor No.:	T29016658
		NV Business ID:	NV20061789154

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %		Fees	0.00 %
X	Federal Funds	**32.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %	X	Other funding	**68.00 % Universal Energy Charge**

Agency Reference #: 407

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/17/2019**
   Anticipated BOE meeting date 06/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years and 14 days**
4. Type of contract: **Contract**
   Contract description: **EAP Intake Site**
5. Purpose of contract:

This is a new contract to provide ongoing services for intake sites to provide application assistance for home energy benefits to low income and senior populations.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$11,080.00**
   Payment for services will be made at the rate of $10.00 per completed application

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract allows allows for increased program access for applicants by collaboration with various entities to assist with the EAP application completion process.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

These various public and non-profit vendors assist with the EAP application process, which significantly decreases processing time by state employees.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Boys & Girls Club of Las Vegas
Food Bank of Northern Nevada
Three Square
Cappalappa Family Resource Center

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor is one of multiple qualified vendors selected to perform this service across the State to ensure EAP Assistance is more accessible to all Nevadans.

d. Last bid date: 06/04/2018 Anticipated re-bid date: 03/04/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has previously contracted with the Division of Welfare & Supportive Services for EAP Intake Site services and has provided satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Betsy Ransdell, SSPS III, Employment & Support Services Ph: (775) 684-0552

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dsorense	05/15/2019 08:26:38 AM
Division Approval	bberry	05/29/2019 16:51:43 PM
Department Approval	mwinebar	06/04/2019 13:10:56 PM
Contract Manager Approval	mpomerle	06/05/2019 11:25:14 AM
Budget Analyst Approval	laaron	06/17/2019 11:18:13 AM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21768**

		Legal Entity Name:	ETCHEMENDY ENGINEERING INC
Agency Name:	**ADJUTANT GENERAL & NATIONAL GUARD**	Contractor Name:	**ETCHEMENDY ENGINEERING INC**
Agency Code:	**431**	Address:	**10597 DOUBLE R BLVD**
Appropriation Unit:	**3650-10**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89521-8937**
If "No" please explain:	Not Applicable	Contact/Phone:	Brandon Etchemendy 775-853-3925
		Vendor No.:	T27040132
		NV Business ID:	NV20111683017

To what State Fiscal Year(s) will the contract be charged? **2019-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**50.00 %**	Fees	0.00 %
X	Federal Funds	**50.00 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/21/2021**
   Contract term: **2 years and 29 days**

4. Type of contract: **Contract**
   Contract description: **Mechanical**

5. Purpose of contract:
   This is a new contract to provide mechanical engineering and related services on an as needed basis for Nevada National Guard facilities.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$49,800.00**
   Payment for services will be made at the rate of $24,900.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?
   The Office of the Military has determined that having a contract with a mechanical engineering firm will expedite construction and renovations projects, allowing for timely completion of future armory and facility projects.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   State employees do not possess the certifications to provide these professional 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. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**
   c. Why was this contractor chosen in preference to other?

This vendor has the skillset and with past contractual services, has the schematics of the facilities for the Office of the Military, reducing the need to recreate these with other vendors.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has worked with our agency since 2017 along with State Public Works. The vendor has done satisfactory work for our agency and others.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ctyle1	04/22/2019 10:29:22 AM
Division Approval	ctyle1	04/22/2019 10:29:30 AM
Department Approval	ctyle1	04/22/2019 10:29:33 AM
Contract Manager Approval	twollan1	04/23/2019 09:32:23 AM
Budget Analyst Approval	jrodrig9	05/24/2019 18:04:22 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21985**

		Legal Entity Name:	FIRE PROTECTION SERVICE DBA
Agency Name:	**ADJUTANT GENERAL & NATIONAL GUARD**	Contractor Name:	**FIRE PROTECTION SERVICE DBA**
Agency Code:	**431**	Address:	**MOUNTAIN ALARM**
Appropriation Unit:	**3650-13**		**PO BOX 12487**
Is budget authority available?:	**Yes**	City/State/Zip	**OGDEN, UT 84412-2487**
If "No" please explain:	Not Applicable	Contact/Phone:	Heidi Huss 801-395-8762
		Vendor No.:	T27020878A
		NV Business ID:	NV20111727506

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	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 **05/30/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/01/2023**
   Contract term: **4 years and 3 days**

4. Type of contract: **Contract**
   Contract description: **Alarm Monitoring**

5. Purpose of contract:
   This is a new contract to provide ongoing certified alarm system monitoring and dispatching services for all arms, ammunition, explosive, and mission-essential areas at Nevada Guard facilities throughout the state in accordance with National Army Guard regulations.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$48,000.00**
   Payment for services will be made at the rate of $12,000.00 per year

II. JUSTIFICATION

7. What conditions require that this work be done?
   Army regulations AR191-11 require alarm system monitoring and dispatching services for the Nevada National Guard locations.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   State employees do not meet the U.L. listing requirements.

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):

Stanley Security
COPS Monitroing
Fire Protection Service

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor chosen has provided satisfactory service and the lowest qualified bidder.

d. Last bid date: 05/10/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The Office of the Military has contracted with this vendor in the past and found the services to be acceptable.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ctyle1	05/24/2019 11:40:45 AM
Division Approval	ctyle1	05/24/2019 11:40:47 AM
Department Approval	ctyle1	05/24/2019 11:40:51 AM
Contract Manager Approval	twollan1	05/24/2019 11:50:53 AM
Budget Analyst Approval	jrodrig9	05/30/2019 22:20:29 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21902**

		Legal Entity Name:	Fencing Specialists, Inc.
Agency Name:	**ADJUTANT GENERAL & NATIONAL GUARD**	Contractor Name:	**Fencing Specialists, Inc.**
Agency Code:	**431**	Address:	**3500 John Peter Lee**
Appropriation Unit:	**3650-10**		
Is budget authority available?:	**Yes**	City/State/Zip	**North Las Vegas, NV 89032**
If "No" please explain:	Not Applicable	Contact/Phone:	Todd Becker 702-644-3750
		Vendor No.:	T32008221
		NV Business ID:	NV19831002639

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	Fees	0.00 %
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 **05/24/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **05/01/2020**
   Contract term: **343 days**

4. Type of contract: **Contract**
   Contract description: **Security Fencing**

5. Purpose of contract:
   This is a new contract to install security fencing for Nevada National Guard location in Las Vegas.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$12,016.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The National Guard facility in Las Vegas requires more space to store equipment in a safe and secure area.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   State employees do not have the skills or tools to perform the install of the fences.

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):
   5 Star Fence Co.
   Fencing Specialists, Inc.
   Budget Fence Company
   Tiberti Fence Company
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

This vendor submitted a quote by the deadline and was the lowest qualified bidder.

d. Last bid date: 03/05/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ctyle1	05/03/2019 15:43:03 PM
Division Approval	ctyle1	05/03/2019 15:43:05 PM
Department Approval	ctyle1	05/03/2019 15:44:39 PM
Contract Manager Approval	twollan1	05/03/2019 15:56:50 PM
Budget Analyst Approval	jrodrig9	05/24/2019 15:43:35 PM

For Board Use Only
Date: 06/11/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21908**

		Legal Entity Name:	Ridge House Inc.
Agency Name:	**DEPARTMENT OF CORRECTIONS**	Contractor Name:	**Ridge House Inc.**
Agency Code:	**440**	Address:	**900 West 1st Street, Ste 200**
Appropriation Unit:	**3711-22**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89503-5587**
If "No" please explain:	Not Applicable	Contact/Phone:	Denise Everett 775-322-8941
		Vendor No.:	T80938781
		NV Business ID:	NV19821007967

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	Fees	0.00 %
X	Federal Funds	**100.00 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 440

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2018**
   Anticipated BOE meeting date 06/2019

Retroactive? **Yes**

If "Yes", please explain

Please see attached memo regarding the agency's reason for retroactive request.

3. Termination Date: **09/30/2019**
   Contract term: **364 days**
4. Type of contract: **Contract**
   Contract description: **Re-Entry Services**
5. Purpose of contract:

This is a new contract to provide ongoing re-entry services for a minimum of 48 inmates scheduled to be released from the Warm Springs Correctional Center. Provided services are part of Nevada's strategic recidivism reduction plan to assist offenders with the completion of a re-entry plan as they prepare to transition from incarceration to the community through the Reaching Inward to Succeed in my Environment (R.I.S.E.) program.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$47,811.50**

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada was awarded the Second Chance Grant Act Implementation Funding which requires the department to work with a community organization that will provide a range of services for offenders close to being released. Services include: employment, recovery, housing, education and as needed behavioral health, substance abuse and counseling services. This also meets the grant requirements for integrated service and to ensure continuity of care into the community with NDOC Parole and Probation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Historically, the department has outsourced these services in an effort to provide offenders with much needed tools from a qualified professional to reduce recidivism. The NDOC Re-Entry program does not perform these services and no other state agency or state employees offer these services in one comprehensive 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. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Ridge House Inc. has been a long-term collaborative community partner with the NDOC providing services to our Re-Entry program. As part of the SRR grant, Ridge House was listed specifically in the grant budget for year 1 and year 2 under contracts to provide services (Year 1 $41,322.00/Year 2 $65,887.36). Additionally, past RFP's were reviewed (including#7130) that documented that Ridge House was the only community provider that could provide those services. To put this into perspective, Ridge House has been providing services for our inmates during the first two years of the grant and due to additional funding availability we have the ability to extend those services into year 3. The SRR grant has certain requirements (treatment group vs control group) and since Ridge House has provided services to our control group for the majority of this grant, any deviation in our treatment model would skew the data being collected for that group. Ridge House has provided two years of reach in and release/re-entry services at SDCC and WSCC during this grant and has built relationships with the inmates, staff, and facilities that could not be replicated by utilizing another vendor.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	05/09/2019 13:35:49 PM
Division Approval	amonro1	05/13/2019 13:18:32 PM
Department Approval	sewart	05/28/2019 13:35:11 PM
Contract Manager Approval	vfajota	05/28/2019 16:56:49 PM
Budget Analyst Approval	bmacke1	06/11/2019 14:45:24 PM

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9912

Steve Sisolak
Governor

James Dzurenda
Director

Kim T. Thomas, J.D.
Deputy Director, Programs

State of Nevada
Department of Corrections

MEMORANDUM

Date: May 20, 2019

To: Bridgette Garrison, Governor's Finance Office

Through: Scott Ewart, Chief of Fiscal Services

From: Kim T. Thomas, J.D., Deputy Director of Programs

SUBJECT: Retroactive Contract – Ridge House

The Bureau of Justice provided the notice of grant award (NOGA) on September 21, 2018 for Supplement #2 of the Second Chance Act Grant Award. The Nevada Department of Corrections (NDOC) responded to the GMS Award 2016-CZ-BX-0015 on September 25, 2018, and immediately moved the processes forward for the completion of the grant awards and contracts as part of the Year 3 program activities.

NDOC's contracts, based on the original Year 2 award, ended on September 30, 2018, and the NDOC is not able to utilize funds for Year 2 of the Second Chnace Act Grant for Year 3, all activities are continuous and on-going.

As a result, NDOC is requesting retroactivity of the contracts to October 1, 2018, in compliance with the United States Department of Justice Grants Financial Guide. Recipients and sub-recipients are prohibited from comingling funds on either a program-by-program or project-by-project bases, which requires the NDOC to consider this as a "new" award. Funds specifically budgeted and/or received for one project may not be used to support another. The request of retroactivity works to ensure the NDOC is compliant with the activities of the federal award.

Please accept this information as justification for Ridge House's contract to be effective October 1, 2018

Thank you.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21868**

		Legal Entity Name:	Ridge House Inc.
Agency Name:	**DEPARTMENT OF CORRECTIONS**	Contractor Name:	**Ridge House Inc.**
Agency Code:	**440**	Address:	**900 West 1st Street, Suite 200**
Appropriation Unit:	**3711-15**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89503-5587**
If "No" please explain:	Not Applicable	Contact/Phone:	Denise Everett 775-322-8941
		Vendor No.:	T80938781
		NV Business ID:	NV19821007967

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 440

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2018**
   Anticipated BOE meeting date 05/2019

Retroactive? **Yes**

If "Yes", please explain

Ridge House has consistently provided pre-release and release services to the offenders at Northern Nevada Transitional Housing (NNTH) and is normally funded out of the NDOC Re-Entry budget. Due to their program support of Warm Springs Correctional Center for the Strategic Recidivism Reduction grant, and a change/vacancy in appropriate staffing, their renewal contract for NNTH was inadvertently combined with their grant funding. These contract services have been provided retro to July 1, 2018.

3. Termination Date: **12/31/2019**
   Contract term: **1 year and 183 days**
4. Type of contract: **Contract**
   Contract description: **Re-Entry Services**
5. Purpose of contract:

This is a new contract that provides ongoing offender assessments for a minimum of 45 NDOC inmates housed at Northern Nevada Transitional Housing. Provided services are part of Nevada's strategic recidivism reduction plan to assist offenders with the completion of a re-entry plan as they prepare for release from incarceration.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$24,897.18**

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada was awarded the Second Chance Grant Act Implementation Funding which requires the department to work with a community organization that will provide a range of services for offenders close to being released. These particular services have consistently been funded with general fund as part of NDOC Re-entry services. Services include: employment, recovery, housing, education and as needed behavioral health, substance abuse and counseling services. This also meets the grant requirements for integrated service and to ensure continuity of care into the community with NDOC Parole and Probation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Historically, the department has outsourced these services in an effort to provide offenders with much needed tools from a qualified professional to reduce recidivism. The NDOC Re-Entry program does not perform these services and no other state agency offers these services in one comprehensive 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. Soliciation Waiver: **Not Applicable**

   c. Why was this contractor chosen in preference to other?

   There are providers that offer different components , but we are limited on programs specifically for veterans and inmates, including housing sex offenders. It was determined that this vendor best meets the needs of the department for cost and services required.

   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

    Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

    Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

    Yes

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	05/03/2019 13:30:35 PM
Division Approval	amonro1	05/07/2019 07:53:34 AM
Department Approval	sewart	05/07/2019 11:09:45 AM
Contract Manager Approval	vfajota	05/28/2019 11:37:51 AM
Budget Analyst Approval	bmacke1	06/10/2019 10:58:41 AM

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9912

Steve Sisolak
Governor

James Dzurenda
Director

Kim T. Thomas, J.D.
Deputy Director, Programs

State of Nevada
Department of Corrections

MEMORANDUM

Date: May 20, 2019

To: Bridgette Garrison, Governor's Finance Office

Through: Scott Ewart, Chief of Fiscal Services

From: Kim T. Thomas, J.D., Deputy Director of Programs

SUBJECT: Retroactive Contract – Ridge House

Ridge House has been consistenly providing pre-release and release services to the offenders at Northern Nevada Transitional Housing (NNTH)and have normally been funded out of the Nevada Department of Corrections (NDOC) Re-Entry budget. Due to their program support of Warm Springs Correctional Center for the Strategic Recidivism Reduction grant in Year 1 and Year 2, and a change/vacancy in appropriate staffing, their renewal contract for NNTH was inadvertently combined with their grant funding request. As a result, NDOC is requesting retroactivity of this contract to July 1, 2018 to cover any services provided to the offenders at NNTH.

Please accept this information as justification for Ridge House's contract to be effective July 1, 2018

Thank you.

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21963**

		Legal Entity Name:	LIFE TECHNOLOGIES CORPORATION
Agency Name:	**DEPARTMENT OF AGRICULTURE**	Contractor Name:	**LIFE TECHNOLOGIES CORPORATION**
Agency Code:	**550**	Address:	**5781 Van Allen Way**
Appropriation Unit:	**4550-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**Carlsbad, CA 92008**
If "No" please explain: Not Applicable		Contact/Phone:	650/465-3785
		Vendor No.:	PUR0005131
		NV Business ID:	NV20101583781

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**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 **06/12/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2022**
   Contract term: **3 years and 19 days**

4. Type of contract: **Contract**
   Contract description: **PM 7500 PCR**

5. Purpose of contract:
   This is a new contract to provide ongoing preventative maintenance on the animal disease lab testing equipment.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$38,310.40**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The 7500 Fast PCR equipment requires periodic maintenance to maintain calibration for use in the Animal Disease Lab. This equipment tests for verification of numerous diseases that impact livestock.

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 skills, tools or experience to maintain the equipment for certification purposes.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   This vendor supports the lab equipment in use. Per the Purchasing Administrator, a solicitation waiver is not required for ongoing or continued licensing, maintenance and/or support for a system already purchased/installed and in use by the State.

d. Last bid date: 05/13/2019 Anticipated re-bid date: 04/30/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDA has been contracted with this vendor since 2012. The agency is very satisfied with their quality service and expertise.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbel1	05/29/2019 07:58:25 AM
Division Approval	bbel1	05/29/2019 07:58:27 AM
Department Approval	bbel1	05/29/2019 07:58:30 AM
Contract Manager Approval	melli2	06/11/2019 10:18:41 AM
Budget Analyst Approval	mtum1	06/12/2019 11:39:53 AM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21984**

		Legal Entity Name:	AMERICAN CHILLER SERVICE INC
Agency Name:	**DEPARTMENT OF AGRICULTURE**	Contractor Name:	**AMERICAN CHILLER SERVICE INC**
Agency Code:	**550**	Address:	**ACS**
Appropriation Unit:	**4554-07**		**PO BOX 1887**
Is budget authority available?:	**Yes**	City/State/Zip	**RANCHO CORDOVA, CA 95741-1887**
If "No" please explain:	Not Applicable	Contact/Phone:	916/457-7800
		Vendor No.:	PUR0005542A
		NV Business ID:	NV19921063155

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Cost Allocation**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years**

4. Type of contract: **Contract**
   Contract description: **HVAC central plant**

5. Purpose of contract:
   This is a new contract to provide ongoing preventative maintenance of the heating, ventilation, and air conditioning central plant equipment.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$15,446.00**
   Payment for services will be made at the rate of $7,723.00 per Year
   Other basis for payment: $1,930.75 qtrly/$7,723.00 annually/$15,446.00 two (2) year FY20/FY21

II. JUSTIFICATION

7. What conditions require that this work be done?
   Periodic preventative maintenance is performed to assure this part of the building's heating and air conditioning system continues to operate and to avoid any sudden major malfunctions.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   The Department of Agriculture staff does not have the expertise to perform this service.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   American Chiller Service, Inc.
   Gardner Engineering & Mechanical
   RHP Mechanical Systems

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

American Chiller Service, Inc. was the only vendor who responded to the solicitation and can perform all of the needed services.

d. Last bid date: 04/18/2019 Anticipated re-bid date: 10/31/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Agriculture, 03/01/2011 to present. Their knowledge of our system and the quality of work is excellent.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbel1	05/30/2019 10:52:12 AM
Division Approval	bbel1	05/30/2019 10:52:15 AM
Department Approval	bbel1	05/30/2019 10:52:18 AM
Contract Manager Approval	melli2	06/11/2019 14:24:35 PM
Budget Analyst Approval	mtum1	06/12/2019 11:41:04 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21967**

		Legal Entity Name:	WILLERS, BONNIE J.
Agency Name:	**DPS-HIGHWAY PATROL**	Contractor Name:	**WILLERS, BONNIE J.**
Agency Code:	**651**	Address:	**PO BOX 1628**
Appropriation Unit:	**4713-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**OJAI, CA 93024-1628**
If "No" please explain: Not Applicable		Contact/Phone:	503-320-7214
		Vendor No.:	T27028551A
		NV Business ID:	NV20151179210

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
X	Highway Funds	**100.00 %**	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **Optimize Software**

5. Purpose of contract:
   This is a new contract to provide professional assistance to optimize the capabilities of the division's vehicle fleet management system (Fleet Focus).

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$49,680.00**
   Other basis for payment: $115.00 per hour (Off-Site/Remote Rate) and $160.00 per hour (On-Site Rate) through June 30, 2021. Effective July 1, 2021, the new rates will increase to: $125.00 per hour (Off-Site/Remote Rate) and $170.00 per hour (On-Site Rate).

II. JUSTIFICATION

7. What conditions require that this work be done?
   Nevada Highway Patrol (NHP) staff do not have the expertise and require assistance with incorporating fuel data reporting and the creation and/or customization of existing reports which will allow NHP to manage fleet vehicles in the areas of parts, equipment replacement, fuel cost reporting, work order management, and cost per mile analysis.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   There are no employees in the State with the background and experience necessary to configure the application to generate the reports and queries needed.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Kimberly Hamiter (Asset Works, LLC)
Mercury Associates, Inc.
Bonnie Willers

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Bonnie Willers was the only vendor that responded to this bid.

d. Last bid date: 04/03/2019 Anticipated re-bid date: 04/03/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Roxana Gifford, Contract Manager Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmarti8	05/16/2019 15:57:16 PM
Division Approval	lgallow1	06/04/2019 06:14:55 AM
Department Approval	gmott	06/04/2019 08:40:02 AM
Contract Manager Approval	gmott	06/04/2019 08:40:09 AM
Budget Analyst Approval	jrodrig9	06/07/2019 23:17:15 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21663**

		Legal Entity Name:	USoft B.V.
Agency Name:	**DPS-PAROLE & PROBATION**	Contractor Name:	**USoft B.V.**
Agency Code:	**652**	Address:	**1 Jsselmeerweg 1 Naarden AA The Netherlands**
Appropriation Unit:	**3740-26**		
Is budget authority available?:	**Yes**	City/State/Zip	,
If "No" please explain:	Not Applicable	Contact/Phone:	Roel Spans 3135699-0699
		Vendor No.:	F00000417
		NV Business ID:	NV20191198551

To what State Fiscal Year(s) will the contract be charged? **2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2019**
   Contract term: **37 days**

4. Type of contract: **Contract**
   Contract description: **Software Upgrade**

5. Purpose of contract:
   This is a new contract to provide a software upgrade to the Offender Tracking Information System.

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 $12,000.00 per System Upgrade

II. JUSTIFICATION

7. What conditions require that this work be done?
   Parole and Probation (P&P) is using a mission critical application for their Offender Information Tracking System (OTIS).

   P&P needs to upgrade the application to the latest release of the USoft platform.

   This application is necessary for tracking Offenders and ensuring P&P conditions are met.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   USoft holds the exclusive license to this application.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Tami Beauregard, MA Ph: (775) 684-2617

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pokeefe	05/07/2019 07:36:12 AM
Division Approval	nkephart	05/07/2019 12:53:27 PM
Department Approval	cboegle	05/09/2019 10:56:51 AM
Contract Manager Approval	cboegle	05/09/2019 10:56:54 AM
EITS Approval	daxtel1	05/09/2019 15:44:12 PM
Budget Analyst Approval	jrodrig9	05/24/2019 10:04:37 AM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21595**

		Legal Entity Name:	Cardno
Agency Name:	**DEPARTMENT OF WILDLIFE**	Contractor Name:	**Cardno**
Agency Code:	**702**	Address:	**5496 Reno Corporate Drive**
Appropriation Unit:	**1511-16**		
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89511**
If "No" please explain:	Not Applicable	Contact/Phone:	775-828-4362
		Vendor No.:	
		NV Business ID:	NV20111772626

To what State Fiscal Year(s) will the contract be charged? **2019-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %	X	Bonds	**100.00 %**
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: 19-45

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **12/31/2020**
   Contract term: **1 year and 222 days**
4. Type of contract: **Contract**
   Contract description: **Civil Engineering**
5. Purpose of contract:

This is a new contract to provide civil engineering design services at Marlette Lake located in Washoe County.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$47,598.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Improvements needed to enhance trout spawning conditions and egg harvesting to support hatchery needs across the state.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Contractor has specialized expertise and software, as well as experience working in the Tahoe Basin.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

   b. Soliciation Waiver: **Professional Service (As defined in NAC 333.150)**
   c. Why was this contractor chosen in preference to other?

   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Travis Hawks, Biologist 3 Ph: 775-688-1677

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	03/05/2019 13:36:04 PM
Division Approval	tdoucett	03/06/2019 08:54:10 AM
Department Approval	eobrien	05/14/2019 13:34:55 PM
Contract Manager Approval	zcosio	05/24/2019 08:07:46 AM
Budget Analyst Approval	cpalme2	05/24/2019 09:26:41 AM

For Board Use Only
Date: 06/07/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21388**

		Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO UNR
Agency Name:	**DEPARTMENT OF WILDLIFE**	Contractor Name:	**BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO UNR**
Agency Code:	**702**	Address:	**1664 N. Virginia Street**
Appropriation Unit:	**4467-14**		**Mail Stop 186**
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89557**
If "No" please explain:	Not Applicable	Contact/Phone:	Thomas Dilts 775-784-1653
		Vendor No.:	
		NV Business ID:	Government Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	**100.00 %**	**Habitat Conservation**
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: 19-27

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/07/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2020**
   Contract term: **1 year and 24 days**
4. Type of contract: **Interlocal Agreement**
   Contract description: **Pika Analysis**
5. Purpose of contract:

This is a new interlocal contract to provide analysis on timelines and potential causes of pika extirpation across northwestern Nevada.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$19,777.00**
   Other basis for payment: after completion of work

II. JUSTIFICATION

7. What conditions require that this work be done?

The goal in this project is to further a comprehensive and multi-agency pika conservation strategy by leveraging past survey results to sponsor increased understanding of effective and long-term protection measures for a sensitive and rare species.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Department of Wildlife staff do not have the equipment necessary to conduct the required radiocarbon dating needed from this project.

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

University of Nevada, Reno
Trout Unlimited
Intermountain Bird Observatory

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

10%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently have multiple contracts with UNR, all have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

David Catalano, Biologist 4 Ph: 775-688-1412

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	12/18/2018 09:12:43 AM
Division Approval	tdoucett	02/26/2019 13:33:12 PM
Department Approval	eobrien	05/31/2019 13:55:45 PM
Contract Manager Approval	nroble1	06/07/2019 08:43:06 AM
Budget Analyst Approval	cpalme2	06/07/2019 09:29:39 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22008**

		Legal Entity Name:	Blue Sun Boat Rentals LLC
Agency Name:	**DCNR - PARKS DIVISION**	Contractor Name:	**Blue Sun Boat Rentals LLC**
Agency Code:	**704**	Address:	**356 Galaxy Lane Unit D**
Appropriation Unit:	**4162-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Stateline, NV 89449**
If "No" please explain:	Not Applicable	Contact/Phone:	William Schrader 614-530-1372
		Vendor No.:	
		NV Business ID:	NV20191288434

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Revenue Contract**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/07/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **10/01/2019**
   Contract term: **116 days**

4. Type of contract: **Revenue Contract**
   Contract description: **Powerboat Rentals**

5. Purpose of contract:
   This is a new revenue contract to rent up to four power boats to visitors from Lake Tahoe Nevada State Park.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$10,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   Vendor would like to rent out power boats to the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NA

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	06/03/2019 14:04:44 PM
Division Approval	sdecrona	06/03/2019 14:04:46 PM
Department Approval	sdecrona	06/03/2019 14:04:49 PM
Contract Manager Approval	sdecrona	06/03/2019 14:08:10 PM
Budget Analyst Approval	cpalme2	06/07/2019 08:52:30 AM

For Board Use Only
Date: 06/13/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22038**

		Legal Entity Name:	Mutiny Divers
Agency Name:	**DCNR - PARKS DIVISION**	Contractor Name:	**Mutiny Divers**
Agency Code:	**704**	Address:	**209 Kingsburry Grade Unit 1D**
Appropriation Unit:	**4162-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Stateline, NV 89449**
If "No" please explain:	Not Applicable	Contact/Phone:	Matthew Meunier 775884-3483
		Vendor No.:	
		NV Business ID:	NV20111568435

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Revenue**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/13/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **04/30/2020**
   Contract term: **322 days**

4. Type of contract: **Revenue Contract**
   Contract description: **Scuba Class & Tours**

5. Purpose of contract:
   This is a new contract to provide scuba classes and tours at Lake Tahoe Nevada State Park.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$10,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   A commercial operation want to operate in the park.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NA

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger Ph: 775-831-0494 ext 222

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	06/11/2019 09:31:15 AM
Division Approval	sdecrona	06/11/2019 09:31:17 AM
Department Approval	sdecrona	06/11/2019 09:31:20 AM
Contract Manager Approval	sdecrona	06/11/2019 09:32:41 AM
Budget Analyst Approval	cpalme2	06/13/2019 13:52:00 PM

For Board Use Only
Date: 06/07/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22024**

		Legal Entity Name:	Nevada Adventures, LLC.
Agency Name:	**DCNR - PARKS DIVISION**	Contractor Name:	**Nevada Adventures, LLC.**
Agency Code:	**704**	Address:	**930 Tahoe Blvd. Ste 36**
Appropriation Unit:	**4162-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Incline Village, NV 89451**
If "No" please explain:	Not Applicable	Contact/Phone:	Kevin Hickey 530-913-9212
		Vendor No.:	
		NV Business ID:	NV20181159660

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Revenue contract**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/07/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **04/30/2020**
   Contract term: **328 days**

4. Type of contract: **Revenue Contract**
   Contract description: **Athletic Tours**

5. Purpose of contract:
   This is a new revenue contract is to provide kayak, paddleboard, snowshoe, hiking and mountain bike tours at Sand Harbor and Spooner Lake State Parks to visitors.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$10,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   This is a commercial operation requesting use of the parks.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NA

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	06/06/2019 08:47:33 AM
Division Approval	sdecrona	06/06/2019 08:47:36 AM
Department Approval	sdecrona	06/06/2019 08:47:39 AM
Contract Manager Approval	sdecrona	06/06/2019 08:47:41 AM
Budget Analyst Approval	cpalme2	06/07/2019 08:41:21 AM

For Board Use Only
Date: 06/12/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22025**

		Legal Entity Name:	Tahoe Boat Rentals LLC
Agency Name:	**DCNR - PARKS DIVISION**	Contractor Name:	**Tahoe Boat Rentals LLC**
Agency Code:	**704**	Address:	**774 Mays 10-685**
Appropriation Unit:	**4162-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Incline Village, NV 89451**
If "No" please explain:	Not Applicable	Contact/Phone:	Scott Fontecchio 775-230-1116
		Vendor No.:	
		NV Business ID:	NV20121375750

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Revenue**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/12/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **10/01/2019**
   Contract term: **111 days**
4. Type of contract: **Revenue Contract**
   Contract description: **Boat Rentals**
5. Purpose of contract:

This is a new revenue contract to provide boat rentals at Lake Tahoe Nevada State Park to visitors.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$10,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

The vendor would like to rent out 4 powerboats at the park.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NA

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?

   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger Ph: 775-831-0494 Ext 222

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	06/11/2019 08:59:34 AM
Division Approval	sdecrona	06/11/2019 08:59:37 AM
Department Approval	sdecrona	06/11/2019 08:59:39 AM
Contract Manager Approval	sdecrona	06/11/2019 08:59:41 AM
Budget Analyst Approval	cpalme2	06/12/2019 11:07:45 AM

For Board Use Only
Date: 06/07/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22011**

		Legal Entity Name:	Tahoe Jetovator LLC
Agency Name:	**DCNR - PARKS DIVISION**	Contractor Name:	**Tahoe Jetovator LLC**
Agency Code:	**704**	Address:	**600 Village Blvd.**
Appropriation Unit:	**4162-00**		
Is budget authority available?:	**Yes**	City/State/Zip	**Incline Village, NV 89451**
If "No" please explain:	Not Applicable	Contact/Phone:	Eric Roe 530-359-8877
		Vendor No.:	
		NV Business ID:	NV20161353867

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Revenue Contract**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/07/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **10/01/2019**
   Contract term: **116 days**

4. Type of contract: **Revenue Contract**
   Contract description: **Motorized Watercraft**

5. Purpose of contract:
   This is a new revenue contract to provide motorized watercrafts to the visitors at Lake Tahoe State Park.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$10,000.00**

II. JUSTIFICATION

7. What conditions require that this work be done?
   The vendor wants to rent motorized watercrafts to visitors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   NA

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Not Applicable**
   c. Why was this contractor chosen in preference to other?
   d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	06/04/2019 08:45:46 AM
Division Approval	sdecrona	06/04/2019 08:45:48 AM
Department Approval	sdecrona	06/04/2019 08:45:52 AM
Contract Manager Approval	sdecrona	06/04/2019 08:45:54 AM
Budget Analyst Approval	cpalme2	06/07/2019 09:16:15 AM

For Board Use Only
Date: 06/10/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21961**

		Legal Entity Name:	BOARD OF REGENTS - UNR
Agency Name:	**B&I - INDUSTRIAL RELATIONS DIV**	Contractor Name:	**BOARD OF REGENTS - UNR**
Agency Code:	**742**	Address:	**1664 N VIRGINIA ST**
Appropriation Unit:	**4680-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89557**
If "No" please explain:	Not Applicable	Contact/Phone:	775/784-4997
		Vendor No.:	D35000816
		NV Business ID:	Government Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**100.00 % Workers' Compensation Safety Fund**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/15/2018**
   Anticipated BOE meeting date 07/2019

Retroactive? **Yes**

If "Yes", please explain

Services have begun pursuant to settlement agreement. UNR had been under the incorrect impression that the interlocal agreement was already approved.

3. Termination Date: **01/31/2022**
   Contract term: **3 years and 109 days**
4. Type of contract: **Interlocal Agreement**
   Contract description: **UNR Training**
5. Purpose of contract:

This is a new interlocal contract to provide consultation and technical assistance regarding compliance with the Americans with Disabilities Act, concerning the provision of effective communication, auxiliary aids and service, and modifications of policies and procedures.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$11,750.00**

Other basis for payment: Not to exceed $11,750. Any intervening end to an annual or biennial appropriation period shall be deemed an automatic renewal (not changing the overall Contract term) $6,875 for Principal Investigator (55 hours at $125/per hour, approximately 9 hrs/per month for 6 months); $1,875 for Consultant on Effective Communications (25 hours at $75/per hour); $3,000 for travel (3 LV trips for 1 person, flight and hotel for $2,250; 1 CC trip for 1 person, flight and hotel for $750)

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is a result of the Department of Labor Settlement Agreement CRC Complaint Number 09-NV-007 which requires the following actions to be taken: evaluate its policies, practices, and procedures with respect to the services, programs and activities provided by DIR, including but not limited to the hearings and appeals process, other individuals and persons who seek services, programs and activities from DIR, and members of the general public, in order to ensure its programs provide equally effective communications and equal opportunity for individuals who are deaf or hearing impaired.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

UNR is a State Entity

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

This is an intrastate contract between public agencies. This contractor is employed by the Nevada Attorney for Injured Workers.

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ljon13	05/23/2019 16:24:13 PM
Division Approval	ljon13	05/23/2019 16:24:15 PM
Department Approval	jhanse4	05/28/2019 11:19:01 AM
Contract Manager Approval	ljon13	06/10/2019 09:13:41 AM
Budget Analyst Approval	lfree1	06/10/2019 09:17:32 AM

STATE OF NEVADA – DEPT OF BUSINESS & INDUSTRY – DIVISION OF INDUSTRIAL RELATIONS

Administration

MEMORANDUM

DATE: May 23, 2019

TO: Andrew Urruty; Budget Analyst; Governor's Finance Office

FROM: Victoria Carreon; Deputy Administrator VC

SUBJECT: DIR and UNR – ADA Nevada Project Intrastate Contract

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The Division of Industrial Relations, Workers Compensation Section respectfully requests retroactive approval of the attached Intrastate Contract with the University of Nevada, Reno – Nevada Center for Excellence in Disabilities and the ADA Nevada Project. This is an Intrastate Contract that was entered into as a result of a Settlement Agreement with the United States Department of Labor as a result of a complaint filed by an individual with disabilities. UNR is a unique provider of this specialized ADA compliance training.

Once the contract was signed by both DIR and the UNR Center for Excellence in Disabilities, the vendor was under the impression the contract was approved and began work. The first bill was submitted at the end of April 2019.

The vendor has reviewed the Settlement Agreement and relevant details. He has met with appropriate personnel to confirm the scope of service. There have been on-site and off-site compliance reviews to include a complete audit of existing business practices to achieve an understanding of how the public interacts with DIR WCS and specifically how the complainant interacts with DIR WCS. Approximately 50-60% of the scope of work has been completed to date.

The proposed contract is for a maximum cost of $11,750 and will expire on January 31, 2022.

Your consideration is appreciated.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21710**

		Legal Entity Name:	SOTO, FRANCISCO J
Agency Name:	**B&I - ATHLETIC COMMISSION**	Contractor Name:	**SOTO, FRANCISCO J**
Agency Code:	**749**	Address:	**5966 TOPAZ ST**
Appropriation Unit:	**3952-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89120-2451**
If "No" please explain:	Not Applicable	Contact/Phone:	702/335-5409
		Vendor No.:	T32000422
		NV Business ID:	NV20111359866

To what State Fiscal Year(s) will the contract be charged? **2019-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	**90.00 % Athletic Commission Gate Fees**
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	**10.00 % Ticket Surcharge (Amateur Program)**

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/10/2019**
   Anticipated BOE meeting date 06/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2023**
   Contract term: **4 years and 21 days**

4. Type of contract: **Contract**
   Contract description: **Inspector Contract**

5. Purpose of contract:
   This is a new contract to provide unarmed combat inspector services during Athletic Commission weigh-ins and events. The contractor previously served as Chief Inspector through contract #19984, which has been terminated early at the contractor's request. A new Chief Inspector has been appointed through contract #21695.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$20,000.00**
   Other basis for payment: $50 per weigh-in, $150.00 per event $1,000 yearly to travel; not to exceed $20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?
   NRS 467.050 allows the Commission to utilize and employ inspectors as independent contractors

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Weigh-ins and events occur on evenings, weekends, and holidays. The Commission has a limited staff and would incur overtime to fulfill these obligations.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):
   Not Applicable
   b. Soliciation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

The vendor has knowledge of the rules and regulations of unarmed combat and has been previously contracted with the Athletic Commission. Performance is satisfactory.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	avance	06/05/2019 09:02:30 AM
Division Approval	avance	06/05/2019 09:02:31 AM
Department Approval	jhanse4	06/07/2019 14:43:06 PM
Contract Manager Approval	fmason	06/07/2019 15:19:31 PM
Budget Analyst Approval	aurruty	06/10/2019 15:55:38 PM

For Board Use Only
Date: 06/05/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **16660**

Amendment Number: **1**

Legal Entity Name: YEE ADVANCED ORTHOPEDICS & SPORTS MEDICINE, LLC

Agency Name: **B&I - ATHLETIC COMMISSION**

Contractor Name: **YEE ADVANCED ORTHOPEDICS & SPORTS MEDICINE, LLC**

Agency Code: **749**

Address: **8420 W WARM SPRINGS RD STE 100**

Appropriation Unit: **3952-04**

Is budget authority available?: **Yes**

City/State/Zip **LAS VEGAS, NV 89113**

If "No" please explain: Not Applicable

Contact/Phone: 702/740-5327

Vendor No.: T27018898

NV Business ID: NV20051281372

To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**100.00 %**	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: RFP# 3177

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2015**

Anticipated BOE meeting date 06/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

Contract term: **4 years and 92 days**

4. Type of contract: **Contract**

Contract description: **Medical Records Rev**

5. Purpose of contract:

This is the first amendment to the original contract, which provides medical records review and research related to unarmed combat. This amendment extends the termination date from 6/30/19 to 9/30/2019 and increases the maximum amount from $300,000 to $318,750, due to the continued need for these services. The term extension will ensure the continuation of medical records review by a licensed physician, at the rate of $6,250 per month, while State Purchasing completes the RFP process.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$300,000.00	$300,000.00	$300,000.00	Yes - Action
2.	Amount of current amendment (#1):	$18,750.00	$18,750.00	$18,750.00	Yes - Info
3.	New maximum contract amount:	$318,750.00			
	and/or the termination date of the original contract has changed to:	09/30/2019			

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.030; NRS 467.100; NAC 467.017; NAC 467.002; NAC 467.027; NAC 467.045 The Nevada Athletic Commission is responsible for reviewing medical records, both pre-fights and post-fights for its licensed unarmed combatants. Some of the medical records come from other states and other countries. The Commission is responsible for developing and implementing medical, health and safety standards for all contests and exhibitions of unarmed combats in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No Commission staff or other State agency employees are qualified. The physician must have experience in medical records, review, consultation and treatment coordination with other physicians and offer advice to the Athletic Commission on any medical issue that may arise for the health and safety of the professional unarmed combatants.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3177, 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: 05/05/2015 Anticipated re-bid date: 05/05/2019

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This is the current vendor and the services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	avance	05/21/2019 12:10:22 PM

Division Approval	avance	05/21/2019 12:10:25 PM
Department Approval	jhanse4	05/21/2019 14:57:49 PM
Contract Manager Approval	avance	06/05/2019 11:10:28 AM
Budget Analyst Approval	aurruty	06/05/2019 14:11:58 PM

For Board Use Only
Date: 05/23/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21960**

		Legal Entity Name:	Steve Spyropoulos
Agency Name:	**B&I - DIVISION OF MORTGAGE LENDING**	Contractor Name:	**Steve Spyropoulos**
Agency Code:	**756**	Address:	**PO Box 90325**
Appropriation Unit:	**3910-26**		
Is budget authority available?:	**Yes**	City/State/Zip	**Austin, TX 78709**
If "No" please explain:	Not Applicable	Contact/Phone:	Steve Spyropoulos 512-461-4628
		Vendor No.:	
		NV Business ID:	NV20191338456

To what State Fiscal Year(s) will the contract be charged? **2019**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**19.70 %**	**X**	Fees	**80.30 % Licensing 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 **05/23/2019**
   Anticipated BOE meeting date 06/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/28/2019**
   Contract term: **36 days**

4. Type of contract: **Contract**
   Contract description: **Process Review**

5. Purpose of contract:
   This is a new contract to provide information system documentation services, addressing in detail the requirements and business rules for the Department of Business and Industry, Division of Mortgage Lending and Nevada Real Estate Division.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$29,995.00**
   Other basis for payment: As invoiced

II. JUSTIFICATION

7. What conditions require that this work be done?
   Due to the antiquated software of Division of Mortgage Lending and Nevada Real Estate Division, the agencies need a review of their current software and business processes.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   The current employees for each agency do not have the skills to provide information technology expertise but also have a background in government regulatory and licensing programs.

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):

Capio Group

Stixis Technologies
Reunion Consulting
MIS 2000 Inc

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor is the only one who provided a quote for services.

d. Last bid date: 04/24/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

Grace Hilgar-DeVito, ASO 1 Ph: 702-486-5134

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhanse4	05/20/2019 16:33:37 PM
Division Approval	jhanse4	05/20/2019 16:33:40 PM
Department Approval	jhanse4	05/20/2019 16:33:45 PM
Contract Manager Approval	ghilgar	05/21/2019 08:42:48 AM
Budget Analyst Approval	aurruty	05/23/2019 11:39:11 AM

For Board Use Only
Date: 05/24/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21829**

		Legal Entity Name:	GARTNER, INC.
Agency Name:	**DEPARTMENT OF MOTOR VEHICLES**	Contractor Name:	**GARTNER, INC.**
Agency Code:	**810**	Address:	**PO BOX 911319**
Appropriation Unit:	**4715-04**		
Is budget authority available?:	**Yes**	City/State/Zip	**DALLAS, TX 75391-1319**
If "No" please explain:	Not Applicable	Contact/Phone:	Jay Friedman 239-561-4815
		Vendor No.:	T80976121A
		NV Business ID:	NV19941112701

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

	General Funds	0.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
X	Highway Funds	**100.00 %**	Other funding	0.00 %

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/24/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2020**
   Contract term: **1 year and 38 days**
4. Type of contract: **Other (include description): MSA Work Plan**
   Contract description: **SubscriptionResearch**
5. Purpose of contract:

This is a new Work Plan under Master Service Agreement contract #18964 which provides research and advisory services related to information technology to the DMV Vehicle Information Technology Division, to include, but not limited to, providing information about best practices related to cloud services, mobile application development, network design, system strategy, and modernizing computer application solutions.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$30,506.00**

II. JUSTIFICATION

7. What conditions require that this work be done?

Changes in Technology sector occur very rapidly. When the Department has to make IT related decisions and provide technical information, it is limited by the realm of the Department's current trends and research related to the ever changing information technology environment. Gartner has been identified as resource for expertise in IT research in both the government and private sectors. The Department will have access to technology experts and related information that will assist in the selection of the best possible solution for modernization and its success.

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. Soliciation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**
Approval #: 170706
Approval Date: 07/28/2017

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?
No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?
No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?
No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?
Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DMV-Contract #19885 Work Plan-expires 6-30-2019-Service has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?
No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:
Mark Froese, IT Administrator Ph: 775-684-4578

20. Contract Status:
Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jgrimmer	05/01/2019 11:30:41 AM
Division Approval	jgrimmer	05/01/2019 11:30:44 AM
Department Approval	jgrimmer	05/01/2019 11:30:51 AM
Contract Manager Approval	hazevedo	05/01/2019 14:06:56 PM
Budget Analyst Approval	jrodrig9	05/24/2019 13:58:10 PM

Copy

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701

Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

Purchasing Use Only:	
Approval#:	170706

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	**Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:**		
	State Agency:	*EITS*	
	Contact Name and Title	*Phone Number*	*Email Address*
	Rachel Bennett, Management Analyst III	***(775) 684-5864***	***rachel.bennett@admin.nv.gov***

	Vendor Information:	
1b	Identify Vendor:	***Gartner, Inc.***
	Contact Name:	
	Address:	***P.O. Box 911319 Dallas, TX 75391***
	Telephone Number:	***239-561-4815***
	Email Address:	

1c	**Type of Waiver Requested – Check the appropriate type:**	
	Sole or Single Source:	***X***
	Professional Service Exemption:	

	Contract Information:				
1d	Is this a new Contract?	Yes	***X***	No	
	Amendment:	#			
	CETS:	#			

1e	**Term:**				
	One (1) Time Purchase:				
	Contract:	Start Date:	***August 9, 2017***	End Date:	***August 8, 2021***

1f	**Funding:**	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	***All funding sources could apply depending on agency source***

1g	**Total Estimated Value of this Service Contract, Amendment or Purchase: $0**
	This MSA will have a zero dollar amount with each work order executed off the MSA following the proper approval process as outlined in NRS, NAC and/or SAM

2	**Provide a description of work/services to be performed or commodity/good to be purchased:** Utilize Gartner's specialized expertise for the State of Nevada, including but not limited to the Chief Information Officer, Office of Procurement as well as the ERP Project per agreement. Numerous agencies in the state use Gartner's professional and niche IT research to make quality decisions for all IT projects and support as they are a third party that ranks vendors based on determined criteria.

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor: Gartner's depth and breadth of experience in consulting services and large IT project oversight, as well as procurement and contracting processes, is a unique qualification. Gartner is able to offer a unique team of senior consultants with the required experience. Gartner can provide the IT staffing able to leverage the necessary tools and applications. There is a critical need for continuity of support and Gartner possesses the specifics relating to the current DofA IT projects and initiatives necessary to provide the seamless support required. Gartner's IT advisory services cover the full range of IT issues from applying technology to state of Nevada's business of serving its constituents to following major trends in IT, to managing and measuring the states infrastructure. Gartner is the top IT research house for all things to do with IT staffing requirements, projects and contracting of these goods and services. Gartner has been dedicated to IT since it began in 1979, those 37+ years of experience doing IT research has made them the largest and most respected source of analysis in IT. Gartner hires very knowledgeable staff with an average experience level of 17 years in technology to do the research and to help guide their customers while making important decisions. Their information is invaluable when making decisions expending tax payer funds. They uniquely provide unbiased research to determine best practices and will use that information to guide us in these projects.

4	**Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:** It was determined to be unfeasible to conduct an RFP as other firms do not offer the same experience and expertise as Gartner when it comes to IT. They have the uniqueness of doing more IT research than any other firm. They then can utilize that knowledge from their research into best practices and work with us to instill those best practices into our IT projects, there is no other firm that can turn their research into guidance.

5	**Were alternative services or commodities evaluated? Check One.**	Yes:	*X*	No:	
	a. *If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.*				
	Other research and consulting firms were explored however Gartner's unique skill set in IT and IT procurement sets them apart from other research and advisory firms.				
	b. *If not, why were alternatives not evaluated?*				
	Gartner is very specialized in what they provide the State of Nevada and no other companies can provide the same level of knowledge and expertise.				

6	**Has the agency purchased this service or commodity in the past? Check One.** ***Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany***	Yes:	*X*	No:	

	this request.				
	a. *If yes, starting with the most recent contract and working backward, for the **entire** relationship with this vendor, or any other vendor for this service or commodity, please provide the following information: this is attached.*				
	Term Start and End Dates		*Value*	*Short Description*	*Type of Procurement (**RFP#, RFQ#, Waiver #**)*
			$		
			$		
			$		

7	**What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?**
	Without this agreement the state would not have access to the appropriate expertise to help deliver current and future IT projects what support State business needs and citizen services. We would not have access to the best practice approach based on unbiased research, instead we will have a very biased approach based on the vendor. This will not allow us to develop the best practices for project management to utilize on various projects if we do not use this vendor for the contract.

8	**What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?**
	Extensive research was done on Forester, IBIS World and other research and advisor firms and Gartner was determined to be the only firm offering the specific IT experience with the staffing that understands the best practices based on the successful implementation not on a specific vendor, this is what the state needs. Gartner has been in business since 1979 specializing in IT research and is the largest and most respected company doing this research. We need to implement best practices for all projects and implement a repeatable approach to projects, not a one off approach. The repeatable processes we will be creating will make other projects successful.

9	**Will this purchase obligate the State to this vendor for future purchases?** ***Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.***	Yes:		No:	*X*
	a. *If yes, please provide details regarding future obligations or needs.*				
	We are not obligated for future purchases however I would expect we will continue to need Gartner services until a time comes that there is suitable alternatives.				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Agency Representative Initiating Request

Print Name of Agency Representative Initiating Request Date

Shan S. Rahming

Signature of Agency Head Authorizing Request

Shannon Rahming 7/13/17

Print Name of Agency Head Authorizing Request Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. **This signature does not exempt your agency from any other processes that may be required.**

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Administrator, Purchasing Division or Designee 7-28-2017

Date

Agency	Agency Name	ORG	Voucher Number	Voucher Amount
083	Purchasing	0000	PV083AV000047697	78,200.00
083	Purchasing	0000	PV083AV000053802	37,000.00
083	Purchasing	0000	PV083AV000054888	64,466.67
083	Purchasing	0000	PV083AV000055598	38,200.00
180	EITS	7350	PV180CIO000000004	78,900.00
180	EITS	7350	PV180CIO000000054	41,000.00
180	EITS	7350	PV180CIO000000062	41,000.00
180	EITS	OHET	PV180CIO000000102	42,640.00
180	EITS	OHET	PV180CIO000000107	42,640.00
180	EITS	OHET	PV180CIO000000159	42,640.00
180	EITS	OHET	PV18013730000002	42,640.00
403	DHCFP	0000	PV403HC000023205	81,700.00
403	DHCFP	0000	PV403HC000025840	84,200.00
403	DHCFP	0000	PV403HC000028329	73,700.00
800	NDOT	A067	PV80000005056541	34,800.00
800	NDOT	A067	PV80000005063314	51,400.00
800	NDOT	A067	PV80000005070210	35,800.00
800	NDOT	A067	PV80000005078356	53,100.00
800	NDOT	A067	PV80000005084701	146,700.00
810	DMV	0000	PV81000001390512	17,400.00
810	DMV	0000	PV81000001434886	17,900.00
810	DMV	0000	PV81000001468119	18,000.00
810	DMV	0000	PV81000001544215	37,250.00
			Total	1,201,276.67

Check Number	Status	Voucher Process Date	Vendor Number
EF00009283852	C	7/15/2013	PUR0005339
EF00009865684	C	7/28/2016	PUR0005339
EF00009985592	C	2/23/2017	PUR0005339
EF00009056517	C	6/23/2017	PUR0005339
EF00009308163	C	9/4/2013	PUR0005339
EF00009452402	C	7/2/2014	PUR0005339
EF00009474371	C	8/12/2014	PUR0005339
EF00009645454	C	7/6/2015	PUR0005339
EF00009664718	C	8/6/2015	PUR0005339
EF00009849944	C	7/5/2016	PUR0005339
EF00009875398	C	8/11/2016	PUR0005339
EF00009449010	C	6/26/2014	PUR0005339
EF00009643763	C	7/1/2015	PUR0005339
EF00009859553	C	7/19/2016	PUR0005339
EF00009550752	C	1/13/2015	PUR0005339
EF00009653879	C	7/17/2015	PUR0005339
EF00009752662	C	1/15/2016	PUR0005339
EF00009870110	C	8/3/2016	PUR0005339
EF00009955923	C	12/30/2016	PUR0005339
EF00009537891	C	12/16/2014	PUR0005339
EF00009653193	C	7/16/2015	PUR0005339
EF00009740740	C	12/22/2015	PUR0005339
EF00009946422	C	12/13/2016	PUR0005339

For Board Use Only
Date: 06/10/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21957**

		Legal Entity Name:	ADVANCED PRO REMEDIATION LLC
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**ADVANCED PRO REMEDIATION LLC**
Agency Code:	**901**	Address:	**5961 McLeod Dr.**
Appropriation Unit:	**3253-10**		
Is budget authority available?:	**Yes**	City/State/Zip	**Las Vegas, NV 89120-3404**
If "No" please explain:	Not Applicable	Contact/Phone:	Dayna Fualaau 702-252-0880
		Vendor No.:	T27038055
		NV Business ID:	NV20031177584

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Business Enterprise Set-Aside**

Agency Reference #: 3322-24-BEN

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **09/30/2023**
   Contract term: **4 years**

4. Type of contract: **Contract**
   Contract description: **2019 Advanced Pro**

5. Purpose of contract:
   This is a new contract to provide ongoing emergency on-call remediation/restoration services for the Business Enterprise of Nevada (BEN) food service locations in southern Nevada.

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$15,000.00**
   Other basis for payment: Standard Rate (M-F 8:00am-5:00pm): $65.83/Hour; Non-Standard/Saturday Rate: $98.75/Hour; Sunday/Holiday Rate: $131.66/Hour; Invoices payable upon approval by authorized BEN staff. Total contract not to exceed $15,000.00

II. JUSTIFICATION

7. What conditions require that this work be done?
   After fire, flood or other disasters, BEN food service sites are not safe nor sanitary and will be shut down until the damage is cleaned up and the floor, walls, air and surfaces are bought up to Southern Nevada Health District Health Codes.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   Agency staff are not trained nor have the equipment to perform the work

9. Were quotes or proposals solicited? Yes
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Pinnacle Restoration
Advanced Pro Remediation
TRS 24-7
ServePro of SW Las Vegas

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest cost vendor that could provide requested services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has provided satisfactory service to BEN since October 2015.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mjohns43	06/10/2019 10:04:30 AM
Division Approval	mjohns43	06/10/2019 10:04:34 AM
Department Approval	mjohns43	06/10/2019 10:04:40 AM
Contract Manager Approval	mjohns43	06/10/2019 10:04:44 AM
Budget Analyst Approval	dbaughn	06/10/2019 16:43:42 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **18166**

Amendment Number: **2**

Legal Entity Name: VORTEX INDUSTRIES INC

Agency Name: **DETR - REHABILITATION DIVISION**

Contractor Name: **VORTEX INDUSTRIES INC**

Agency Code: **901**

Address: **20 Odyssey**

Appropriation Unit: **3253-10**

Is budget authority available?: **Yes**

City/State/Zip **Irvine, CA 92618-3144**

If "No" please explain: Not Applicable

Contact/Phone: Rob Bremner 702-222-9185

Vendor No.: T27009348

NV Business ID: NV19941094581

To what State Fiscal Year(s) will the contract be charged? **2017-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %		Fees	0.00 %	
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %	X	Other funding	**100.00 %**	**Business Enterprise Set-Aside**

Agency Reference #: 2088-19-BEN

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/11/2017**

Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **12/31/2020**

Contract term: **3 years and 355 days**

4. Type of contract: **Contract**

Contract description: **Vortex**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing maintenance and repair of air curtain doors, automatic doors, gates and grills, commercial roll up doors, overhead doors, entrance doors and loading dock equipment at all Business Enterprise of Nevada locations in southern Nevada. This amendment increases the maximum amount from $7,000 to $17,000 due to continued need for these services. This amendment also inserts the attachment "Provisions for Contracts under Federal Awards" into Incorporated Documents due to new Federal requirements.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$7,000.00	$7,000.00	$7,000.00	No
	a. Amendment 1:	$0.00	$7,000.00	$7,000.00	No
2.	Amount of current amendment (#2):	$10,000.00	$17,000.00	$17,000.00	Yes - Info
3.	New maximum contract amount:	$17,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Business Enterprises of Nevada program has various sites that require repair, maintenance and/or replacement of doors. These repairs are required for the health and safety of staff and customers.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the time and experience involved in the repair, maintenance and/or replacement of doors.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Western States Door Control
Clark
Vortex
Western Door & Gate

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor was only respondent that was qualified to service Air Curtain (Mars Doors).

d. Last bid date: Anticipated re-bid date: 07/01/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 has been performing satisfactory service for the Department of Employment, Training and Rehabilitation since 2010.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kdesoci1	05/25/2019 15:16:07 PM
Division Approval	kdesoci1	05/25/2019 15:16:11 PM

Department Approval	kdesoci1	05/25/2019 15:16:16 PM
Contract Manager Approval	aallen	05/31/2019 11:26:23 AM
Budget Analyst Approval	dbaughn	05/31/2019 11:43:41 AM

For Board Use Only
Date: 05/28/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21570**

		Legal Entity Name:	BOARD OF REGENTS-WNC
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**BOARD OF REGENTS-WNC**
Agency Code:	**901**	Address:	**2201 W COLLEGE PKWY BRIS 147**
Appropriation Unit:	**3265-09**		
Is budget authority available?:	**Yes**	City/State/Zip	**CARSON CITY, NV 89703-7316**
If "No" please explain:	Not Applicable	Contact/Phone:	Susan Trist 775-445-4459
		Vendor No.:	D35000851
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**21.30 %**	Fees	0.00 %
X	Federal Funds	**78.70 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 3280-21-REHAB

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/28/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **06/30/2021**
   Contract term: **2 years and 34 days**
4. Type of contract: **Interlocal Agreement**
   Contract description: **2019 Pre-ETS Camp**
5. Purpose of contract:

This is a new interlocal agreement that provides Pre-Employment Transition Services (Pre-ETS), in the form of a camp setting, to disabled youths ages 16-21. The camp will provide the tools that will enable them to seek and retain employment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$26,285.32**

Other basis for payment: Salary/Fringe: $9,675.00; Tuition: $8,490.00 ($424.50/student, max of 20 students); Books: $3,373.26 ($153.33/person, max of 20 students and 2 instructors); Graduation: $2,150.00; Operating supplies: $500; Vehicle Rental: $150.00; and Indirect: $1,947.06: with the total Contract not exceeding $ 26,285.32.

II. JUSTIFICATION

7. What conditions require that this work be done?

WIOA requires that 15% of all grant funding be spent on PRE-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained or have the skills to undertake the Pre-ETS training.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Governmental Entity

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

8%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has been has been providing satisfactory services to REHAB since March 2003.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmartin7	03/25/2019 09:40:54 AM
Division Approval	kdesoci1	05/22/2019 11:53:05 AM
Department Approval	kdesoci1	05/22/2019 11:53:08 AM
Contract Manager Approval	mjohns43	05/22/2019 13:34:30 PM
Budget Analyst Approval	dbaughn	05/28/2019 10:30:02 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21914**

		Legal Entity Name:	Board of Regents - TMCC
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**Board of Regents - TMCC**
Agency Code:	**901**	Address:	**TMCC Controllers Office**
Appropriation Unit:	**3265-09**		**7000 Bandini Blvd**
Is budget authority available?:	**Yes**	City/State/Zip	**Reno, NV 89512-3999**
If "No" please explain:	Not Applicable	Contact/Phone:	Laura Vargas 775-673-7206
		Vendor No.:	D35000812
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**21.30 %**	Fees	0.00 %
X	Federal Funds	**78.70 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 3271-21-REHAB

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/10/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **09/30/2020**
   Contract term: **1 year and 113 days**

4. Type of contract: **Interlocal Agreement**
   Contract description: **2019 TMCC Pre-ETS**

5. Purpose of contract:

This is a new interlocal agreement that provides ongoing Pre-Employment Transition Services (Pre-ETS) to disabled youths ages 16 - 21 during the 2019 Summer Break and the 2020 Spring Break; which will provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128), which requires that 15% of all federal Rehabilitation funding must be focused on Pre-ETS.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **$29,010.00**

Other basis for payment: SUMMER 2019 Fixed Cost: $6,050.00; Variable Cost: $20,400.00 (20 students max @ $1,020/student); SUMMER 2019 Total: $26,450.00; and SPRING 2020 Fixed Cost: $1,160.00; Variable Cost: $1,400.00 (20 Student max @ $70/student); SPRING 2020 Total: $2,560.00; with the total Contract not to exceed $29,010.00

II. JUSTIFICATION

7. What conditions require that this work be done?

WIOA requires that 15% of all grant funding be spent on Pre-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained or have the skills to undertake the Pre-ETS training.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Governmental Entity

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has provided satisfactory service under multiple contracts with Vocational Rehabilitation since May 2003.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmartin7	05/10/2019 15:48:36 PM
Division Approval	kdesoci1	06/03/2019 17:51:24 PM
Department Approval	kdesoci1	06/03/2019 17:51:27 PM
Contract Manager Approval	mjohns43	06/05/2019 08:07:52 AM
Budget Analyst Approval	dbaughn	06/10/2019 11:28:31 AM

For Board Use Only
Date: 05/31/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21782**

		Legal Entity Name:	ODYSSEY CHARTER SCHOOL OF
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**ODYSSEY CHARTER SCHOOL OF NEVADA**
Agency Code:	**901**	Address:	**2251 S JONES BLVD STE 100A**
Appropriation Unit:	**3265-09**		
Is budget authority available?:	**Yes**	City/State/Zip	**LAS VEGAS, NV 89146-3145**
If "No" please explain:	Not Applicable	Contact/Phone:	DBOLLINGER@ODYSSEYK12.ORG 702-501-2160
		Vendor No.:	T81102486
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**21.30 %**	Fees	0.00 %
X	Federal Funds	**78.70 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 3317-20-REHAB

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/31/2019**
   Anticipated BOE meeting date 07/2019

   Retroactive? **No**
   If "Yes", please explain
   Not Applicable

3. Termination Date: **06/30/2020**
   Contract term: **1 year and 31 days**

4. Type of contract: **Interlocal Agreement**
   Contract description: **2019 Odyssey Summer**

5. Purpose of contract:
   This is a new interlocal agreement that provides Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).

6. NEW CONTRACT
   The maximum amount of the contract for the term of the contract is: **$20,280.00**
   Other basis for payment: $338.00/student per week (student must attend minimum of 1 of 4 days per week to qualify for payment); minimum of 15 students, maximum of 30 students; 2-week summer program (Monday through Thursday); with the total Contract not exceeding $20,280.00.

II. JUSTIFICATION

7. What conditions require that this work be done?
   WIOA requires that 15% of all grant funding be spent on Pre-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:
   State employees are not trained or have the skills to undertake the Pre-ETS training.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

governmental entity

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has been providing satisfactory services to REHAB since July 2017 and the Department of Education since 2002.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmartin7	04/24/2019 08:42:10 AM
Division Approval	kdesoci1	05/25/2019 15:17:03 PM
Department Approval	kdesoci1	05/25/2019 15:17:06 PM
Contract Manager Approval	aallen	05/31/2019 11:25:30 AM
Budget Analyst Approval	dbaughn	05/31/2019 11:49:39 AM

For Board Use Only
Date: 05/31/2019

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **21964**

		Legal Entity Name:	WASHOE COUNTY SCHOOL DISTRICT
Agency Name:	**DETR - REHABILITATION DIVISION**	Contractor Name:	**WASHOE COUNTY SCHOOL DISTRICT**
Agency Code:	**901**	Address:	**425 E 9TH ST**
Appropriation Unit:	**3265-09**		
Is budget authority available?:	**Yes**	City/State/Zip	**RENO, NV 89512-2800**
If "No" please explain:	Not Applicable	Contact/Phone:	Susan Williams 775-250-6906
		Vendor No.:	T40234300B
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**21.30 %**	Fees	0.00 %
X	Federal Funds	**78.70 %**	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 3327-20-REHAB

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/31/2019**
   Anticipated BOE meeting date 07/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Termination Date: **05/31/2020**
   Contract term: **1 year and 1 day**
4. Type of contract: **Interlocal Agreement**
   Contract description: **2019 WCSD Pre-ETS**
5. Purpose of contract:

This is a new interlocal agreement that provides Pre-Employment Transition Services (Pre-ETS) to disabled youths, ages 16 - 21, to provide the tools that will enable them to seek and retain employment. Pre-ETS programs are required under the Workforce Innovation and Opportunity Act (Public Law 113-128).

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 $600.00 per student
   Other basis for payment: One week camp; students must attend minimum of 3 out of 5 days for WCSD to be reimbursed. Total contract not to exceed $12,000.

II. JUSTIFICATION

7. What conditions require that this work be done?

WIOA requires that 15% of all grant funding be spent on Pre-ETS programs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not trained to perform this function.

9. Were quotes or proposals solicited? No
   Was the solicitation (RFP) done by the Purchasing Division? No
   a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Governmental Entity

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

    No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

    Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

    No

    b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

    No

    c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

    No If "Yes", please explain

    Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

    Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

    Vendor has provided satisfactory services to the Department of Employment, Training, and Rehabilitation since 2004.

14. Is the contractor currently involved in litigation with the State of Nevada?

    No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

    Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

    Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

    Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmartin7	05/16/2019 09:47:40 AM
Division Approval	kdesoci1	05/25/2019 15:19:00 PM
Department Approval	kdesoci1	05/25/2019 15:19:03 PM
Contract Manager Approval	aallen	05/31/2019 10:53:00 AM
Budget Analyst Approval	dbaughn	05/31/2019 10:57:34 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: **18717**

		Amendment Number:	**1**
		Legal Entity Name:	BRIGGS ELECTRIC INC
Agency Name:	**DETR - EMPLOYMENT SECURITY DIVISION**	Contractor Name:	**BRIGGS ELECTRIC INC**
Agency Code:	**902**	Address:	**5111 CONVAIR DR**
Appropriation Unit:	**All Budget Accounts - Category 04**		
Is budget authority available?:	**Yes**	City/State/Zip	**CARSON CITY, NV 89706-0426**
If "No" please explain:	Not Applicable	Contact/Phone:	Kathryn McCool 775/887-9901
		Vendor No.:	T81091747A
		NV Business ID:	NV19961075756

To what State Fiscal Year(s) will the contract be charged? **2017-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	**1.90 %**		Fees	0.00 %
X	Federal Funds	**69.00 %**		Bonds	0.00 %
	Highway Funds	0.00 %	**X**	Other funding	**29.10 %**

Agency Reference #: 3045-19-DETR

2. Contract start date:
   a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2017**

   Anticipated BOE meeting date 07/2019

   Retroactive? **No**

   If "Yes", please explain

   Not Applicable

3. Previously Approved Termination Date: **06/30/2019**

   Contract term: **4 years and 46 days**

4. Type of contract: **Contract**

   Contract description: **Electrician**

5. Purpose of contract:

   This is the first amendment to the original contract which provides electrical services for agencies in northern Nevada on an as needed basis. This amendment extends the termination date from June 30, 2019 to June 30, 2021 and increases the maximum amount from $10,500 to $30,500 due to the continued need for these services. This amendment inserts the attachment "Provisions for Contracts under Federal Award" into Incorporated documents due to new Federal requirements.

6. CONTRACT AMENDMENT

		Trans $	Info Accum $	Action Accum $	Agenda
1.	The max amount of the original contract:	$10,500.00	$10,500.00	$10,500.00	Yes - Info
2.	Amount of current amendment (#1):	$20,000.00	$20,000.00	$30,500.00	Yes - Info
3.	New maximum contract amount:	$30,500.00			
	and/or the termination date of the original contract has changed to:	06/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

Regular and emergency electrical services and repairs are often required.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the time or expertise 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):

Briggs Electric, Inc.
A.M. Smith Electric, Inc.
Silver State Electric

b. Soliciation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

One in a pool of vendors being awarded contracts.

d. Last bid date: 03/14/2017 Anticipated re-bid date: 01/01/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

5/16/17, Public Works Division, Buildings & Grounds Section. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jbende2	03/19/2019 10:40:25 AM
Division Approval	kdesoci1	05/03/2019 17:07:24 PM
Department Approval	kdesoci1	05/03/2019 17:08:05 PM

Contract Manager Approval	aallen	05/06/2019 09:42:31 AM
Budget Analyst Approval	dbaughn	06/14/2019 10:55:30 AM

Steve Sisolak
Governor

Susan Brown
Director

STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division
209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: June 25, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Tiffany Greenameyer, Executive Budget Officer TG.
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners' meeting.

GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION

Agenda Item Write-up:

Pursuant to NRS Chapter 353, the Governor's Finance Office, Budget Division presents a reconciled fund balance report for the TORT Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency Funds as of June 25, 2019.

Additional Information:

The TORT Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, IFC Unrestricted Contingency Funds and IFC Restricted Contingency supplement funding for eligible agencies within statutory authority.

Below is the available balance for each account prior to any projected outstanding claims.

TORT Claim Fund	$ 5,942,701.06
Statutory Contingency Account	$ 14,200,000.78
Stale Claims Account	$ 2,700,504.34
Emergency Account	$ 279,841.00
Disaster Relief Account	$ 11,103,252.83
IFC Unrestricted Contingency Fund General Fund	$ 25,000,000.16
IFC Unrestricted Contingency Highway Fund	$ 1,620,336.35
IFC Restricted Contingency Fund General Fund	$ 47,139,896.00
IFC Restricted Contingency Highway Fund	$ 2,220,935.00

Statutory Authority:

NRS 331.187, 353.097, 353.263, 353.264, 353.266, 353.268, 353.2735 and AB417, AB499, AB504, AB518, SB187 and SB553 of the 2017 Legislative Session

REVIEWED: 86.

ACTION ITEM:_____

BA 1348 TORT Claim Fund
NRS 331.187
FY 2019 (as of June 24, 2019)

Beginning Cash	5,716,729.00	
Insurance Premiums - A	118,964.81	
Insurance Premiums	4,239,879.65	
AG Loan Repayment	5,000.00	
	10,080,573.46	
Total Revenue		**$ 10,080,573.46**
Paid Claims:		
Attorney General's Office (Operating)	(185,943.83)	
Tort Claims	(3,951,928.57)	
Total Payments	(4,137,872.40)	
Account Balance		**$ 5,942,701.06**
Claims Submitted for Payment:		
Submitted for Payment	$ -	
Account Balance		**$ 5,942,701.06**
Projected Outstanding Claims:		
Attorney General's Office (projection)	-	
Total Pending Claims		$ -
Account Balance		**$ 5,942,701.06**

BA 4892 Statutory Contingency Account
NRS 353.264
FY 2019 (as of June 24, 2019)

Beginning Cash	2,578,355.00	
Appropriations	12,133,919.00	
Total Revenue		**$ 14,712,274.00**
Paid Claims:		
Post Conviction Stale Claims	(105,560.22)	
DCFS Interstate Compact - 1st Qtr Reimbursement	(4,006.05)	
DCFS Interstate Compact - 2nd Qtr Reimbursement	-	
DCFS Interstate Compact - 3nd Qtr Reimbursement	-	
SOS 2018 Election Cost	(372,518.95)	
Attorny General's Office (Professional Service)	(30,188.00)	
Total Payments	(512,273.22)	
Account Balance		**$ 14,200,000.78**
Claims Submitted for Payment:		
	0.00	
	$ -	
Submitted for Payment		
Account Balance		**$ 14,200,000.78**
Projected Outstanding Claims:		
Settlement	(10,000,000.00)	
Controller's Term pay	(29,178.00)	
Public Defender Claim	(1,044.00)	
	-	
	-	
Total Pending Claims	$ (10,030,222.00)	
Account Balance		**$ 4,169,778.78**

BA 4888 Stale Claims Account
NRS 353.097
FY 2019 (as of June 24, 2019)

Beginning Cash	798,536.00	
Transfer from Interim Finance	890,000.00	
Appropriations	2,700,000.00	
Total Revenue		**$ 4,388,536.00**

Paid Claims:

Supreme Court	(253.32)	
NSLA Library	(11,828.07)	
DHHS Aging Services	(280,171.44)	
DETR	(11,724.49)	
DHHS Southern NV Adult Mental Health	(111,320.91)	
DHHS Northern NV Adult Mental Health	(153,522.58)	
LV Childrns Behavioral Health	(3,630.96)	
Mental Health Inst	(1,308.60)	
DHHS Health Division	(2,997.86)	
Rural Clinics	(1,336.00)	
DCNR Water Resources	(4,433.40)	
Dept of Taxation	(17,633.67)	
Dept of Corrections	(63,271.95)	
Veteran's	(122.52)	
Military	(1,115.81)	
Dept of Public Safety	(5,768.42)	
DPS Investigations	(1,872.03)	
DHHS Child and Family Services	(93,491.31)	
Ethics Commission	(350.51)	
Fire Marshall	(1,192.89)	
Forestry	(22,002.69)	
Parks	(3,930.06)	
Agriculture	(3,075.07)	
Conservation	(1,814.02)	
Youth Service Division	(246,141.32)	
Dept of Education	(479,058.68)	
Post Conviction	(120,663.08)	
Governor's Finance Office	(44,000.00)	
Total Payments	(1,688,031.66)	
Account Balance		**$ 2,700,504.34**

Claims Pending BOE Approval

DCFS	0.00	
ADSD	0.00	
Submitted for Payment	0.00	
Account Balance		**$ 2,700,504.34**

Projected Outstanding Claims :

NV Dept of Education	(145,266.03)	
DHHS	(107,160.13)	
Public Defender	(3,880.00)	
NSLA	0.00	
Governor's Finance Office	0.00	
Agriculture	0.00	
Total Pending Claims	(256,306.16)	
Estimated Account Balance - Including all Claims		**$ 2,444,198.18**

BA 4889 Emergency Fund
NRS 353.263
FY 2019 (as of June 24, 2019)

Beginning Cash	279,841.00	
Total Revenue		**$ 279,841.00**
Paid Claims:		
Payments		$ -
Account Balance		**$ 279,841.00**
Claims Submitted for Payment:		
	-	
Total Submitted Payments		$ -
Account Balance		**$ 279,841.00**
Projected Outstanding Claims		
	-	
Total Pending Claims		$ -
Estimated Account Balance - Including all Claims		**$ 279,841.00**

BA 1335 Disaster Relief Account
NRS 353.2735
FY 2019 (as of June 24, 2019)

Beginning Cash	9,557,867.00	
Treasurer's Interest	165,197.16	
1st - 3rd Qtr Transfers Per NRS 353.288(4)	1,500,000.00	
Total Revenue		**$ 11,223,064.16**
Paid Claims:		
Annual Transfer per NRS 414.135	(119,811.33)	
	-	
	-	
Payments		$ (119,811.33)
Account Balance		**$ 11,103,252.83**
Claims Submitted for Payment:		
Submitted for Payment		$ -
Account Balance		**$ 11,103,252.83**
Projected Outstanding Claims :		
	-	
Total Pending Claims		$ -
Estimated Account Balance - Including all Claims		**$ 11,103,252.83**

IFC Contingency Fund Restricted
NRS 353.266
FY 2019 (as of June 24, 2019)

Restricted General Fund			
FY 17 Appropriations	2,913,155.00		
FY19 Appropriation Approved @ the June 25th IFC	23,905,253.00		
FY19 Reversion	10,000,000.00		
Beginning Cash FY19			
Governor's Office of Finance - Enterprise Resource Planning Project	10,143,113.00		
Department of Health and Human Services - Aging and Disability Services - Autism	1,392,066.00		
Desert Research Institute - Cloud Seeding Program	972.00		
Department of Public Safety - Division of Parole & Probation - Pilot Re-entry Program	370,235.00		
Establishment of a Fine Arts Museum in LV & Expansion of Reno NV Museum of Art	1,000,000.00		
Total Revenue		**49,724,794.00**	
Paid Claims:			
Establishment of a Fine Arts Museum in LV & Expansion of Reno NV Museum of Art	(1,000,000.00)		Approved @ August 14, 2018 IFC
Governor's Office of Finance - Enterprise Resource Planning Project	(674,914.00)		Approved @ October 24, 2018 IFC
Department of Veterans Services- Northern Nevada Veterans Home	(909,984.00)		Approved @ December 11, 2018 IFC
	0.00		
Payments	(2,584,898.00)		
Account Balance		**47,139,896.00**	
Pending Claims IFC Meeting:			
Total Pending	0.00		
Account Balance		**47,139,896.00**	
Restricted Highway Fund			
Beginning Cash:			
Governor's Office of Finance - Enterprise Resource Planning Project	2,379,248.00		
Total Revenue		**2,379,248.00**	
Paid Claims:			
Governor's Office of Finance - Enterprise Resource Planning Project	(158,313.00)		Approved @ October 24, 2018 IFC
Payments	(158,313.00)		
Account Balance		**2,220,935.00**	
Pending Claims October, 2018 IFC Meeting:			
Total Pending	0.00		
Account Balance		**2,220,935.00**	

IFC Contingency Fund Unrestricted
NRS 353.266
FY 2019 (as of June 24, 2019)

Unrestricted General Fund			
Beginning Cash FY19	9,822,291.78		
2019 Appropriation per June 25th meeting	23,167,598.00		
Reversion to IFC per June 25th meeting	5,772,928.00		
Total Revenue		**38,762,817.78**	
Paid Claims:			
Judicial Branch - Supreme Court BA 1494	(167,998.00)		Approved @ the June 19, 2018 IFC
Judicial Branch - Court of Appeals BA 1489	(65,000.00)		Approved @ the June 19, 2018 IFC
DCNR Forestry Division BA 4196	(10,930,180.00)		Approved @ the June 19, 2018 IFC
Public Safety BA 4709	(86,398.00)		Approved @ the August 16, 2018 IFC
Department of Corrections-Directors Office BA 3710	(158,000.00)		Approved @ the August 16, 2018 IFC
DCNR-Water Resources Channel Clearance	(250,000.00)		Approved @ the October 24, 2018 IFC
DPS Parole & Probation	(457,308.00)		
Emergency Management	(291,773.00)		
NV Dept of Education	(114,425.00)		Approved @ the Dec 2018 IFC
Secretary of State	(234,320.00)		
Motor Vehicles	(84,000.00)		
Meeting Costs	(31,451.41)		
GFO Stale Claim Acount (BOE)	(890,000.00)		Dec 2018 IFC
Total Payments	(13,760,853.41)		
Account Balance		**25,001,964.37**	
Pending Reimbursement:			
	(1,964.21)		
	0.00		
Total Pending	(1,964.21)		
Account Balance-GF		**25,000,000.16**	
Unrestricted Highway Fund			
Beginning Cash	1,668,141.35		
Reversion to IFC per June 25th meeting	5,582.00		
Total Revenue		**1,673,723.35**	
Paid Claims:			
DPS HWY Sfty Plan	(53,387.00)		Approved @ the October 24, 2018 IFC
Total Payments	(53,387.00)		
Account Balance-HWY		**1,620,336.35**	