

Governor Joe Lombardo
Chairman

Tiffany Greenameyer
Clerk of the Board



Attorney General Aaron D. Ford
Member

Secretary of State Francisco V. Aguilar
Member

STATE OF NEVADA BOARD OF EXAMINERS

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

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: May 13, 2025, 10:00 AM

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

Video Conference Location: The McCarran Center, Nevada Building
1 State of Nevada Way, Governor's Conference Room
Las Vegas, Nevada 89119

This meeting may be viewed on YouTube.
The video live stream begins at 10:00 am.
<https://www.youtube.com/watch?v=IqHWZk39EQg>

AGENDA

1. Call to Order / Roll Call

- 2. Public Comment** The first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on the agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 847 768 974#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

3. Approval of the April 8, 2025 Meeting Minutes (For possible action)

4. State Vehicle Purchases (For possible action)

Pursuant to SAM 0304, no watercraft 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:
State Department of Conservation & Natural Resources – Division of Environmental Protection	1	\$34,220

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

Governor's Finance Office – Office of Project Management

Pursuant to NRS 333.705, subsection 1, the office requests to contract with former employee Teresa Carrillo to provide subject matter expertise in the state's legacy finance and human resources systems through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

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

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

- Chapter 0100 Board of Examiners Policies
- Chapter 0200 Travel
- Chapter 0300 Cooperative Agreements and Contracts
- Chapter 1200 Mail Services
- Chapter 2600 Claims

7. Request for Approval of Land Lease Agreement (For possible action)

State Department of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS 322.060 and 322.065, the department requests approval of a Land Lease Agreement with the 501(c)(3) non-profit organization, Campus for Hope, to deliver transitional housing to homeless individuals and families as well as supportive homelessness assistance and prevention services.

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

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

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

A. Department of Administration – Nevada State Library, Archives and Public Records

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1052	Administration – State Archives	\$55,871
2891	Administration – Nevada State Library	\$41,422
	Total	\$97,293

B. Department of Corrections

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3706	Prison Medical Care	\$168,505
3710	Director's Office	\$171,882
3717	Northern Nevada Correctional Center	\$869,983
3722	Stewart Conservation Camp	\$44,535
3723	Pioche Conservation Camp	\$45,376
3724	Northern Nevada Transitional Housing	\$17,958
3725	Three Lakes Valley Conservation Camp	\$102,272
3738	Southern Desert Correctional Center	\$1,046,948
3739	Wells Conservation Camp	\$17,000
3748	Jean Conservation Camp	\$51,251
3751	Ely State Prison	\$1,039,403
3752	Carlin Conservation Camp	\$34,601
3759	Lovelock Correctional Center	\$929,485
3760	Casa Grande Transitional Housing	\$43,382
3761	Florence McClure Women's Correctional Center	\$609,675
3762	High Desert State Prison	\$2,837,360
	Total	\$8,029,616

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

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3161	Southern Nevada Adult Mental Health Services	\$3,386,133
3162	Northern Nevada Adult Mental Health Services	\$556,226
3168	Behavioral Health Administration	\$103,995
3200	Prevention and Treatment of Problem Gambling	\$20,994
3645	Lakes Crossing Center	\$341,447
	Total	\$4,408,795

D. Department of Health and Human Services – Division of Child and Family Services

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3145	Children, Youth and Family Administration Account	\$597,232
	Total	\$597,232

E. Department of Health and Human Services – Director’s Office

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3203	Department of Health and Human Services Office of Data Analytics	\$58,705
	Total	\$58,705

F. Department of Motor Vehicles

Pursuant to Assembly Bill 522, sections 4, 6, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	HIGHWAY FUND ADJUSTMENT
4715	Department of Motor Vehicles – Automation	\$1,081,211
4717	Department of Motor Vehicles – Motor Carrier	\$109,388
4735	Department of Motor Vehicles – Field Services	\$4,888,169
	Total	\$6,078,768

G. Department of Public Safety

Pursuant to Assembly Bill 522, sections 4, 5, 6, 13, 14, and 20 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HIGHWAY FUND ADJUSTMENT
3740	Parole and Probation	\$2,845,474	
3743	Investigation Division	\$998,253	\$100,235
4701	Evidence Vault	\$111,967	
	Total	\$3,955,694	\$100,235

H. Department of Taxation

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2361	Department of Taxation	\$2,444,508
	Total	\$2,444,508

I. Department of Transportation

Pursuant to Assembly Bill 522, sections 4, 6, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	HIGHWAY FUND ADJUSTMENT
4660	Transportation Administration	\$29,121,240
	Total	\$29,121,240

J. Gaming Control Board

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the board requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
4061	Gaming Control Board	\$511,342
	Total	\$511,342

K. Governor's Office

Pursuant to Assembly Bill 522, sections 5 and 14 of the 2023 Legislative Session, the office requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1000	Governor's Office	\$312,083
	Total	\$312,083

L. Nevada System of Higher Education

Pursuant to Assembly Bill 522, sections 7 and 15 of the 2023 Legislative Session, the system requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2980	University of Nevada, Reno (UNR)	\$27,446,885
2982	UNR School of Medicine	\$4,824,801
2983	UNR Intercollegiate Athletics	\$246,419
2985	UNR Statewide Programs	\$1,232,333
2989	Agricultural Experiment Station	\$1,247,325
2990	Cooperative Extension Service	\$1,042,012
2996	University Press	\$82,019
3003	Business Center North	\$445,598
3221	Health Laboratory and Research	\$248,110
2987	University of Nevada, Las Vegas (UNLV)	\$39,738,693
2988	UNLV Intercollegiate Athletics	\$394,992
2992	UNLV Law School	\$1,921,175
3001	UNLV Statewide Programs	\$363,617
3002	UNLV Dental School	\$2,058,269
3004	Business Center South	\$393,078
3014	UNLV School of Medicine	\$4,901,769
2994	Great Basin College	\$2,452,467
3005	Nevada State University	\$5,136,903
3011	College of Southern Nevada	\$18,837,970
3012	Western Nevada College (WNC)	\$2,512,304
3017	Prison Education Program (WNC)	\$9,568
3018	Truckee Meadows Community College	\$6,672,697
3010	Desert Research Institute	\$1,438,761
2986	System Administration	\$765,112
2991	System Computing Services	\$2,247,196
2977	Special Projects	\$73,418
	Total	\$126,733,491

M. Secretary of State's Office

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the office requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1050	Secretary of State	\$2,453,323
1051	Help America Vote Act Elections Account	\$43,236
	Total	\$2,496,559

N. Department of Administration – Fleet Services Division

Pursuant to Assembly Bill 522, section 36, subsection 4 of the 2023 Legislative Session, the department requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1354	Department of Administration – Fleet Services Division	\$8,954
	Total	\$8,954

O. Department of Corrections

Pursuant to Assembly Bill 522, section 36, subsection 1 of the 2023 Legislative Session, the department requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3706	Prison Medical Care	\$31,325
3710	Director's Office	\$57,172
3717	Northern Nevada Correctional Center	\$49,134
3722	Stewart Conservation Camp	\$6,014
3723	Pioche Conservation Camp	\$4,576
3724	Northern Nevada Transitional Housing	\$8,050
3725	Three Lakes Valley Conservation Camp	\$2,507
3738	Southern Desert Correctional Center	\$41,173
3739	Wells Conservation Camp	\$1,275
3748	Jean Conservation Camp	\$3,102
3751	Ely State Prison	\$38,926
3752	Carlin Conservation Camp	\$2,903
3759	Lovelock Correctional Center	\$40,526
3760	Casa Grande Transitional Housing	\$9,251
3761	Florence McClure Women's Correctional Center	\$34,752
3762	High Desert State Prison	\$87,914
	Total	\$418,600

P. Department of Corrections

Pursuant to Assembly Bill 522, section 22 of the 2023 Legislative Session, the department requests funds for salary increases for its sworn positions.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3710	NDOC Director's Office	\$255,594
3716	Warm Springs Correctional Center	\$38,914
3717	Northern Nevada Correctional Center	\$1,396,194
3719	Prison Industry	\$29,991
3722	Stewart Conservation Camp	\$81,722
3723	Pioche Conservation Camp	\$89,718
3724	Northern Nevada Transitional Housing	\$43,179
3725	Three Lakes Valley Conservation Camp	\$150,881
3738	South Desert Correctional Center	\$1,449,825
3739	Wells Conservation Camp	\$44,546
3748	Jean Conservation Camp	\$74,862
3751	Ely State Prison	\$1,208,740
3752	Carlin Conservation Camp	\$62,022
3759	Lovelock Correctional Center	\$1,031,345
3760	Casa Grande Transitional Housing	\$162,192
3761	Florence McClure Women Correctional Center	\$1,031,669
3762	High Desert State Prison	\$3,201,296
	Total	\$10,352,690

Q. Department of Public Safety

Pursuant to Assembly Bill 522, section 22 of the 2023 Legislative Session, the department requests funds for salary increases for its sworn positions.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HIGHWAY FUND ADJUSTMENT
3740	Parole and Probation	\$2,138,657	
3743	Investigation Division	\$308,902	\$21,642
4738	Dignitary Protection	\$57,540	
	Total	\$2,505,099	\$21,642

9. [Approval of Proposed Leases](#) (For possible action)
10. [Approval of Proposed Contracts](#) (For possible action)
11. [Approval of Proposed Master Service Agreements](#) (For possible action)

12. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$100,000. Per direction from the September 14, 2021 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$99,999). Attached is a list of all applicable approvals for contracts and amendments approved from March 15, 2025 through April 15, 2025.

13. Information Item Reports

A. Governor's Finance Office – Budget Division

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of April 17, 2025 for fiscal year 2025. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

B. Department of Motor Vehicles – Complete Streets Program

Pursuant to NRS 482.1825, subsection 2, the department shall certify monthly to the Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents, and that the money has been distributed as provided in statute. This submittal reports program activities by month for the third quarter of fiscal year 2025 for the period beginning January 1, 2025 and ending March 31, 2025.

14. Public Comment This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 847 768 974#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

15. Adjournment (For possible action)

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body will limit public comments to three minutes per speaker and may place other reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. A person may submit comments to be attached to the minutes of the meeting in writing three business days before the meeting date, in addition to testifying or in lieu of testifying. Written comments are limited to 2 pages. Written comments may be submitted electronically by email at AJohnson2@finance.nv.gov. We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Amberly Johnson 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 AJohnson2@finance.nv.gov. Supporting materials

for this meeting are available at 209 East Musser Street, Suite 200, Carson City, Nevada 89701 or by contacting Amberly Johnson at (775) 684-0223 or by email at AJohnson2@finance.nv.gov.

Public Meeting Notice and Agenda Posted at the Following Locations:

1. Blasdel Building, 209 East Musser Street, Suite 200, Carson City, Nevada 89701
2. Internet: <https://notice.nv.gov>
3. Internet: https://budget.nv.gov/Meetings/Board_of_Examiners/2025/2025BOE/

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MEETING MINUTES

Date and Time: April 8, 2025, 10:00 AM

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

Video Conference Location: The McCarran Center, Nevada Building
1 State of Nevada Way, Governor's Conference Room
Las Vegas, Nevada 89119

MEMBERS PRESENT:

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

STAFF PRESENT:

Tiffany Greenameyer, Clerk of the Board
Rosalie Bordelove, Board Counsel

OTHERS PRESENT:

Victoria Carreon, Division Administrator, Department of Business and Industry
Jack Robb, Chief Innovation Officer, Office of the Governor
Stacie Weeks, Division Administrator, Department of Health and Human Services

1. Call to Order / Roll Call

Governor: I'll call to order the State of Nevada Board of Examiners meeting scheduled for today, April 8, 2025 at 10:02 a.m. and we'll kick it off with the roll call.

Clerk of the Board: Governor Lombardo.

Governor: Present.

Clerk of the Board: Attorney General Ford.

Attorney General: Here.

Clerk of the Board: Secretary Aguilar.

Secretary of State: Here.

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

- 2. Public Comment** The first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on the agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 526 420 211#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

Governor: We will move on to agenda item number two. This is the first opportunity for public comment. This first public comment period is limited to comments on items on the agenda. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on the agenda as an action item. We will impose a three minute time limit. To call in, the number is 775-321-6111. When prompted, enter the meeting ID 526 420 211#. Do we have any public comment there in Las Vegas?

Board Counsel: We do not.

Governor: Do we have any public comment here in Carson City? Hearing none. Do we have anybody on the phone or online? Hearing none, we will close this period of public comment.

- 3. Approval of the March 11, 2025 and the March 18, 2025 Meeting Minutes** (For possible action)

Governor: Agenda item number three, *Approval of the March 11, 2025 and the March 18, 2025 Meeting Minutes*. Do you have any questions or concerns?

Secretary of State: No questions. Motion to approve.

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

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

Department of Business and Industry – Division of Industrial Relations

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

A. Occupational Safety and Health Administration Fines/Penalties	\$423,736.50
B. Uninsured Employer Claim Account	\$1,541,465.18
C. Worker's Compensation Administrative Fines and Premium Penalties	\$917,910.46
D. Mechanical Compliance	\$5,665.05
Total	\$2,888,777.19

Governor: Agenda item number four, *Request for Designation of Bad Debt*. Ms. Greenameyer.

Clerk of the Board: Pursuant to NRS 232.605, subsection 2, the Advisory Council to the Department of Business and Industry, Division of Industrial Relations requests that the Board of Examiners designate a total of \$2,888,777.19 as bad debt as it has been determined to be uncollectible. Are there any questions on this item?

Governor: Do we have any questions?

Secretary of State: Mr. Governor, I have a question.

Governor: Go ahead.

Secretary of State: Just wondering what efforts were made to collect this revenue or this money?

Victoria Carreon: Good morning, Members of the Board of Examiners. Victoria Carreon for the record. I'm the Administrator of the Department of Business and Industry, Division of Industrial Relations. The division does attempt to collect this debt initially and then it is referred to the Controller's Office and they are responsible for attempting to collect the debt at that point, and they have determined that these debts are not collectible. Thank you.

Secretary of State: Thank you. I appreciate the response. So, what efforts are made? Is there a compliance piece, are there liens placed on businesses' assets? What efforts are made to actually ensure that these revenues are collected?

Victoria Carreon: Victoria Carreon for the record. We do send them a demand letter, and we also follow up with a phone call, and then if there is no response, we then turn it over to the Controller's Office and they are responsible for the collections efforts at that point. I know

that they utilize a collections agency, but I'm not fully familiar with all of their procedures. Thank you.

Secretary of State: So, once a lien is placed, are there legal actions, or is there a complaint filed against the individual? I mean, to write off \$3 million is pretty significant given where those resources could go. I just want to make sure we're doing everything we can as a state to ensure that we're collecting the revenue sources. I understand that legal fees can add up and the money may not be worth that effort, but I'm just wondering to what extent we're ensuring and holding people accountable, especially bad actors.

Victoria Carreon: The Division of Industrial Relations does not take legal action on these, however, I'm not sure if the Controller's Office does. They would be better able to answer that question. Thank you.

Clerk of the Board: I can do a follow-up with the Controller's Office to answer your questions in writing if you would like.

Secretary of State: Perfect. Appreciate it. Thank you.

Governor: This question has been presented previously and I'm familiar with it. A lot of it is businesses that go out of business and similar to that effect. Eventually it will have an effect on their business licenses in the future and ability to recover. As to answer your question on the liens, I can't answer that, but it's a great question and obviously we need to provide a better answer.

Secretary of State: One of the things is, I just want to make sure, now, we don't have people doing serial filings with the Secretary of State's Office where they're dumping these and then starting a new entity and then creating additional burden. I just want to make sure we're catching bad actors in the process, so thank you.

Governor: Any further questions? General Ford?

Attorney General: No questions here. Are we going to vote on this today or are we going to hold off until we get additional explanation?

Governor: We will go ahead and vote on it. I'll entertain a motion.

Secretary of State: Motion to approve.

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

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

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

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

A. Department of Corrections

Pursuant to Assembly Bill 522, sections 5 and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3706	NDOC – Medical	\$3,826,644
3710	NDOC – Director's Office	\$967,440
3717	NDOC – Northern Nevada Correctional Center	\$3,157,090
3727	NDOC – Prison Ranch	\$40,026
3738	NDOC – Southern Desert Correctional Center	\$1,511,572
3748	NDOC – Jean Conservation Camp	\$43,318
3752	NDOC – Carlin Conservation Camp	\$102,020
3760	NDOC – Casa Grande Transitional Housing	\$383,697
3761	NDOC – Florence McClure Women's Correctional Center	\$1,662,911
3762	NDOC – High Desert State Prison	\$3,992,585
	Total	\$15,687,303

B. Department of Health and Human Services – Director's Office

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3055	DHHS – Patient Protection Commission	\$34,124
3150	DHHS – DO – Administration	\$140,263

3154	DHHS – DO – Developmental Disabilities	\$11,668
3195	DHHS – DO – Grants Management Unit	\$6,497
	Total	\$192,552

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

Pursuant to Assembly Bill 522, sections 5 and 13 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3161	Health and Human Services - Division of Public and Behavioral Health – Southern Nevada Adult Mental Health	\$9,594,870
3162	Health and Human Services - Division of Public and Behavioral Health – Northern Nevada Adult Mental Health Services	\$1,294,836
3645	Lakes Crossing Center	\$1,423,850
	Total	\$12,313,556

D. Department of Public Safety – Parole Board

Pursuant to Assembly Bill 522, sections 4, 5, 13, and 14 of the 2023 Legislative Session, the department requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3800	Department of Public Safety – Parole Board	\$288,790
	Total	\$288,790

E. Judicial Discipline Commission

Pursuant to Assembly Bill 522, sections 5 and 13 of the 2023 Legislative Session, the commission requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1497	Judicial Discipline Commission	\$138,713
	Total	\$138,713

F. Office of the Governor – Governor’s Mansion Maintenance

Pursuant to Assembly Bill 522, sections 5 and 13 of the 2023 Legislative Session, the office requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1001	The Office of the Governor, Mansion Maintenance	\$34,749
	Total	\$34,749

G. Peace Officers Standards and Training Commission

Pursuant to Assembly Bill 522, sections 5 and 13 of the 2023 Legislative Session, the commission requests funds for salary increases.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3774	Peace Officer Standards and Training	\$241,883
	Total	\$241,883

H. Department of Administration – Purchasing Division

Pursuant to Assembly Bill 522, section 36, subsection 5 of the 2023 Legislative Session, the department requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1358	Department of Administration – Purchasing Division	\$9,881
	Total	\$9,881

I. Department of Administration – Nevada State Library, Archives and Public Records

Pursuant to Assembly Bill 522, section 36, subsection 5 of the 2023 Legislative Session, the department requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1052	Department of Administration – Nevada State Library and Archives	\$1,328
	Total	\$1,328

J. Judicial Discipline Commission

Pursuant to Assembly Bill 522, section 36, subsection 1 of the 2023 Legislative Session, the commission requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1497	Judicial Discipline Commission	\$839
	Total	\$839

K. Peace Officers Standards and Training Commission

Pursuant to Assembly Bill 522, section 36, subsection 1 of the 2023 Legislative Session, the commission requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3774	Peace Officer Standards and Training	\$1,767
	Total	\$1,767

L. Nevada System of Higher Education

Pursuant to Assembly Bill 522, section 36, subsection 3 of the 2023 Legislative Session, the system requests funds for the plan to encourage continuity of service.

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2977	NSHE - Special Projects	\$1,256
2980	University of Nevada, Reno	\$313,749
2982	UNR School of Medicine	\$37,227
2983	Intercollegiate Athletics - UNR	\$817
2985	Statewide Programs - UNR	\$8,354
2986	NSHE System Administration	\$7,254
2987	University of Nevada, Las Vegas	\$501,975
2988	Intercollegiate Athletics - UNLV	\$6,010
2989	Agricultural Experiment Station - UNR	\$6,374
2990	Cooperative Extension Service	\$13,578
2991	System Computing Center	\$29,630
2992	UNLV Law School	\$14,928
2994	Great Basin College	\$22,002
2996	University Press	\$900
3001	Statewide Programs – UNLV	\$3,268
3002	UNLV Dental School	\$27,336

3003	Business Center North	\$3,338
3004	Business Center South	\$2,470
3005	Nevada State University	\$26,447
3010	Desert Research Institute	\$10,895
3011	College of Southern Nevada	\$269,087
3012	Western Nevada College	\$26,921
3014	UNLV School of Medicine	\$14,273
3018	Truckee Meadows Community College	\$85,280
3221	Health Laboratory and Research	\$3,602
	Total	\$1,436,972

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

Clerk of the Board: There are 12 requests under this agenda item. The 2023 legislature, through Assembly Bill 522, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the state's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disperse amounts from the appropriated fund to the departments, commissions, and agencies of the state for the purpose of paying personnel salary deficiencies.

Requests A through G request funds for salary increases for a total of \$28,897,546. Requests H through L request funds for the plan to encourage continuity of service for a total of \$1,450,787. Are there any questions on these items?

Secretary of State: No questions.

Governor: Hearing no questions, I'll entertain a motion for approval.

Secretary of State: Motion to approve.

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

6. Approval of Proposed Leases (For possible action)

Governor: Agenda item number six, *Approval of Proposed Leases*. Ms. Greenameyer.

Clerk of the Board: There are four leases under this agenda item for approval by the Board. Are there any questions on these items?

Governor: Do we have any questions on any of the leases?

Secretary of State: No questions. Motion to approve leases one through four.

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

7. Approval of Proposed Contracts (For possible action)

Governor: We'll move on to agenda item number seven, *Approval of Proposed Contracts*. Ms. Greenameyer.

Clerk of the Board: There are 31 contracts under this agenda item. Are there any questions on any of these contracts?

Governor: Yes. I see Jack Robb there. Jack, can you come forward, please? On contract number eight, I know there was a question previously, and it was pulled from a previous agenda. That would be for RFI Enterprises, Inc. for the security mechanisms for cameras and card access. Now it's brought back forward. Can you just walk me through that?

Jack Robb: Jack Robb for the record. RFI has been the contractor for the past couple of years, and we have had continued delays in getting stuff done. We have worked with the Department of Administration's State Public Works Division and the Purchasing Division. State Public Works Division operates under NRS 338. Purchasing Division operates under NRS 333. This contract is under NRS 333 as a statewide contract. Moving forward, we're going to use NRS 338 to take care of all the buildings on the new construction side. This is just a support contract for the Office of the Chief Information Officer to continue getting equipment and service through this group. Then the big jobs are going to be done through NRS 338 and State Public Works Division.

Governor: Are there any questions for Mr. Robb?

Secretary of State: No questions.

Governor: Thank you, Jack.

Then on contracts 11 through 13, Ms. Greenameyer, I don't know who's best to address it, but the amount being zero and the reason why we're presenting it that way. Ms. Weeks.

Stacie Weeks: Good morning. Stacie Weeks for the record. These three contracts represent the new agreements with health carriers for the Public Option Program, which we're referring to as the Battle Born State Plans. The Battle Born State Plans do not have any cost to the state, but there is an amount tied to these contracts of \$320 million in federal funding for the waiver that you submitted, Governor, to the federal government to capture any federal funds as a result of the reduced premiums from these products. We anticipate \$320 million being captured from the federal level because our waiver was approved January 15th by the federal government. Once we are able to receive that funding, we will be implementing the new state reinsurance program, which will lower premiums across the entire individual market, not just the Battle Born State Plans.

Governor: So, what is the purpose of BOE engaging in this approval? Ms. Greenameyer, do you have answer, or Stacie?

Clerk of the Board: Although there is no cost or obligation to the state, per SAM 0107, this contract meets the BOE threshold based on the estimated project value.

Governor: Ms. Weeks, depending on the federal situation, outside of Medicaid and Medicare, would this be affected if it was to go the wrong way?

Stacie Weeks: As far as we know, the 1332 waiver programs have not been affected by anything at the federal level. This agreement is in accordance with state law. So, we can operate the new program as of January 1, 2026.

Governor: So, that's on a federal calendar since it's January 1. I thought that was October to October.

Stacie Weeks: The products will be available in the marketplace in October for shopping, but the coverage year begins January 1, 2026, and that is in accordance with state law.

Governor: Perfect. Thank you. Are there any other questions of Ms. Weeks?

Secretary of State: I do. Just one question on that. If the federal grant is decreased, the increase in premium would just go to the consumer, right, I assume?

Stacie Weeks: No, the contract still requires these plans to meet a target regardless of what we receive back. The federal funding is just how much the federal government will have to pay in terms of premium tax credits to buy down the premiums in the market. So, the goal is, by reducing that trend, we are able to capture that funding. We are saving them. Regardless of that, regardless of how much we receive, the plans still must meet their contractual agreement with the state.

Secretary of State: So the insurer then eats the cost difference or the subsidy difference?

Stacie Weeks: Yes, there is in the agreement that they cannot take the entire reduction out on their provider network. They have to take at least a portion of it out on their overhead and profits.

Secretary of State: Okay, thank you.

Governor: If there are no further questions, I'll entertain a motion for approval.

Secretary of State: Motion to approve.

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

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

Governor: We'll move on to agenda number eight, *Approval of Proposed Master Service Agreements*.

Clerk of the Board: There is one master service agreement under this agenda item for the approval by the Board. Are there any questions?

Governor: Do you have any questions?

Secretary of State: No questions. Motion to approve.

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

9. Information Item – Clerk of the Board Contracts

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$100,000. Per direction from the September 14, 2021 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$99,999). Attached is a list of all applicable approvals for contracts and amendments approved from February 15, 2025 through March 14, 2025.

Governor: Agenda item number nine, *Information Item – Clerk of the Boards of Contracts*.

Clerk of the Board: There are 62 contracts within the threshold of 10,000 to \$99,999 that were approved by the Clerk of the Board from February 15, 2025 through March 14, 2025. This item is informational. Are there any questions on these items?

Governor: Are there any questions?

Secretary of State: No questions.

Attorney General: None here either.

Governor: Alright, hearing none.

10. Information Item Reports

Governor's Finance Office – Budget Division

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, Stale Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of March 10, 2025 for fiscal year 2025. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

Governor: Agenda item number 10, *Information Item Reports*. Ms. Greenameyer.

Clerk of the Board: This report is from the Governor's Finance Office, Budget Division. Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report of the following accounts. The approximate balances are as follows. The Tort Claim Fund is \$2.3 million, Statutory Contingency Account is revised to \$1,047,144.59, the Stale Claims Account is approximately \$1.1 million, Emergency Account is \$500,000, Disaster Relief Account is \$13.7 million, IFC Contingency Unrestricted General Fund is \$12.1 million, IFC Contingency Unrestricted Highway Fund is \$1.6 million, IFC Contingency Restricted General Fund is \$113.8 million, IFC Contingency Restricted Highway Fund is \$18.8 million, and Extradition Coordinator, Budget Account 1002 is \$76,000. This item is informational. Are there any questions?

Governor: Are there any questions, General Ford?

Attorney General: No, sir. None here.

Governor: No questions here. Thank you very much.

11. Public Comment This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under this public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board has imposed a time limit of three minutes. Public comment may be provided in person or via telephone. To provide public comment on an item on the agenda via telephone, dial 775-321-6111 or 702-329-3435. When prompted to provide the meeting ID, please enter 526 420 211#. When the Chair opens the public comment period, dial *5 to request to be unmuted. To resolve any issues related to dialing in to provide public comment for this meeting, please call (775) 684-0222.

Governor: Agenda item number 11, *Public Comment*. Do we have any public comment there in Las Vegas?

Board Counsel: No, sir, we do not.

Governor: Do we have any public comment here in Carson City? Do we have anybody on the phone? Hearing none.

12. Adjournment (For possible action)

Governor: We will move on to adjournment. So moved. All those in favor, signify by saying aye. The motion passes unanimously. Thank you.

Joe Lombardo
Governor



Tiffany Greenameyer
Director

Curtis Palmer
Deputy Director

Vacant
Administrator

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

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

Date: March 31, 2025
To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office
From: Rosa Rogula, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

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

Agenda Item Write-up:

Pursuant to SAM 0304, the department requests approval to purchase a new watercraft for a total amount not to exceed \$34,220.

Additional Information:

The department requests approval to purchase a new watercraft for the bureau of Water Quality Planning (BWQP). A new boat purchase at a cost of \$20,990 was included in BWQP's fiscal year 2025 budget, however, the equipment originally requested is insufficient to meet the program needs. With a maximum person, motor, and gear weight of 1600 lbs, the requested watercraft has sufficient weigh capacity for up to four staff that are needed at times to conduct water quality sampling, and to stow all needed sampling equipment. The cost increase of \$13,230 will be covered by federal grant funds.

Authority:
SAM 0304

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



MEMORANDUM

DATE: March 28, 2025
TO: Rosa Rogula, Executive Branch Budget Officer, GFO
FROM: Jason Kuchnicki, Chief, Bureau of Water Quality Planning
SUBJECT: Request for Watercraft Purchase - BA 3193 (WQP)

Dear Ms. Rogula,

Your approval is requested for a new watercraft equipment purchase for the Bureau of Water Quality Planning (BWQP). A new boat purchase at a cost of \$20,990 was included in BWQP's SFY 2025 budget. However, the equipment originally requested is insufficient to meet the program needs as stated in the original purchase justification request. This memo requests approval to use additional federal grant funds to purchase upgraded equipment that will meet program needs for years to come. The estimated cost for the upgraded equipment exceeds the original equipment budget by \$13,230. The cost increase will be covered by federal grant Cat 06 FED CWA SEC 106 EPA. I have confirmed with our Budget Analyst, Angele Wetzel, that the grant has sufficient budget and authority to cover the increased cost.

Justification

The approved boat purchase is for a 2023 Tracker Pro 170 with a mercury motor and a single-axle trailer (without brake) (or comparable boat/trailer). The approved equipment has a maximum capacity of four people and a maximum person, motor, and gear weight of 980 lbs. The approved purchase is for a flat bottomed, shallow draft, platform style fishing boat. This boat does not provide the stable working area required for staff to collect the variety of samples required. Staff would have to kneel or lean off the boat edge to collect samples. Additionally, a flat-bottomed boat does not meet the other stated goal of a safe platform to conduct sampling in varying weather conditions. This boat does not have enough weight carrying capacity for up to four staff members and the sampling equipment needed to perform sampling. A single axle trailer introduces additional difficulty for maneuverability, provides significantly less stability while being towed, and has limited usefulness on dirt roads. Exclusion of a trailer brake introduces unnecessary risk while towing.

BWQP requests to purchase instead a 2025 Tracker Pro V-175 with a mercury motor and a tandem-axle trailer with dual brakes (or comparable boat/trailer). With a maximum person, motor, and gear weight of 1600 lbs, the requested watercraft has sufficient weigh capacity for up to four staff that are needed at times to conduct water quality sampling, and to stow all needed

sampling equipment. The additional space allows for a more efficient and accurate sampling process by the improved ability to maneuver persons and sampling equipment within the boat, especially when collecting large sample volumes and dealing with complex sampling protocols. The requested equipment is a "V" hull, providing vastly improved stability during rough windy conditions and the additional freeboard significantly improves safety while staff collect samples over the edge of the boat. A tandem-axel trailer would provide significantly greater stability and control during towing, as boat and equipment weight are distributed over two sets of wheels rather than just a single wheelset. Outfitting the trailer with dual brakes would provide a much safer and reliable option for the typically long hauls on rugged dirt roads that are required to access many lakes and reservoirs in Nevada. The accompanying quotes show an estimated cost for this equipment at \$34,220.

Please contact me at 775-687-9450 or kuchnicki@ndep.nv.gov if you have any questions or additional information needs.

Sincerely,

Jason Kuchnicki



TMBC, LLC - ROCKLIN

5472 CROSSING DRIVE
ROCKLIN, CA, 95677
Phone: (916)251-3800

Date	Stock	SQ #	Buyers Order and Agreement of Sale		Sales Person	Customer Number
16 APR 2025		9649713			KEVIN A RIZZO	2551593
Buyer			Home Phone	Mobile Phone	Email	
SETH ALM			775-687-9457		SALM@NDEP.NV.GOV	
Address				City	State	Postal
901 SOUTH STEWART ST. SUITE 4001				CARSON CITY	NV	89701
CO-Buyer			Home Phone	Mobile Phone	CO-Buyer Email	

Description of Purchase

Year	Brand	Model	New/Used	Serial #
2025	TRACKER	PGV175WT	NEW	
Inclusion Description				Serial #
Mercury Marine Mercury 90ELPT FourStroke				
Trailstar Custom SA Trailer				

Manufacturer Options			Dealer Options		Qty	
			VIP	VIP DISCOUNT CARD	1.00	0.00
			PDI	PREDELIVERY INSPECTION	1.00	0.00
			970	COLOR:BLUE	1.00	0.00
			971	TANDEM AXLE TRAILER WITH BRAKES	1.00	1,525.00
			972	NO COVER OR BIMINI	1.00	0.00
			973	ORDERED BOAT -TAX EXEMPT PURCHASE	1.00	0.00
Extras						

☐ ALL TRADE VALUES SUBJECT TO ADJUSTMENT IF CONDITION/EQUIPMENT ARE NOT AS REPRESENTED ON TRADE-IN AGREEMENT.

CUSTOMER ADVISED OF DESCRIPTION OF WARRANTY

Cust. Initials ☐ WHEN THIS BOX IS CHECKED, THE UNIT WHICH IS THE SUBJECT OF THIS CONTRACT IS BEING SOLD ON AN "AS IS" BASIS, THE ENTIRE RISK AS TO THE QUALITY AND PERFORMANCE OF THIS UNIT IS WITH THE PURCHASER

Cust. Initials ☐ WHEN THIS BOX IS CHECKED, THE UNIT HAS A 0% COSMETIC WARRANTY

Cust. Initials ☐ I WOULD LIKE MORE INFORMATION ON ADDITIONAL PRODUCT PROTECTION PLANS

PRICING	
Base Price	30,995.00
Freight & Prep	1,700.00
Options	0.00
Dealer Options	1,525.00
Trade Allowance	0.00
Sales Extras	0.00
PDI	0.00
Sales Price Before TTL	34,220.00
Down Payment	0.00
Grand Total	34,220.00

METHOD OF PAYMENT ☐ C ☐ OSF ☐ Finance

I have read the terms and conditions that accompany this agreement and accept all such terms and conditions and agree to be bound by same.

CUSTOMER APPROVAL _____ DATE _____

MANAGER APPROVAL _____ DATE _____

This agreement is not final and binding on Seller unless approved and signed by a manager of Seller.

Joe Lombardo
Governor



Tiffany Greenameyer
Director

Curtis Palmer
Deputy Director

Vacant
Administrator

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

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

Date: April 8, 2025
To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office
From: Michael Rankin, Executive Branch Budget Officer
Governor's Finance Office
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

GOVERNOR'S FINANCE OFFICE – OFFICE OF PROJECT MANAGEMENT

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the office requests to contract with former employee Teresa Carrillo to provide subject matter expertise in the state's legacy finance and human resources systems through statewide contract #99SWC-NV21-7577 with HAT Limited Partnership dba Manpower.

Additional Information:

Ms. Carrillo retired from the Governor's Finance Office, Office of Project Management, on January 11, 2025 and is receiving pension benefits. Her experience with the state's legacy finance and human resources systems are vital to the successful roll out of the human resources system and phase two of the finance system. The office requests to contract with Ms. Carrillo from May 19, 2025 to November 19, 2025.

Statutory Authority:

NRS 333.705(1)

REVIEWED: 

ACTION ITEM: _____



Joe Lombardo
Governor



STATE OF NEVADA
OFFICE OF PROJECT MANAGEMENT
3850 Arrowhead Dr. | Carson City, Nevada 89706
Telephone 775-687-7220 | opm@nv.gov

Executive Committee:
Tiffany Greenameyer, Director GFO
Joy Grimmer, Director DOA
Andy Matthews, Controller

Brian Bowles, Project Director
Brady Phillips, Administrator
Office of Project Management

April 28, 2025

To: Governor's Finance Office

Re: Teresa Carrillo Contract Request for Board of Examiners

Governor's Finance Office,

The Office of Project Management is requesting to hire Teresa Carrillo as a contractor through Manpower, utilizing the statewide contract at a rate of \$59 per hour to Ms. Carrillo. Ms. Carrillo is a retired employee of the State of Nevada. She retired in January 2025 from the Office of Project Management. Ms. Carrillo worked on both our Finance and Human Resources Management Teams as an ASO2 prior to retirement. Ms. Carrillo has a substantial amount of knowledge and experience in State service which will be beneficial in assisting OPM with the CORE.NV Project. Ms. Carrillo is requested to assist with the statewide Human Resources Management deployment, the NDOT financial deployment, and moving towards Phase 2 for the CORE.NV Project.

Thank you for your consideration.

Brady Phillips

Brady Phillips
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:	Teresa Carrillo			
Former Employee ID Number:	7564			
Former Job Title:	ASO2			
Former Employee Agency:	Office of Project Management			
Former Class and Grade:	Class:	07.217	Grade:	39
Former Employment Dates:	From:	12/18/1995	To:	1/11/25
Requesting Agency:	Office of Project Management			
Vendor:	HAT Limited Partnership DBA Manpower			

Please mark which of the following applies and complete Sections 'A' through 'M' below:

X	Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee.
	Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services.
A	Summarize scope of contract work. To provide subject matter expertise in the State's legacy finance and human resource systems. To be responsible for providing expert guidance on the optimization and management of these systems towards the implementation of CORE.NV. This includes, but is not limited to, assessing these current systems, recommending improvements, determining correlations between these legacy systems and CORE.NV, and ensuring compliance with state regulations and policies. Collaborate with stakeholders in all processes related to CORE.NV. Assist in the testing of CORE.NV. Assist in training end-users in the CORE.NV system. Additionally, assist in providing incident management and release management support, while offering strategic advice for future system upgrades or integrations to enhance efficiency and effectiveness statewide.
B	Document former job description. Ms. Carrillo retired as an ASO2 supporting both the Financial and Human Resources Teams at the Office of Project Management. Her work was assisting each team as required to outline scopes of work for CORE.NV, build the work required for CORE.NV, assist with testing, assist with training, and support go-live efforts for CORE.NV.
C	Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a timeframe for the transfer?

	Ms. Carrillo is being hired due to her ability to onboard to the Project quickly based upon her prior experience within the State working in both the Finance and Human Resources realms. She is also knowledgeable about the CORE.NV Project and required workload due to her time assigned to OPM. She will be able to provide positive assistance to the OPM Team more rapidly than another contractor without this experience, resulting in greater assistance to OPM and the realization of OPM's goal of successful CORE.NV go-live events in the future.
D	Explain why existing State employees within your agency cannot perform this function. OPM is understaffed with FTEs to conduct all necessary activities for the CORE.NV Project within the proposed timelines. OPM is reliant upon contractors and vendors, along with subject matter experts from other State agencies to be successful.
E	Document if the individual overseeing or establishing the contract is related to the contractor. If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750. Not applicable.
F	List contractors' hourly rate and employee's hourly rate. Hourly rate for Ms. Carrillo - \$59 Rate paid to Manpower - \$73.75
G	List the range of comparable State employee rates. This should include the job title, pay grade and hourly rate. ASO2, Grade 39, Step 10 Hourly Rate - \$54.93
H	Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent (10%). Additionally, has the contract term been limited as a result? Not applicable.
I	Document justification for hiring contractor. OPM is understaffed with FTEs to conduct all necessary activities for the CORE.NV Project within the proposed timelines. OPM is reliant upon contractors and vendors, along with subject matter experts from other State agencies to be successful. Ms. Carrillo is being hired due to her ability to onboard to the Project quickly based upon her prior experience within the State working in both the Finance and Human Resources realms. She is also knowledgeable about the CORE.NV Project and required workload due to her time assigned at OPM. She will be able to provide positive assistance to the OPM Team more rapidly than another contractor without this experience, resulting in greater assistance to OPM and the realization of OPM's goal of successful CORE.NV go-live events in the future.
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) Start 5/19/25 6 month approval through 11/19/25
L	Will the former employee be working full time or part time? If part time, how many hours? Hours worked will be based upon workload required at any given time. Workload is anticipated to be up to full time, with some weeks being part-time.
M	Is the former employee currently serving on any Boards or Commissions? If yes, identify which Board(s) or Commission(s). No.

Comments – Provide any additional comments:

Approval for Authorization to Contract with a Former Employee:

Brady Phillips

Signature of Agency Head Authorizing Request

4/28/25

Date

Purchasing Administrator Signature (if a Statewide Contract)

Date

Michael Rankin

Budget Analyst Signature

4/28/2025

Date

Clerk of the Board of Examiners Signature

Date



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

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

Date: April 16, 2025
To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office
From: Budd Milazzo, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

GOVERNOR'S FINANCE OFFICE

Agenda Item Write-up:

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

- Chapter 0100 Board of Examiners Policies
- Chapter 0200 Travel
- Chapter 0300 Cooperative Agreements and Contracts
- Chapter 1200 Mail Services
- Chapter 2600 Claims

Additional Information:

Section 0112 has been modified to state that the State Public Works Division Administrator has the authority to enter leases. Section 0114 reinstates the requirement to attach the BOE justification memo for retroactive contracts to CETS. Sections 0204, 0206, and 0210 have been modified to: reinstate the requirement for agencies to maintain travel policies; allow agency heads to approve reimbursements that exceed GSA rates in certain circumstances and cap lodging reimbursements at 150% of GSA-approved rates; add back the Camping policy; and add the requirement to receive pre-approval for all out of-country travel requests from the Governor's Office. Section 0218 reinstates the requirement for agencies to include meal reimbursement periods in their travel policies. Section 0230 removes the 10-day requirement for approving certain travel and moving expenses. Section 0304 reinstates the threshold for purchases not made on a contract. Section 0305 was modified to clarify agency solicitation thresholds for service contracts. Section 1210 removes the statement that the Mail Services Division will not be held liable

for damaged items in interdepartmental mail. Section 2622 removes the statement that the Clerk of the BOE may request approval for exceptional transactions.

Statutory Authority:

NRS 353.040

REVIEWED: 
ACTION ITEM: _____

REQUEST FOR CHANGES TO THE STATE ADMINISTRATIVE MANUAL (SAM)

Agency Code: 015

Department: Governor's Finance Office

Division (if applicable): Division of Internal Audits

Appointing authority: Tiffany Greenameyer

Agency contact (name, phone and e-mail): Craig Stevenson, (775) 687-0140,
c.stevenson@finance.nv.gov

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

Proposed BOE date: May 13, 2025

Proposed effective date: Upon approval

1. Reason/purpose for requested change:

Multiple changes are proposed to reinstate provisions of SAM that were previously deleted in error or that impact the statewide system of internal control. Section 0112 has been modified to state that the State Public Works Division Administrator has the authority to enter leases. Section 0114 reinstates the requirement to attach the BOE justification memo for retroactive contracts to CETS. Sections 0204, 0206, and 0210 have been modified to: reinstate the requirement for agencies to maintain travel policies; allow agency heads to approve reimbursements that exceed GSA rates in certain circumstances and cap lodging reimbursements at 150% of GSA-approved rates; add back the Camping policy; and add the requirement to receive pre-approval for all out-of-country travel requests from the Governor's Office. Section 0218 reinstates the requirement for agencies to include meal reimbursement periods in their travel policies. Section 0230 removes the 10-day requirement for approving certain travel and moving expenses. Section 0304 reinstates the threshold for purchases not made on a contract. Section 0305 was modified to clarify agency solicitation thresholds for service contracts. Section 1210 removes the statement that the Mail Services Division will not be held liable for damaged items in interdepartmental mail. Section 2622 removes the statement that the Clerk of the BOE may request approval for exceptional transactions.

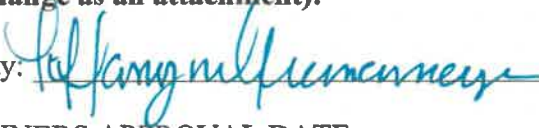
2. Explain how the recommended change(s) will benefit agencies or create consistencies or efficiencies, etc. (provide examples if applicable):

Agencies will benefit from clarified guidance on travel and procurement policies. Clarifying the thresholds for service contract solicitations may reduce agency workload.

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

The recommended changes will not have an adverse fiscal impact.

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

Appointing Authority: 

BOARD OF EXAMINERS APPROVAL DATE: _____

(for BOE use only)

Current Policy:

0112 Leases and Purchases of Real Property

- A. State Offices. The State Public Works Division has authority to lease and equip office space outside of State buildings whenever sufficient office space cannot be provided within State buildings. Building leases require approval in accordance with SAM 0107, with the exception of an office space lease less than one year. ([NRS 331.110](#)) The Attorney General shall approve each lease as to form and compliance with law.
- B. Storage Space. Leased space used strictly for storage is a service contract following normal contracting requirements.
- C. Land. The Division of State Lands acquires and holds all lands and interests in land owned or required by the State except the following.
 - 1. Lands or interests used or acquired for highway purposes.
 - 2. Lands or interests the title to which is vested in the Board of Regents of the Nevada System of Higher Education.
 - 3. Office buildings leased by the Administrator of the State Public Works Division.
 - 4. Lands used or acquired for the Legislature or its staff.

Revised Policy:

0112 Leases and Purchases of Real Property

- A. State Offices. The State Public Works Division *Administrator* has authority to lease and equip office space outside of State buildings whenever sufficient office space cannot be provided within State buildings. Building leases require approval in accordance with SAM 0107, with the exception of an office space lease less than one year. ([NRS 331.110](#)) The Attorney General shall approve each lease as to form and compliance with law.
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Final Policy:

0112 Leases and Purchases of Real Property

- A. State Offices. The State Public Works Division Administrator has authority to lease and equip office space outside of State buildings whenever sufficient office space cannot be provided within State buildings. Building leases require approval in accordance with SAM 0107, with the exception of an office space lease less than one year. ([NRS 331.110](#)) The Attorney General shall approve each lease as to form and compliance with law.
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 - 1. Lands or interests used or acquired for highway purposes.
 - 2. Lands or interests the title to which is vested in the Board of Regents of the Nevada System of Higher Education.
 - 3. Office buildings leased by the Administrator of the State Public Works Division.
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Current Policy:

0114 Retroactive Contracts

- A. In almost all circumstances, agency contracts require Governor's Finance Office (GFO) submission and Board of Examiners (BOE) approval prior to the vendor starting work. In rare instances where it is necessary for a vendor to start work, the agency should notify GFO as soon as practicable.
- B. When an agency submits a retroactive contract for inclusion on the action item agenda, support documentation submitted to GFO and provided to Board Members must include a memorandum explaining why the proposed contract should be approved retroactively. The memorandum must be on agency letterhead and approved by the agency head or designee.

Revised Policy:

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- A. In almost all circumstances, agency contracts require Governor's Finance Office (GFO) submission and Board of Examiners (BOE) approval prior to the vendor starting work. In rare instances where it is necessary for a vendor to start work, the agency should notify GFO as soon as practicable.
- B. When an agency submits a retroactive contract for inclusion on the action item agenda, support documentation submitted to GFO and provided to Board Members must include a memorandum explaining why the proposed contract should be approved retroactively. The memorandum must be on agency letterhead and approved by the agency head or designee. *The memorandum must be attached*

in CETS in the tab marked "Addl. Info" and the memo should be attached in the "Supporting Info (Prints on BOE Agenda)" area.

Final Policy:

0114 Retroactive Contracts

- A. In almost all circumstances, agency contracts require Governor's Finance Office (GFO) submission and Board of Examiners (BOE) approval prior to the vendor starting work. In rare instances where it is necessary for a vendor to start work, the agency should notify GFO as soon as practicable.
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Current Policy:

0204 Board of Examiners Travel Policy

- A. The Board of Examiners (BOE) establishes that agencies shall follow the Federal Government's [travel policy](#) as administered through the U.S. General Services Administration (GSA). In accordance with [NRS 281.160\(7\)](#) BOE shall establish the rate of reimbursement employees are entitled to receive while transacting public business. This rate must be the same as the comparable rate established for employees of the Federal Government. It is BOE policy that travel should be by the least expensive method available when such factors as total travel time, salary of employee, availability of agency cars or Fleet Services Division cars, and costs of transportation are considered.
- B. [NRS 281.160\(6\)](#) allows an agency to adopt a rate of reimbursement less than the amounts specified in [NRS 281.160\(1\)](#) where unusual circumstances make that rate desirable. An agency adopting such rates must submit their proposed policy to BOE for approval. The lesser rates may not be adopted until such approval.
- C. A person employed by an agency that has adopted a lesser reimbursement rate shall be reimbursed in accordance with agency policies.
- D. Employees are eligible for per diem, lodging and/or vehicle rental reimbursements only if they are 50 miles or more from their official duty station, unless the Board of Examiners has approved a policy for a given department that permits travel reimbursements within 50 miles of the assigned duty station.
- E. Advanced planning for travel will allow for the purchase of airline tickets at discounted rates.

Revised Policy:

0204 Board of Examiners Travel Policy

- A. ~~The Board of Examiners (BOE) establishes that agencies shall follow the Federal Government's travel policy as administered through the U.S. General Services Administration (GSA).~~ In accordance with NRS 281.160(7) BOE shall establish the rate of reimbursement employees are entitled to receive while transacting public business. This rate must be the same as the comparable rate established for employees of the Federal Government. *However, certain State policies may supersede the established federal guidelines or policy.* It is BOE policy that travel should be by the least expensive method available when such factors as total travel time, salary of employee, availability of agency cars or Fleet Services Division cars, and costs of transportation are considered.
- B. NRS 281.160 (6) allows an agency to adopt a rate of reimbursement less than the amounts specified in NRS 281.160 (1) where unusual circumstances make that rate desirable. An agency adopting such rates must submit their proposed policy to BOE for approval. The lesser rates may not be adopted until such approval.
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E. Advanced planning for travel will allow for the purchase of airline tickets at discounted rates.

Current Policy:

0206 Agency Procedures Regarding Travel

A. Because of the variety of internal agency process requirements, it is important for agencies to adopt agency-specific procedures in accordance with SAM 2416. The Board of Examiners (BOE) instructs all agencies to establish procedures regarding agency employees accurately requesting, approving, monitoring, and reporting all travel and per diem. These procedures should address, but may not be limited to, the following:

1. Required forms and instructions for completion of in-state and out-of-state travel requests.
2. Approval processes.
3. Verification for budget authority.
4. Submittal timeframe requirements for both travel requests and travel claims.
5. Estimating compensation while traveling.
6. Travel advances.
7. Procedure exceptions.

Revised Policy:

0206 Agency Procedures Regarding Travel

A. *The Board of Examiners (BOE) instructs all agencies to adopt agency specific policies regarding travel. The policies should address, but may not be limited to the following:*

1. *The hours and conditions during which an employee will be allowed to claim meals;*
2. *Overnight lodging, vehicles and per diem allowances withing fifty (50) miles principal duty station, if approved by the Board of Examiners;*
3. *Combining State business and personal travel;*
4. *Out-of-State travel requests;*
5. *Employees traveling as members of non-state agencies;*
6. *Use of private aircrafts;*
7. *The conditions under which an employee will be allowed to claim mileage while using the employee's personal vehicle; and*
8. *Camping while on official state business.*
 - a. *An employee camping while on official state business may claim up to a \$40 per night reimbursement while camping inside or outside of established campgrounds. Additionally, employees may also be allowed reimbursement for meals and incidentals in accordance with SAM 0210.*

B. Because of the variety of internal agency process requirements, it is important for agencies to adopt agency-specific procedures in accordance with SAM 2416. ~~The Board of Examiners (BOE) instructs all-a~~agencies ~~to-must~~ establish procedures regarding agency employees accurately requesting, approving, monitoring, and reporting all travel and per diem. These procedures should address, but

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3. Verification for budget authority.
4. Submittal timeframe requirements for both travel requests and travel claims.
5. Estimating compensation while traveling.
6. Travel advances.
7. Procedure exceptions

Final Policy:

0206 Agency Procedures Regarding Travel

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2. Overnight lodging, vehicles and per diem allowances withing fifty (50) miles principal duty station, if approved by the Board of Examiners;
3. Combining State business and personal travel;
4. Out-of-State travel requests;
5. Employees traveling as members of non-state agencies;
6. Use of private aircrafts;
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2. Approval processes.
3. Verification for budget authority.
4. Submittal timeframe requirements for both travel requests and travel claims.
5. Estimating compensation while traveling.
6. Travel advances.

Current Policy:

0210 Travel Status

- A. Employees in travel status shall receive reimbursement that matches the rates established by the General Services Administration (GSA) for the employee's primary destination. Maximum per diem reimbursement rates for lodging, meals, and incidental expenses are established by city/county and vary by season. State employees are directed to the GSA website <http://gsa.gov> and the link Per Diem Rates under the Travel drop-down menu to locate the current rates. Employees may receive reimbursement for breakfasts even though continental breakfasts are provided. Employees shall not claim full meals furnished to them during a conference, meeting, or other work function on their reimbursement request. Employees may not claim full meals if a meal is offered as part of a conference, meeting, or other work function even if the employee does not consume the meal offered, except when the department head has approved an exception when the following applies:
1. Employee has a food allergy and/or dietary restriction that preclude the employee from consuming the provided meal at a conference, meeting or other work function.
 2. If the condition above exists, agencies may allow employee to claim meal reimbursements for any meals provided at a conference, meeting or other work function that may pose a health risk to the employee if consumed.
- B. For out-of-state travel, employees are required to submit a Travel Request for approval prior to making any travel arrangements.
- C. Upon approval of the department head, agencies may make exceptions to the rate of reimbursement for lodging when one of the conditions below exist. The agency head shall determine and approve an appropriate rate of reimbursement.
1. Lodging is procured at a prearranged place such as a hotel where a meeting, conference or training session is held.
 2. Costs have escalated because of special events; lodging within prescribed allowances cannot be obtained nearby; and costs to commute to/from the nearby location exceed the cost savings from occupying less expensive lodging.
 - 1.

Revised Policy:

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- A. Employees in travel status shall receive reimbursement that matches the rates established by the General Services Administration (GSA) for the employee's primary destination. Maximum per diem reimbursement rates for lodging, meals, and incidental expenses are established by city/county and vary by season. State employees are directed to the GSA website <http://gsa.gov> and the link Per Diem Rates under the Travel drop-down menu to locate the current rates. Employees may receive reimbursement for breakfasts even though continental breakfasts are provided. Employees shall not claim full meals furnished to them during a conference, meeting, or other work function on their reimbursement request. Employees may not claim full meals if a meal is offered as part of a conference, meeting, or other work function even if the employee does not consume the meal offered, except when

the department head has approved an exception when the following applies:

1. Employee has a food allergy and/or dietary restriction that preclude the employee from consuming the provided meal at a conference, meeting or other work function.
 2. If the condition above exists, agencies may allow employee to claim meal reimbursements for any meals provided at a conference, meeting or other work function that may pose a health risk to the employee if consumed.
- B. For out-of-state travel, employees are required to submit a Travel Request for approval prior to making any travel arrangements. *All out-of-country travel requests must be submitted and receive approval from the Governor's Office prior to making any travel arrangements.*
- C. Upon approval of the department head, agencies may make exceptions to the rate of reimbursement for lodging when one of the conditions below exists. The agency head ~~shall determine and~~ *may approve an appropriate rate of reimbursement up to 150% of the established GSA rate.*
1. Lodging is procured at a prearranged place such as a hotel where a meeting, conference or training session is held.
 2. Costs have escalated because of special events; lodging within prescribed allowances cannot be obtained nearby; and costs to commute to/from the nearby location exceed the cost savings from occupying less expensive lodging.
 3. *Lodging is necessary to accommodate job duties that require the employee to be in a specific location at a designated time.*
- ~~2.D.~~ *In cases where extenuating circumstances exist, a higher rate of reimbursement for lodging may be approved. Such approval must be granted by the Clerk of the BOE, who will determine an appropriate rate of reimbursement. The approved rate may exceed the standard allowance to accommodate unique conditions.*
- ~~1.~~

Final Policy:

0210 Travel Status

- A. Employees in travel status shall receive reimbursement that matches the rates established by the General Services Administration (GSA) for the employee's primary destination. Maximum per diem reimbursement rates for lodging, meals, and incidental expenses are established by city/county and vary by season. State employees are directed to the GSA website <http://gsa.gov> and the link Per Diem Rates under the Travel drop-down menu to locate the current rates. Employees may receive reimbursement for breakfasts even though continental breakfasts are provided. Employees shall not claim full meals furnished to them during a conference, meeting, or other work function on their reimbursement request. Employees may not claim full meals if a meal is offered as part of a conference, meeting, or other work function even if the employee does not consume the meal offered, except when the department head has approved an exception when the following applies:
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- C. Upon approval of the department head, agencies may make exceptions to the rate of reimbursement for lodging when one of the conditions below exists. The agency head may approve up to 150% of the established GSA rate.
 - 1. Lodging is procured at a prearranged place such as a hotel where a meeting, conference or training session is held.
 - 2. Costs have escalated because of special events; lodging within prescribed allowances cannot be obtained nearby; and costs to commute to/from the nearby location exceed the cost savings from occupying less expensive lodging.
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- D. In cases where extenuating circumstances exist, a higher rate of reimbursement for lodging may be approved. Such approval must be granted by the Clerk of the BOE, who will determine an appropriate rate of reimbursement. The approved rate may exceed the standard allowance to accommodate unique conditions.

Current Policy:

0218 Travel Reimbursement

- A. All claims for travel reimbursement to an individual should be filed on a "Travel Expense Reimbursement Claim" (TE) form, as developed by each department. TE forms may not contain claims for expenses associated with travelers other than the traveler indicated on the form, even if the traveler paid for the other travelers' expenses. All areas of the TE form must be completed, including:
 - 1. start and end times of journey;
 - 2. destination;
 - 3. purpose of trip;
 - 4. official duty station; and
 - 5. authenticated signatures
- B. If applicable, hotel bills noting the employee name, date(s) of stay, and breakdown of costs by day are required for all lodging expenses. In addition to the reimbursable lodging rates, employees may be reimbursed for lodging taxes and fees. Lodging taxes are limited to the taxes on reimbursable lodging costs. For example, if the maximum lodging rate is \$50 per night, and the traveler elects to stay at a hotel that costs \$100 per night, the traveler can only claim the amount of taxes on \$50 which is the maximum authorized lodging amount. Meals will be reimbursed in accordance with the meals and incidental expense (M&IE) allowance for the primary destination. Receipts are not required for the M&IE allowance.

C. Employees may be reimbursed for the following:

1. Actual expenses incurred for parking or vehicle storage fees for private automobiles and commercial transportation costs (i.e., rideshare, taxi, shuttle, etc.). Gratuity will be reimbursed for commercial transportation costs up to 20%. Receipts are required (scanned copies of original receipts are acceptable).
2. Other miscellaneous reimbursable business-related expenses including: reasonable baggage fees, use of internet services, computers and other business machines, conference room rentals, and official telephone calls/service. Receipts are required (scanned copies of original receipts are acceptable).
3. Laundry cleaning/pressing services if the employee's official business related hotel stay is four (4) consecutive nights or longer. Receipts are required.
4. A meal rate approved by the Board of Examiners (BOE) for employees traveling outside the United States, commensurate with U.S. Department of State's meal allowances for foreign cities as listed in the U.S. Department of State publication, Maximum Travel Per Diem Allowance for Foreign Areas. The current foreign per diem rates can be accessed at the [U.S. Department of State website](https://www.state.gov/perdiem/).
5. Using their own personal vehicle for the State's convenience, at the standard mileage reimbursement rate for which a deduction is allowed for travel for federal income tax. The Governor's Finance Office shall issue an All-Agency Memorandum periodically reflecting the current rate in effect at that time.
6. Using their own personal vehicle for their own convenience at one-half the standard mileage reimbursement rate.
7. Using their own personal vehicle for any miles driven in excess of their normal commute while on official State business. An employee's normal commute is the roundtrip mileage between the employee's residence and their official duty station. Board members traveling on State business can list their duty station as their home address.
8. The standard credit card fee for cash advance transactions is reimbursable by the State to the employee for every authorized advance obtained through the use of an ATM. Said expense should be treated for budgeting purposes as any other travel expense and should be limited to one (1) per authorized trip.
9. Additional bank ATM facility charges relating to obtaining an authorized advance from an ATM are also reimbursable by the State to the employee, and should be limited to one (1) per authorized trip.
10. Interest charges incurred due to delays beyond the control of the traveler will be travel expenses reimbursable by the employee's agency.

D. The claimant's signature on the TE form attests to the accuracy of the claim. A supervisor, manager, or designee must sign the TE form approving the appropriateness of the travel. Travel claims must be submitted within one month of completion of travel unless prohibited by exceptional circumstance. An employee cannot sign as the authorizing signature on any travel voucher made out

in their own name unless that employee is the head of the agency. All TE forms must be retained either by the travelers' agency or fiscal agency if electronic or facsimile copies are used for payment purposes pursuant to SAM 2616 (Supporting Documentation for Transactions).

- E. Alternate documentation and/or procedures which provide at least the level of control described in this section are acceptable, but the documentation must be specified in the agency approved travel policy. For the purposes of this chapter, a fiscal agency is an organization that performs accounting transactions and budgeting functions for a given department, division, agency, or office within the Executive Branch of State government.

1. The administrative head or their designee must reconcile cash advances to actual travel taken.

Revised Policy:

0218 Travel Reimbursement

- A. All claims for travel reimbursement to an individual should be filed on a "Travel Expense Reimbursement Claim" (TE) form, as developed by each department. TE forms may not contain claims for expenses associated with travelers other than the traveler indicated on the form, even if the traveler paid for the other travelers' expenses. All areas of the TE form must be completed, including:
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 5. authenticated signatures
- B. If applicable, hotel bills noting the employee name, date(s) of stay, and breakdown of costs by day are required for all lodging expenses. In addition to the reimbursable lodging rates, employees may be reimbursed for lodging taxes and fees. Lodging taxes are limited to the taxes on reimbursable lodging costs. For example, if the maximum lodging rate is \$50 per night, and the traveler elects to stay at a hotel that costs \$100 per night, the traveler can only claim the amount of taxes on \$50 which is the maximum authorized lodging amount. Meals will be reimbursed in accordance with the meals and incidental expense (M&IE) allowance for the primary destination. Receipts are not required for the M&IE allowance. *Pursuant to SAM 0206, the hours and conditions for which employees are allowed to claim meals must be included within each agency's travel policy.*
- C. Employees may be reimbursed for the following:
1. Actual expenses incurred for parking or vehicle storage fees for private automobiles and commercial transportation costs (i.e., rideshare, taxi, shuttle, etc.). Gratuity will be reimbursed for commercial transportation costs up to 20%. Receipts are required (scanned copies of original receipts are acceptable).
 2. Other miscellaneous reimbursable business-related expenses including: reasonable baggage fees, use of internet services, computers and other business machines, conference room rentals, and official telephone calls/service. Receipts are required (scanned copies of original receipts are acceptable).

3. Laundry cleaning/pressing services if the employee's official business related hotel stay is four (4) consecutive nights or longer. Receipts are required.
 4. A meal rate approved by the Board of Examiners (BOE) for employees traveling outside the United States, commensurate with U.S. Department of State's meal allowances for foreign cities as listed in the U.S. Department of State publication, Maximum Travel Per Diem Allowance for Foreign Areas. The current foreign per diem rates can be accessed at the [U.S. Department of State website](#).
 5. Using their own personal vehicle for the State's convenience, at the standard mileage reimbursement rate for which a deduction is allowed for travel for federal income tax. The Governor's Finance Office shall issue an All-Agency Memorandum periodically reflecting the current rate in effect at that time.
 6. Using their own personal vehicle for their own convenience at one-half the standard mileage reimbursement rate.
 7. Using their own personal vehicle for any miles driven in excess of their normal commute while on official State business. An employee's normal commute is the roundtrip mileage between the employee's residence and their official duty station. Board members traveling on State business can list their duty station as their home address.
 8. The standard credit card fee for cash advance transactions is reimbursable by the State to the employee for every authorized advance obtained through the use of an ATM. Said expense should be treated for budgeting purposes as any other travel expense and should be limited to one (1) per authorized trip.
 9. Additional bank ATM facility charges relating to obtaining an authorized advance from an ATM are also reimbursable by the State to the employee, and should be limited to one (1) per authorized trip.
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- D. The claimant's signature on the TE form attests to the accuracy of the claim. A supervisor, manager, or designee must sign the TE form approving the appropriateness of the travel. Travel claims must be submitted within one month of completion of travel unless prohibited by exceptional circumstance. An employee cannot sign as the authorizing signature on any travel voucher made out in their own name unless that employee is the head of the agency. All TE forms must be retained either by the travelers' agency or fiscal agency if electronic or facsimile copies are used for payment purposes pursuant to SAM 2616 (Supporting Documentation for Transactions).
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Final Policy:

0218 Travel Reimbursement

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 3. Laundry cleaning/pressing services if the employee's official business related hotel stay is four (4) consecutive nights or longer. Receipts are required.
 4. A meal rate approved by the Board of Examiners (BOE) for employees traveling outside the United States, commensurate with U.S. Department of State's meal allowances for foreign cities as listed in the U.S. Department of State publication, Maximum Travel Per Diem Allowance for Foreign Areas. The current foreign per diem rates can be accessed at the [U.S. Department of State website](#).

5. Using their own personal vehicle for the State's convenience, at the standard mileage reimbursement rate for which a deduction is allowed for travel for federal income tax. The Governor's Finance Office shall issue an All-Agency Memorandum periodically reflecting the current rate in effect at that time.
 6. Using their own personal vehicle for their own convenience at one-half the standard mileage reimbursement rate.
 7. Using their own personal vehicle for any miles driven in excess of their normal commute while on official State business. An employee's normal commute is the roundtrip mileage between the employee's residence and their official duty station. Board members traveling on State business can list their duty station as their home address.
 8. The standard credit card fee for cash advance transactions is reimbursable by the State to the employee for every authorized advance obtained through the use of an ATM. Said expense should be treated for budgeting purposes as any other travel expense and should be limited to one (1) per authorized trip.
 9. Additional bank ATM facility charges relating to obtaining an authorized advance from an ATM are also reimbursable by the State to the employee, and should be limited to one (1) per authorized trip.
 10. Interest charges incurred due to delays beyond the control of the traveler will be travel expenses reimbursable by the employee's agency.
- D. The claimant's signature on the TE form attests to the accuracy of the claim. A supervisor, manager, or designee must sign the TE form approving the appropriateness of the travel. Travel claims must be submitted within one month of completion of travel unless prohibited by exceptional circumstance. An employee cannot sign as the authorizing signature on any travel voucher made out in their own name unless that employee is the head of the agency. All TE forms must be retained either by the travelers' agency or fiscal agency if electronic or facsimile copies are used for payment purposes pursuant to SAM 2616 (Supporting Documentation for Transactions).
- E. Alternate documentation and/or procedures which provide at least the level of control described in this section are acceptable, but the documentation must be specified in the agency approved travel policy. For the purposes of this chapter, a fiscal agency is an organization that performs accounting transactions and budgeting functions for a given department, division, agency, or office within the Executive Branch of State government.
1. The administrative head or their designee must reconcile cash advances to actual travel taken.

Current Policy:

0230 Travel & Moving Expenses on Transfer or Hire of Employee

- A. [NRS 281.167](#) defines State minimum requirements for authorizing reimbursement of travel and

moving expenses with regard to the transfer or hire of State employees. All requests for payment of travel expenses, subsistence allowances and moving expenses must be submitted to the Clerk of the Board of Examiners (Clerk) before obligations are incurred. The Clerk will approve or deny and return the request to the agency within ten (10) days. An estimate of costs to be incurred must be provided with the request and include the following, at a minimum:

1. A listing of the individual (s) being considered for reimbursement.
2. An explanation of the purpose of the reimbursement including:
 - a. For new hires, an explanation detailing the position's critical need and why this need cannot otherwise be filled.
 - b. For transfers, one of two criteria must be met:
 - i. An explanation of how the transfer is for the convenience of the State and not for the convenience of the employee; or
 - ii. An explanation of the critical need being met by the transfer, including an explanation of why this need cannot otherwise be filled.
3. The dates the obligations will be incurred.
4. A detailed estimate of the total expenses including an itemization of travel costs, per diem rates and moving expenses.

B. Claims are submitted for payment in the same manner as other travel claims against the State and must include a copy of the approved request along with supporting receipts for all moving expense reimbursements. Agencies must ensure that funds are available within their existing budgets.

Revised Policy:

0230 Travel & Moving Expenses on Transfer or Hire of Employee

A. [NRS 281.167](#) defines State minimum requirements for authorizing reimbursement of travel and moving expenses with regard to the transfer or hire of State employees. All requests for payment of travel expenses, subsistence allowances and moving expenses must be submitted to the Clerk of the Board of Examiners (Clerk) before obligations are incurred. ~~The Clerk will approve or deny and return the request to the agency within ten (10) days.~~ An estimate of costs to be incurred must be provided with the request and include the following, at a minimum:

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Current Policy:

0304 Special Approvals

The following procurements require prior approval from certain agencies before any order or solicitation.

- A. New or used vehicles require Board of Examiners (BOE) approval. For the purposes of this section, a “vehicle” is any wheeled apparatus that would generally require a license plate, all-terrain vehicles (ATV), utility task vehicles (UTV), side-by-sides, aircraft, watercraft, and heavy equipment. Agencies shall refer to SAM 1300 on policies for State Vehicles.
- B. Information Technology projects with combined goods and services require review and approval pursuant to SAM 1600.
- C. Computers, laptops, file servers, software and information systems require preapproval pursuant to SAM 1600.
- D. Telecommunications equipment requires preapproval pursuant to SAM 1600.
- E. Contracts that include credit card payment processing require preapproval from the State Treasurer’s Office and possibly the Board of Finance (BOF).
- F. Occasionally agencies have a need to evaluate a piece of equipment before it is purchased. These try and buy acquisitions must be approved in writing by State Purchasing prior to the evaluation period.

Revised Policy:

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- C. Computers, laptops, file servers, software and information systems require preapproval pursuant to SAM 1600.
- D. Telecommunications equipment requires preapproval pursuant to SAM 1600.
- E. ~~Contracts that include credit card payment processing require preapproval from the State Treasurer’s Office and possibly the Board of Finance (BOF).~~ *Any purchase, not available on contract, over \$4,999.99 requires preapproval from State Purchasing.*
- F. Occasionally agencies have a need to evaluate a piece of equipment before it is purchased. These try and buy acquisitions must be approved in writing by State Purchasing prior to the evaluation period.

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- F. Occasionally agencies have a need to evaluate a piece of equipment before it is purchased. These try and buy acquisitions must be approved in writing by State Purchasing prior to the evaluation period.

Current Policy:

0305 Competition Requirements

- A. Agencies are generally encouraged to procure under existing contracts before conducting separate competition and contract.
- B. The determination of what type of procurement is appropriate partially depends on the estimated project value. The estimated project value of a contract is the total potential revenue and/or expense to the State and partners, customers, and clients. The source of the funds makes no difference, whether collected from customers or clients as a fee, part of a grant, or a general fund appropriation.
 - 1. When the State will pay the vendor, the total project value is the total amount that may be paid to a vendor over the life of the contract.
 - 2. When the vendor will pay the State, the total project value is the total amount that may be earned over the life of the contract.
 - 3. When the contract includes both revenue and expense, the total project value is the absolute value of projected revenue plus expected expense, not net value of one subtracted from the other. For example, on contracts where the vendor provides a service paid for by customer facing fees, the project value includes those fees as revenue earned by the State and funds expensed by the State

(e.g., \$20,000 in vendor collected fees and \$20,000 in expenditures spent supporting the vendor system is a project with a value of \$40,000 not a value of \$0.

C. The following dollar limits apply when conducting competition as part of a proposed purchase.

1. All purchases of goods worth less than \$5,000 or services worth less than \$25,000 may be made by agencies after an informal process. See SAM 0313.
2. Purchases of goods valued at more than \$5,000, but less than \$50,000 require review by State Purchasing after an informal process. See SAM 03130.
3. Purchases of goods of \$50,000 or more must be made by State Purchasing using a formal solicitation process. See SAM 0318 or SAM 03190.
4. Purchases of services of at least \$25,000 but less than \$100,000 must be made using a formal solicitation process. An agency may choose to conduct this formal solicitation itself or ask State Purchasing to conduct the formal solicitation. See SAM 03190.
5. Purchases of services of \$100,000 or more must be made by State Purchasing using a formal solicitation process. See SAM 03190.

D. When goods and services are combined, the purchase shall be treated as a contract for services. This requirement helps prevent the problem of splitting goods and services to circumvent the required approvals based on dollar thresholds.

E. It is the Board of Examiners (BOE) general policy that service contracts be solicited every four years. However, there are often valid reasons for entering into a longer or shorter contract and an agency may request a different term. State Purchasing makes the final determination on the length of a proposed contract term and/or inclusion of option years that will yield best value for the State.

F. State Purchasing shall authorize contracts for leasing equipment unless otherwise specifically provided by law. (NRS 333.150) Agencies must contact State Purchasing prior to any rental, lease or time pay agreements for any supplies, material or equipment that are not available on an existing statewide contract. No rental or lease agreements may be signed without approval of State Purchasing, except for short-term rentals not exceeding \$5,000. Agencies are responsible for ensuring staff operating rented equipment are appropriately qualified.

G. Questions regarding solicitation requirements should be addressed to State Purchasing.

Revised Policy:

0305 Competition Requirements

- A. Agencies are generally encouraged to procure under existing contracts before conducting separate competition and contract.
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3. Purchases of goods of \$50,000 or more must be made by State Purchasing using a formal solicitation process. See SAM 0318 or SAM 0319.
4. Purchases of services *with an estimated contract value* of at least \$25,000 *per fiscal year, but less than or at least \$100,000 in estimated total contract value*, -must be made using a formal solicitation process. *If the estimated contract value is less than \$25,000 per fiscal year and less than \$100,000 in total, but exceeds \$25,000 in total value, An-the* agency may ~~choose to conduct this-the~~ formal solicitation itself or ask State Purchasing to conduct the formal solicitation. See SAM 0319.
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Current Policy:

1210 Inter-Departmental Mail

- A. The Mail Services Division offers inter-departmental mail service to all participating agencies in Carson City, Las Vegas, and Reno. Mail going to agencies outside our service area or to non-participating agencies must be mailed via the U.S. Postal Service. Further information regarding inter-departmental mail service can be found by calling the Mail Services Division, at 775-684-1860 in Carson City, or 702-486-2485 in Las Vegas.
- B. If your agency is not currently participating in interdepartmental mailing but would like to sign up, please notify Mail Services at mailservices@admin.nv.gov.
- C. Interoffice mail services are charged per budget account at the beginning of the fiscal year. Any mailstops added during the fiscal year will be added and charged in the following budget cycle.
- D. Agencies that choose not participate in interoffice mail are welcome to drop off interoffice mail for participating agencies. Additionally, mail going to the USPS and needing postage added can be dropped off to the northern or southern facility to have postage applied and charged back to the proper budget account.
- E. Addressing Interdepartmental Mail
 1. To avoid delays in delivery or potential return of your inter-departmental mail, be sure to address your mail pieces properly by including:

- a. The recipient's agency fully written out (do not use an acronym).
 - b. The destination city (e.g., Carson City, Las Vegas, Reno).
 - c. The recipient's first and last name.
 - d. The sending agency, name of sender, and budget account number.
 - e. Many agencies have Finance, Personnel, Accounting, etc., so please be specific.
 - f. Please limit the use of abbreviations.
 - g. Many agencies have northern and southern offices, please be specific to the location you are mailing to (CC for Carson City, LV for Las Vegas, and Reno).
2. Interdepartmental mailing is not available in rural areas such as Elko, Ely, Fallon, Lovelock, etc. If your office is in a rural area, mail needs to be sent via USPS. A list of participating agencies, their addresses, and budget account numbers (BA#) can be provided by Mail Services upon request.
 3. Interdepartmental correspondence should be placed in reusable envelopes. The previous address should be marked out when the new address is applied.
 4. If using a different envelope than a reusable envelope, please follow the same addressing instructions above, but make sure to indicate that it is "interdepartmental."
 5. Packages weighing over 25 pounds will be sent via FedEx ground.
 6. High-value and breakable items such as computers, laptops, and monitors are not recommended for interdepartmental mailing and should be sent via FedEx Ground with proper insurance.
 7. The Mail Services Division will not be held liable for any damaged items in interdepartmental transit.
 8. Each agency must have incoming and outgoing mail baskets.
 9. Inter-departmental and outgoing mail should be separated and labeled to facilitate pickups and deliveries. Further information regarding inter-departmental mail service, or any of the other types of services offered by Mail Services Division, can be obtained by calling the Mail Services Division, at 775-684-1860 in Carson City, or 702-486-2485 in Las Vegas or emailing them at mailservices@admin.nv.gov.

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Current Policy:

2622 Stale Claims

- A. **Stale claim** is defined in [NRS 353.097\(1\)](#).
- B. Pursuant to statute, the BOE may authorize its Clerk (the Director of the Governor's Finance Office), or a person designated by the Clerk, to approve stale claims on behalf of the BOE. The BOE has authorized the Clerk to approve stale claims. The Clerk may request approval from the BOE for exceptional transactions. Pursuant to statute, agencies may pay from the appropriate budget account in the current fiscal year (i.e., the budget account from which the claim would have been paid had it been received prior to the close of the fiscal year), if funding is available, a stale claim of the State agency which is:
 1. Less than \$100; or
 2. For medical expenses pursuant to a claim from a third-party administrator; or
 3. For payroll expenses.
- C. All other stale claims must be submitted to the Budget Division for approval.
- D. When submitting a stale claim, the agency must specify whether the stale claim will be paid from agency resources or from the Stale Claims Account established pursuant to NRS 353.097(2). In some cases, partial payment may be made from the Stale Claims Account and partial payment from the current year funds of the budget account where the claim was incurred.
- E. Payment of stale claims from the Stale Claims Account for an agency may not exceed the amount reverted by that agency for the fiscal year during which the claims were incurred. If the stale claims of an agency exceed the amount reverted for the fiscal year in which the obligations represented by the stale claims were incurred, the State agency may:
 1. Pay the balance from the appropriate budget account with current year funds; or
 2. If savings cannot be generated to cover the stale claims expenditure within the current fiscal year, request Interim Finance Committee Contingency Account funds or, if the Legislature is in session, a supplemental appropriation.

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

Revised Policy:

2622 Stale Claims

- A. **Stale claim** is defined in [NRS 353.097\(1\)](#).
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 3. For payroll expenses.
- C. All other stale claims must be submitted to the Budget Division for approval.
- D. When submitting a stale claim, the agency must specify whether the stale claim will be paid from agency resources or from the Stale Claims Account established pursuant to NRS 353.097(2). In some cases, partial payment may be made from the Stale Claims Account and partial payment from the current year funds of the budget account where the claim was incurred.
- E. Payment of stale claims from the Stale Claims Account for an agency may not exceed the amount reverted by that agency for the fiscal year during which the claims were incurred. If the stale claims of an agency exceed the amount reverted for the fiscal year in which the obligations represented by the stale claims were incurred, the State agency may:
1. Pay the balance from the appropriate budget account with current year funds; or
 2. If savings cannot be generated to cover the stale claims expenditure within the current fiscal year, request Interim Finance Committee Contingency Account funds or, if the Legislature is in session, a supplemental appropriation.
- F. Stale claims from available federal grants or from a permanent fund other than the State General Fund or the State Highway Fund may be paid from the appropriate budget account with current year funds once approved. For non-General Fund or non-Highway Fund stale claims, the payment from current year funds cannot exceed the amount that was available to pay the claim in the account at the close of the fiscal year in which the obligation was incurred.

Final Policy:

2622 Stale Claims

- A. **Stale claim** is defined in [NRS 353.097\(1\)](#).
- B. Pursuant to statute, the BOE may authorize its Clerk (the Director of the Governor's Finance Office), or a person designated by the Clerk, to approve stale claims on behalf of the BOE. The BOE has authorized the Clerk to approve stale claims. Pursuant to statute, agencies may pay from the appropriate budget account in the current fiscal year (i.e., the budget account from which the claim would have been paid had it been received prior to the close of the fiscal year), if funding is available, a stale claim of the State agency which is:
 - 1. Less than \$100; or
 - 2. For medical expenses pursuant to a claim from a third-party administrator; or
 - 3. For payroll expenses.
- C. All other stale claims must be submitted to the Budget Division for approval.
- D. When submitting a stale claim, the agency must specify whether the stale claim will be paid from agency resources or from the Stale Claims Account established pursuant to NRS 353.097(2). In some cases, partial payment may be made from the Stale Claims Account and partial payment from the current year funds of the budget account where the claim was incurred.
- E. Payment of stale claims from the Stale Claims Account for an agency may not exceed the amount reverted by that agency for the fiscal year during which the claims were incurred. If the stale claims of an agency exceed the amount reverted for the fiscal year in which the obligations represented by the stale claims were incurred, the State agency may:
 - 1. Pay the balance from the appropriate budget account with current year funds; or
 - 2. If savings cannot be generated to cover the stale claims expenditure within the current fiscal year, request Interim Finance Committee Contingency Account funds or, if the Legislature is in session, a supplemental appropriation.
- F. Stale claims from available federal grants or from a permanent fund other than the State General Fund or the State Highway Fund may be paid from the appropriate budget account with current year funds once approved. For non-General Fund or non-Highway Fund stale claims, the payment from current year funds cannot exceed the amount that was available to pay the claim in the account at the close of the fiscal year in which the obligation was incurred.

Joe Lombardo
Governor



Tiffany Greenameyer
Director

Curtis Palmer
Deputy Director

Vacant
Administrator

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

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

Date: April 9, 2025
To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office
From: Rosa Rogula, Executive Branch Budget Officer
Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

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

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

Agenda Item Write-up:

Pursuant to NRS 322.060 and 322.065, the division requests approval of a Land Lease Agreement with the 501(c)(3) non-profit organization, Campus for Hope to deliver transitional housing to homeless individuals and families as well as supportive homelessness assistance and prevention services.

Additional Information:

This lease would authorize Campus for Hope to occupy approximately 20 acres of the northern portion of Southern Nevada Adult Mental Health Services, with an option to extend the leased area by either 2.4 or 3.6 acres, depending on the availability of state-owned ground once the state's new forensic hospital is completed. The lease includes a 49-year term with five 10-year options to renew, for a maximum possible term of 99 years (NRS 322.070).

Statutory Authority:
NRS 322.060

REVIEWED: PL

ACTION ITEM: _____



Nevada Division of
STATE LANDS

STATE OF NEVADA
Department of Conservation & Natural Resources

Joe Lombardo, *Governor*
James A. Settlemeyer, *Director*
Charles Donohue, *Administrator*

MEMORANDUM

Date: April 8, 2025

To: Rosa Rogula, Executive Branch Budget Officer, Governor's Finance Office

From: Charlie Donohue, Administrator, Division of State Lands

Subject: BOE Agenda Item for May 2025 and IFC Agenda Item for June 2025:
Lease to the Campus for Hope Foundation (Campus for Hope) at the Southern Nevada Adult Mental Health Services (SNAMHS) Campus, Las Vegas

Pursuant to NRS 322.060 and 322.065, we are requesting the enclosed Lease Agreement with the 501(c)(3) non-profit organization, Campus for Hope, be placed on the Board of Examiners (BOE) May 2025 and the Interim Finance Committee (IFC) June 2025 agendas.

The purpose of the lease is to deliver transitional housing to homeless individuals and families as well as supportive homelessness assistance and prevention services.

This lease would authorize Campus for Hope to occupy approximately 20 acres of the northern portion of SNAMHS, with an option to extend the leased area by either 2.4 or 3.6 acres, depending on the availability of state-owned ground once the state's new forensic hospital is completed. The lease includes a 49-year term with five 10-year options to renew, for a maximum possible term of 99 years (NRS 322.070).

Pursuant to NRS 322.065, the State Land Registrar may lease land on behalf of the State to a non-profit organization that is affiliated by contract with an agency of the State. Campus for Hope is affiliated by a Services Agreement ("Contract") with the Department of Health and Human Services (DHHS). The lease may be granted for such consideration as the State Land Registrar determines reasonable based on an evaluation of the costs and benefits to the State and the written recommendation of the Director of DHHS. Upon the recommendation of the Director of DHHS, the State Land Registrar has determined the lease may be issued for no monetary consideration due to the substantial private and public investment in the Campus for Hope project and the resulting public benefits that will be derived pursuant to NRS 231.2711.

The lease would become effective the first day of the first month after each of the following has occurred: approval of the Contract by the BOE, approval of the lease by BOE and IFC, and the relocation of existing programs and services within the leased area.

If you have any questions or require additional information, please do not hesitate to contact Ellery Stahler at estahler@lands.nv.gov or (775) 684-2711. Thank you.

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

**REAL PROPERTY LEASE SUMMARY
(FOR BOARDS - COMMISSIONS - STORAGE)**

1. Tenant: Campus for Hope Foundation
701 S. Carson Street, Suite 200
Carson City, Nevada 89701

Remarks: This is a lease on the Southern Nevada Adult Mental Health Services Campus to deliver transitional housing to homeless individuals and families as well as supportive homelessness assistance and prevention services.

Exceptions/Special notes:

2. Name of Lessor: Nevada Division of State Lands

3. Address of Lessor: 901 S. Stewart St. Suite 5003
Carson City, NV 89701

4. Property Contact: Cody Phinney, Administrator
Division of Public and Behavioral Health
(775) 742-9963

5. Address of Lease property: 6171 W. Charleston Blvd, Las Vegas, NV 89146

a. Square Footage: ☒ Rentable ☒ Usable 871,200

b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improve-ment cost per square foot	Base Rent cost per square foot	Actual or Approximate cost per square foot
	\$ -	588	\$ -	Effective Date - December 31, 2073			
	\$ -	120	\$ -	January 1, 2074 - December 31, 2083			
	\$ -	120	\$ -	January 1, 2084 - December 31, 2093			
	\$ -	120	\$ -	January 1, 2094 - December 31, 2103			
	\$ -	120	\$ -	January 1, 2104 - December 31, 2113			
	\$ -	120	\$ -	January 1, 2114 - December 31, 2123			
			\$ -				
			\$ -				
			\$ -				
c. Total Lease Consideration:		1,188	\$ -				

d. Total Improvement Cost: \$0.00

e. Option to renew: ☒ Yes ☐ No Renewal terms: 49-years with five 10-year renewal options

f. Holdover notice: # of Days required Holdover terms: None

g. Term: 49 Years

h. Pass-thrus/CAM/Taxes ☐ Landlord ☒ Tenant

i. Utilities: ☐ Landlord ☒ Tenant

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

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

l. Comparable Area Market Rate Average: \$0.56/sf

m. Specific termination clause in lease: Breach/Default

n. Lease will be paid for by Agency Budget Account Number: N/A - lease of state property

6. This lease constitutes:
- ☐ An extension of an existing lease
 - ☐ An addition to current facilities (requires estimated expenses)
 - ☐ A relocation (requires estimated expenses)
 - ☐ A new location (requires estimated expenses)
 - ☒ Other

a. Estimated Expenses: Moving: N/A Furnishings: N/A Data/Phones: N/A

REAL PROPERTY LEASE SUMMARY
(FOR BOARDS - COMMISSIONS - STORAGE)

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 _____ N/A _____

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

Charles Dornier 4/8/25
Authorized Agency Signature Date
staff count

7. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☐ YES	☒ NO
b. Is the Lessor Exempt from obtaining a Business License?	☒ YES	☐ NO
*If Yes, explain.... Lessor is the State. Lessee is a 501(c)(3) non-profit organization		
c. Does the Lessor have a current Nevada State Business License?	☐ YES	☒ NO
**If No, explain.... Lessor is the State.		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☐ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	N/A	
f. Nevada Business ID Number:	N/A	Exp: _____
g. Is the Lessor's Name the same as the Legal Entity Name?	☐ YES	☐ NO
**If No, explain.... N/A		
h. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

8. 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

For Board of Examiners ☒ YES ☐ NO

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522 Sections 4, 5, 13, and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1052	ADMINISTRATION – State Archives	\$55,871
2891	ADMINISTRATION – Nevada State Library	\$41,422
	Total	\$97,293

Joe Lombardo
Governor



Joy Grimmer
Director

Robert Ragar
Deputy Director

Daniel Marlow
Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Administrative Services Division
209 E Musser St, Rm 304 | Carson City, NV 89701
Phone: (775) 531-3200

DATE: 02 April 2025
TO: Roxana Gifford, Executive Branch Budget Officer
FROM: Daniel Marlow, Administrator 
THROUGH: Cyndi Shein, Assistant Administrator 
State Library and Archives
SUBJECT: Request for May 2025 Board of Examiners - Salary Adjustment Funds WP#25SA1052

The State Library and Archives is projecting a shortfall in salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 4, of the 82nd Legislative Session, the State Library and Archives is requesting the revenue and authority to meet any salary deficiencies that could not be absorbed by the 12% salary increase for Fiscal Year 2024 and the 11% salary increase for Fiscal Year 2025. The division is requesting \$55,871 in Salary Adjustment Funds to cover the projected shortfall through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay Personnel Services, category 01, expenditures through the end of the fiscal year.

Attached is a supporting spreadsheet to support the State Library and Archives calculations.

Thank you for your time and consideration in this manner.

CC: Jennifer Victor, Management Analyst III
Administrative Services Division

1,137,536

PCN	MSI DATE	Filled Grade	Step	Step diff	Salary Merit Increase	ER Fringe	Total Payroll Projection through fiscal year				NEBS130 Yr2 Benefits	NEBS130 Yr2 Salary	NEBS130 PCN Cost	Projected Shortfall	12% and 11% COLA	Salary Adjustment Funds BOE Request
							PP20	PP21	PP22	PP28						

1	7/1/2025	41	10	00	6,064.44	1,568.26	6,065.95	6,794.44	6,064.44	2,425.78	162,722.46	\$101,163	\$33,098	\$134,261	24,602.84	\$24,602.84
2	9/30/2025	33	04	06	3,388.67	839.20	3,243.98	3,975.17	3,243.17	1,298.07	67,970.50	\$60,331	\$33,714	\$94,045	14,672.50	\$0.00
3	5/13/2025	33	03	05	3,245.62	803.27	3,107.33	3,836.22	3,106.22	1,298.25	89,802.25	\$73,600	\$27,042	\$100,642	17,899.52	\$0.00
4	2/20/2026	37	03	07	3,860.32	955.38	3,693.01	4,424.24	3,694.24	1,477.70	100,705.49	\$72,144	\$38,218	\$110,362	17,545.42	\$0.00
5	2/16/2026	37	10	00	5,049.50	1,305.80	5,051.91	5,779.50	5,049.50	2,019.80	138,250.39	\$84,229	\$29,350	\$113,579	20,484.49	\$20,484.49
6	6/5/2025	28	10	01	3,485.82	901.43	3,486.38	4,215.82	3,485.82	1,394.33	98,426.27	\$57,637	\$23,465	\$81,102	14,017.32	\$14,017.32
7	7/25/2025	33	09	00	4,076.44	1,650.41	3,895.37	4,624.91	3,894.91	1,557.96	108,470.94	\$70,437	\$26,357	\$96,794	17,130.28	\$11,676.94
8	4/9/2025	23	02	01	2,116.80	527.27	2,099.69	2,768.93	2,116.80	846.72	61,779.20	\$35,912	\$18,655	\$54,567	8,793.80	\$7,212.20
9		25	01	06	2,139.16	531.69	1,047.84	2,786.05	2,056.05	822.42	43,273.87	\$23,253	\$15,257	\$38,510	5,655.13	\$4,763.87
10	2/16/2026	33	03	05	3,245.62	803.27	3,107.35	3,836.22	3,106.22	1,242.49	86,440.94	\$65,822	\$25,331	\$91,153	16,007.91	\$0.00
11	7/22/2025	25	01	04	2,139.16	531.69	2,033.53	2,786.05	2,056.05	822.42	56,671.62	\$41,988	\$20,033	\$62,021	10,211.48	\$0.00
12	2/5/2026	35	04	03	3,693.79	914.19	3,536.71	4,265.16	3,535.16	1,414.06	97,071.88	\$64,141	\$24,957	\$89,098	15,599.09	\$7,573.88
53	10/22/2025	25	10	00	2,873.52	1,202.85	2,874.34	3,603.52	2,873.52	1,149.41	81,293.70					\$90,731.55

☒ Ancillary Projection:
☐ Overtime Projection
☐ Adjustments:
☐ Board members:
☐ Assessments & Cost Allocations:

Total Projections:	0.00	53,696.24	44,284.11	17,769.40
Total Actual:	43,240.39	0.00	0.00	0.00
Actual to Date:	836,832.36	836,832.36	836,832.36	836,832.36

Board members remaining projection			
Total Assessment	587.64		
June 2025 Longevity	747.00		
Total Projections Amount	1,475.12		
YTD Actual Expenditures	359,378.23		
Total FY25 Projected Spend	836,832.36		
	1,196,210.59		

BSR 3/24/2025	828,072.36
Through PP	PP20

Difference is the 1ST Insurance in FY25 not processing in the amount of \$8,760.

Variance		8,760.00
FY25 Legislatively Approved	1,137,536.00	
Longevity	1,328.00	25CS10521
Longevity	1,476.00	25CS10522
COLAS	55,871.00	25SA1052
Budget Authority Available	0.41	

GL	Desc	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Pending Work Program 25CS10521	Work Program 25SA1052	Revised Authority	Revised Projected Budget Balance
5100	SALARIES	793,178	496,224.90	295,953.10	255,878.65	752,103.55	41,074.45		55871	849,049	96,945.45
5200	WORKERS COMPENSATION	17,539	13,043.35	4,495.65	4,495.65	17,539.00	0.00			17,539	-
5300	RETIREMENT	166,806	29,181.44	137,624.56	12,193.18	41,374.62	125,431.38	93		166,899	125,524.38
5301	RET EE/ER	0	87,777.97	(87,777.97)	36,290.87	124,068.84	(124,068.84)	140		140	(123,928.84)
5400	PERSONNEL ASSESSMENT	2,465	1,848.75	616.25	616.25	2,465.00	0.00			2,465	-
5420	CB ASSESSMNT	54	38.25	15.75	15.75	54.00	0.00			54	-
5430	LABOR RELATION ASSESSMENT	625	625.00	-	-	625.00	0.00			625	-
5500	GROUP INSURANCE	118,404	71,766.75	46,637.25	46,637.25	118,404.00	0.00			118,404	-
5610	SICK LEAVE	0	38,035.39	(38,035.39)	-	38,035.39	(38,035.39)			0	(38,035.39)
5620	Annual Leave	0	32,071.42	(32,071.42)	-	32,071.42	(32,071.42)			0	(32,071.42)
5630	Holiday Leave	0	23,381.56	(23,381.56)	-	23,381.56	(23,381.56)			0	(23,381.56)
5650	Other Leave	0	5,405.04	(5,405.04)	-	5,405.04	(5,405.04)			0	(5,405.04)
5700	PAYROLL ASSESSMENT	460	345.00	115.00	55.00	400.00	60.00			460	60.00
5750	RETIRED EMPLOYEES GROUP INSURANCE	25,222	18,884.33	6,337.67	6,337.67	25,222.00	0.00			25,222	-
5800	UNEMPLOYMENT COMPENSATION	0	-	-	-	-	0.00			0	-
5840	MEDICARE	11,503	8,044.83	3,458.17	3,458.17	11,503.00	0.00	16		11,519	16.00
5860	BOARD AND COMMISSION PAY	1,280	320.00	960.00	960.00	1,280.00	0.00			1,280	-
5880	Shift Differential Pay	0	-	-	-	-	0.00			0	-
5930	LNGVTY PAY	0	1,078.38	(1,078.38)	1,199.79	2,278.17	(2,278.17)	1079		1,079	(1,199.17)
5960	Terminal Sick Leave Pay	0	-	-	-	-	0.00			0	-
5970	Terminal Annual Leave Pay	0	-	-	-	-	0.00			0	-
Total		1,137,536	828,072.36	309,463.64	368,138.23	1,196,210.59	(58,674.59)	1,328.00	55,871.00	1,194,735.00	(1,475.59)

Category	Desc	L01	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Pending Work Program 25CS10521	Work Program 25SA1052	Revised Authority	Revised Projected Budget Balance
00	0042 Appropriation	1,773,998	1,773,998	1,773,998.00	-	-	1,773,998.00	0.00	1,328	55,871	1,773,998	0.00
00	3581 NATL PUBS & RECORDS COMMISSION	0	91,734	-	91,734.00	91,734.00	91,734.00	0.00	1,328	55,871	91,734	0.00
00	3583 PROMOTION OF THE HUMANITIES	0	59,999	26,000.00	33,999.00	33,999.00	59,999.00	0.00	1,328	55,871	59,999	0.00
00	3826 MICROFILMING CHARGE	12,939	12,939	-	12,939.00	-	-	(12,939.00)	1,328	55,871	12,939	12,939.00
00	4038 IMAGING SALES	1,581	1,581	369.87	1,211.13	-	369.87	(1,211.13)	1,328	55,871	1,581	1,211.13
00	4039 LAB SALES	360	360	-	360.00	-	-	(360.00)	1,328	55,871	360	360.00
00	4601 GENERAL FUND SALARY ADJUSTMENT	0	0	-	-	58,527.00	58,527.00	58,527.00	1,328	55,871	57,199	(1,328.00)
Total Rev		1,788,878	1,940,611	1,800,367.87	140,243.13	184,260.00	1,984,627.87	44,016.87	1,328	55,871	1,997,810	13,182.13
01	PERS SERVICE	1,137,536	1,137,536	828,072.36	309,463.64	368,138.23	1,196,210.59	(58,674.59)	1,328	55,871	1,194,735	(1,475.59)
02	OUT ST TRAV	4,102	3,770	1,223.91	2,546.09	2,545.26	3,769.17	0.83	1,328	55,871	3,770	0.83
03	IN ST TRAV	309	641	-	641.00	641.00	641.00	0.00	1,328	55,871	641	0.00
04	OPERATING	388,428	388,428	298,159.41	90,268.59	90,268.31	388,427.72	0.28	1,328	55,871	388,428	0.28
11	RAW MATERIAL	5,183	5,183	1,268.88	3,914.12	3,913.98	5,182.86	0.14	1,328	55,871	5,183	0.14
14	IPS EQP&SFTW	7,580	7,580	-	7,580.00	-	-	7,580.00	1,328	55,871	7,580	7,580.00
20	HS RC ADV BD	0	91,734	11,980.00	79,754.00	79,754.00	91,734.00	0.00	1,328	55,871	91,734	0.00
22	PROMO HUMANI	0	59,999	26,000.00	33,999.00	33,999.00	59,999.00	0.00	1,328	55,871	59,999	0.00
26	INFO SERV	63,332	63,332	32,766.87	30,565.13	30,564.57	63,331.44	0.56	1,328	55,871	63,332	0.56
30	TRAINING	1,773	1,773	910.08	862.92	862.00	1,772.08	0.92	1,328	55,871	1,773	0.92
36	AB486E710 1S	0	12,381	12,380.99	0.01	0.01	12,381.00	0.00	1,328	55,871	12,381	0.00
82	DPT CST ALLO	80,111	80,111	60,083.25	20,027.75	20,027.75	80,111.00	0.00	1,328	55,871	80,111	0.00
87	PURCH ASMNT	241	241	180.75	60.25	60.25	241.00	0.00	1,328	55,871	241	0.00
88	SW COST ALLO	0	0	-	-	-	-	0.00	1,328	55,871	0	0.00
89	AG CST ALLOC	100,283	100,283	75,212.25	25,070.75	25,070.75	100,283.00	0.00	1,328	55,871	100,283	0.00
Total Exp		1,788,878	1,952,992	1,348,238.75	604,753.25	655,845.11	2,004,083.86	(51,091.86)	1,328	55,871	2,010,191	6,107.14
Operating Income		0	-12,381	452,129.12	(464,510.12)	(471,585.11)	(19,455.99)	95,108.73				7,074.99
Beg Net Assets		0	12,381	12,381.00	-	-	12,381.00	0.00			12,381	0.00
End Net Assets		0	0	464,510.12	(464,510.12)	(471,585.11)	(7,074.99)	95,108.73				7,074.99
Days Exp in Ending Rsv		0	0	-	-	-	-1.27	0.00				

A second work program will be completed for Continuity of Service in cat 01.

Joe Lombardo
Governor



Joy Grimmer
Director

Robert Ragar
Deputy Director

Daniel Marlow
Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Administrative Services Division
209 E Musser St, Rm 304 | Carson City, NV 89701
Phone: (775) 531-3200

DATE: 07 April 2025

TO: Roxana Gifford, Executive Branch Budget Officer

FROM: Daniel Marlow, Administrator *DM*

THROUGH: Mike Strom, Division Administrator *MS*
Nevada State Library and Archives

SUBJECT: Request for May 2025 Board of Examiners - Salary Adjustment Funds WP#25SA2891

The Nevada State Library and Archives is projecting a shortfall in salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 4, of the 82nd Legislative Session, the Nevada State Library and Archives is requesting the revenue and authority to meet any salary deficiencies that could not be absorbed by the 12% salary increase for Fiscal Year 2024 and the 11% salary increase for Fiscal Year 2025. The department is requesting \$41,422 in Salary Adjustment Funds to cover the projected shortfall through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay Personnel Services, category 01, expenditures through the end of the fiscal year.

Attached is a supporting spreadsheet to support the Nevada State Library and Archives calculations.

Thank you for your time and consideration in this manner.

CC: Jennifer Victor, Management Analyst III
Administrative Services Division

FY25
2891 - NEVADA STATE LIBRARY
PAYROLL PROJECTIONS

1,963,682 Budgeted Authority

Pay Period Begin Date	Pay Period End Date	Check Date	Insurance 1		Insurance 10	
			Actual	Actual	Actual	Actual
06/10/24	06/23/25	06/09/25				
06/23/24	07/06/25	07/06/25				
07/05/24	07/28/25	07/04/25				

PCN	MSI DATE	Description	Group	Insurance	Total Payroll				NEBS130 Yr2 Benefits	NEBS130 PCN Cost	Projected Shortfall	12% and 11%Cola	Salary Adjustment Funds BOE Request
					PP01	PP20	PP21	PP22					
1		DIV ADMINR, ST LIBRARY/ARCHIVES	730.00	730.00	730.00	6,623.89	7,233.46	6,672.59	\$111,313	\$35,344	\$146,657	\$32,636	\$32,635.88
2	6/24/2025	MANAGEMENT ANALYST 3	730.00	730.00	0.00	4,260.70	5,019.72	4,259.20	\$80,517	\$28,527	\$109,044	\$8,283	\$8,283.04
4	9/19/2025	ADMIN ASSISTANT 4	730.00	730.00	730.00	3,246.49	4,005.50	3,245.17	\$49,643	\$21,734	\$71,377	\$17,358.89	\$17,358.89
7	9/23/2025	ASST ADMINR, LIBR/ARCH DEVELOP	730.00	730.00	0.00	5,051.91	5,810.92	5,049.50	\$101,163	\$33,098	\$134,261	\$28,106	\$28,106.28
8		LIBRARIAN 4	730.00	730.00	730.00	0.00	4,621.56	3,860.32	\$79,294	\$28,258	\$107,552	\$27,728	\$27,728.00
14	9/19/2025	LIBRARIAN 4	730.00	730.00	730.00	5,050.46	5,810.91	5,049.50	\$80,517	\$28,527	\$109,044	\$26,519.50	\$26,519.50
15	8/19/2025	LIBRARIAN 4	730.00	730.00	0.00	3,695.64	4,454.63	3,694.24	\$80,517	\$28,527	\$109,044	\$26,519.50	\$26,519.50
16	8/17/2025	LIBRARIAN 4	730.00	730.00	730.00	5,051.92	5,810.93	5,049.50	\$80,517	\$28,527	\$109,044	\$26,519.50	\$26,519.50
18	11/14/2025	LIBRARIAN 3	730.00	730.00	730.00	4,223.97	4,896.20	4,222.85	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
21		LIBRARIAN 2	730.00	730.00	0.00	2,535.39	3,294.40	2,535.62	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
27	2/26/2026	LIBRARIAN 3	730.00	730.00	730.00	4,450.10	5,212.14	4,259.20	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
29	4/15/2025	LIBRARY ASSISTANT 3	730.00	730.00	730.00	2,140.15	2,899.15	2,139.62	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
30	10/28/2025	LIBRARY ASSISTANT 3	730.00	730.00	730.00	1,985.85	1,985.87	1,984.91	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
32		LIBRARY TECHNICIAN 1	730.00	730.00	730.00	2,758.27	3,517.27	2,758.89	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
47	8/8/2025	LIBRARY TECHNICIAN 2	730.00	730.00	730.00	3,536.70	4,295.68	3,535.16	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
48	6/24/2025	LIBRARY ASSISTANT 2	730.00	730.00	0.00	1,901.42	2,660.42	1,900.99	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
54	5/9/2025	ADMIN ASSISTANT 2	730.00	730.00	730.00	2,226.91	2,985.92	2,228.23	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
55	12/26/2025	LIBRARY ASSISTANT 2	730.00	730.00	730.00	1,982.01	2,741.01	1,981.54	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
56	9/11/2025	LIBRARY ASSISTANT 2	730.00	730.00	730.00	2,419.48	3,178.50	2,418.53	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
57		PROGRAM OFFICER 3	730.00	730.00	730.00	2,999.88	3,758.88	4,034.67	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13
58		LIBRARIAN 3	730.00	730.00	730.00	0.00	0.00	0.00	\$73,600	\$29,350	\$102,950	\$24,476.13	\$24,476.13

Actual Projection: Over % Projection
Board members: 500
Assessments & C Allocations: 6,045
Total Projections: 11,680.00
Total Actual: 11,680.00
Actual to Date: 11,680.00

Board members remaining projection June 2025 Continuity of Service
Total Assessment 2,040.13
Total Projections Amount 491,173.26
YTD Actual Expenditures 1,287,073.51
Total FY25 Projected Spend 1,778,246.77

BSR 04/08/2025
Through PP
Variance
PP21
11,680.00

Difference is the PP01
Insurance never processed
in DAWN.

FY25 Legislatively Approved
Budget Authority Available 1,963,682.00
185,435.23
Salary Adjustment Funds Available 244,011.00

Projected Budget Authority 429,446.23
General Fund
GF Authority \$ 1,347,135.00
Projection \$ 1,392,430.00
Continuity of Service \$ 3,873.00
COLAS \$ 41,422.00
Total Budget Authority Available \$ 0.00

LSTA
LSTA Authority \$ 616,547.00
Projection \$ 385,816.77
Total Budget Authority Available \$ 230,730.23

Unclassified \$ 5,751.24
Classified \$ 35,670.76
\$ 41,422.00

GL	Desc	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Work Program 255A2891	Revised Authority	Revised Projected Budget Balance
5100	SALARIES	1,434,757	782,041.93	652,715.07	339,712.33	1,121,754.26	313,002.74	41,422	1,476,179	354,424.74
5200	WORKERS COMPENSATION	29,088	19,630.44	9,457.56	9,457.56	29,088.00	0.00		29,088	-
5300	RETIREMENT	238,221	62,625.06	175,595.94	26,285.94	88,911.00	149,310.00		238,221	149,310.00
5301	RET EE/ER	0	126,326.79	(126,326.79)	22,983.21	149,310.00	(149,310.00)		0	(149,310.00)
5400	PERSONNEL ASSESSMENT	4,139	3,104.25	1,034.75	1,034.75	4,139.00	0.00		4,139	-
5420	CB ASSESSMNT	54	59.50	(5.50)	0.50	60.00	(6.00)		54	(6.00)
5430	LABOR RELATIONS ASSESSMENT	1,080	1,080.00	-	-	1,080.00	0.00		1,080	-
5500	GROUP INSURANCE	191,268	111,366.36	79,901.64	79,901.64	191,268.00	0.00		191,268	-
5610	SICK LEAVE	0	34,741.93	(34,741.93)	-	34,741.93	(34,741.93)		0	(34,741.93)
5620	ANNUAL LEAVE	0	48,913.80	(48,913.80)	-	48,913.80	(48,913.80)		0	(48,913.80)
5630	HOLIDAY LEAVE	0	32,926.64	(32,926.64)	-	32,926.64	(32,926.64)		0	(32,926.64)
5640	COMP TIME LEAVE	0	1,143.19	(1,143.19)	-	1,143.19	(1,143.19)		0	(1,143.19)
5650	OTHER LEAVE	0	7,049.19	(7,049.19)	-	7,049.19	(7,049.19)		0	(7,049.19)
5700	PAYROLL ASSESSMENT	772	579.00	193.00	193.00	772.00	0.00		772	-
5750	RETIRED EMPLOYEES GROUP INSURANCE	43,286	28,821.66	14,464.34	14,464.34	43,286.00	0.00		43,286	-
5800	UNEMPLOYMENT COMPENSATION	0	-	-	-	-	0.00		0	-
5810	OVERTIME PAY	0	-	-	-	-	0.00		0	-
5840	MEDICARE	19,737	12,911.51	6,825.49	6,825.49	19,737.00	0.00		19,737	-
5860	BOARD AND COMMISSION PAY	1,280	80.00	1,200.00	80.00	160.00	1,120.00		1,280	1,120.00
5880	SHIFT DIFFERENTIAL PAY	0	38.88	(38.88)	(38.88)	-	0.00		0	-
5901	PAYROLL ADJUSTMENT	0	-	-	-	-	0.00		0	-
5930	LNGVTY PAY	0	1,953.38	(1,953.38)	1,953.38	3,906.76	(3,906.76)		0	(3,906.76)
5960	TERMINAL SICK LEAVE PAY	0	-	-	-	-	0.00		0	-
5970	TERMINAL ANNUAL LEAVE PAY	0	-	-	-	-	0.00		0	-
Total		1,963,682	1,275,393.51	688,288.49	502,853.26	1,778,246.77	185,435.23	41,422.00	2,005,104.00	226,857.23

Cat 01 does not show a shortfall overall. There are seven Federal funded positions. The shortfall will be in General Fund. Refer to the actual payroll projections.

This budget is not eligible for Shift Differential Pay. The projection will stay negative until Central Payroll does a correcting JV.

Category	Desc	L01	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Work Program 255A2891	Revised Authority	Revised Projected Budget Balance
00	0047 Appropriation	2,894,176	2,894,176	2,894,176.00	-	-	2,894,176.00	0.00		2,894,176	0.00
00	3436 FED LIBRARY GRANT-TITLE I	1,997,673	2,873,528	1,822,233.29	1,051,294.71	855,021.05	2,677,254.34	(196,273.66)		2,873,528	196,273.66
00	3737 LIBRARY FEES	468	468	170.00	298.00	-	170.00	(298.00)		468	298.00
00	4203 PRIOR YEAR REFUND	0	0	-	-	-	-	0.00		0	0.00
00	4601 GENERAL FUND SALARY ADJUSTMENT	0	0	-	-	45,295.00	45,295.00	45,295.00	41,422	41,422	(3,873.00)
00	4654 TRANSFER FROM INTERIM FINANCE	0	75,375	75,375.00	-	-	75,375.00	0.00		75,375	0.00
00	4661 INTERAGENCY TRANSFER	0	0	-	-	-	-	0.00		0	0.00
Total Rev		4,892,317	5,843,547	4,791,954.29	1,051,592.71	900,316.05	5,692,270.34	(151,276.66)	41,422	5,884,969	192,698.66
01	PERS SERVICE	1,890,192	1,963,682	1,275,393.51	688,288.49	502,852.93	1,778,246.44	185,435.56	41,422	2,005,104	226,857.56
03	IN ST TRAV	503	503	313.86	189.14	189.14	503.00	0.00		503	0.00
04	OPERATING	783,295	783,295	572,240.03	211,054.97	211,054.00	783,294.03	0.97		783,295	0.97
11	LANGUAGE ACCESS PLAN	0	75,375	-	75,375.00	75,375.00	75,375.00	0.00		75,375	0.00
12	LIB DEV T1	1,454,616	2,256,981	1,692,975.27	564,005.73	564,005.73	2,256,981.00	0.00		2,256,981	0.00
17	BOOKMOBILES	102,953	102,953	102,953.00	-	-	102,953.00	0.00		102,953	0.00
25	SB341 ONE SHOT	0	361,500	361,500.00	-	-	361,500.00	0.00		361,500	0.00
26	INFO SERV	37,642	37,642	24,212.68	13,429.32	13,428.94	37,641.62	0.38		37,642	0.38
27	LIB COLL DEV	258,552	258,552	258,552.00	-	-	258,552.00	0.00		258,552	0.00
28	STWD DB	199,955	199,955	167,398.75	32,556.25	32,556.25	199,955.00	0.00		199,955	0.00
40	TRNS TO CLAN	20,533	20,533	-	20,533.00	20,533.00	20,533.00	0.00		20,533	0.00
82	DPT CST ALLO	141,788	141,788	106,341.00	35,447.00	35,447.00	141,788.00	0.00		141,788	0.00
87	PURCH ASMINT	2,288	2,288	1,716.00	572.00	572.00	2,288.00	0.00		2,288	0.00
Total Exp		4,892,317	6,205,047	4,563,596.10	1,641,450.90	1,456,013.99	6,019,610.09	185,436.91	41,422	6,246,469	226,858.91
Operating Income		0	-361,500	228,358.19	(589,858.19)	(555,697.94)	(327,339.75)	(336,713.57)			(34,160.25)
Beg Net Assets		0	361,500	361,500.00	-	-	361,500.00	0.00		361,500	
End Net Assets		0	0	589,858.19	(589,858.19)	(555,697.94)	34,160.25	(336,713.57)			(34,160.25)
Days Exp in Ending Rev		0	0	-	-	-	2.04	0.00			

Cat 01 does not show a shortfall overall. There are seven Federal funded positions. The shortfall will be in General Fund. Refer to the actual payroll projections.

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 5, 13 and 14 made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3706	PRISON MEDICAL CARE	\$168,505
3710	DIRECTOR'S OFFICE	\$171,882
3717	NO NEVADA CORRECTNL CENTER	\$869,983
3722	STEWART CONSERVATION CAMP	\$44,535
3723	PIOCHE CONSERVATION CAMP	\$45,376
3724	NO NV TRANSITIONAL HOUSING	\$17,958
3725	THREE LAKES VLY CNSRVTN CMP	\$102,272
3738	SO DESERT CORRECTIONAL CTR	\$1,046,948
3739	WELLS CONSERVATION CAMP	\$17,000
3748	JEAN CONSERVATION CAMP	\$51,251
3751	ELY STATE PRISON	\$1,039,403
3752	CARLIN CONSERVATION CAMP	\$34,601
3759	LOVELOCK CORRECTIONAL CTR	\$929,485
3760	CASA GRANDE TRANS HOUSING	\$43,382
3761	F MCCLURE WOMENS COR CTR	\$609,675
3762	HIGH DESERT STATE PRISON	\$2,837,360
	Total	\$8,029,616

Joe Lombardo
Governor

James E. Dzurenda
Director

Kitty DeSocio, MSM, CGFM
Deputy Director
Support Services



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

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

STATE OF NEVADA
Department of Corrections

MEMORANDUM

Date: April 23, 2025

To: Governors Finance Office
Nima Rezaie, Executive Branch Budget Officer
Vince Young-Brown, Executive Branch Budget Officer

From: Kitty DeSocio, MSM, CGFM, Deputy Director Support Services

Subject: Request for Salary Adjustment Funds – May 2025 Board of Examiners (BOE)

The Nevada Department of Corrections (NDOC) is projecting a shortfall of General Fund appropriations to fund salary expenditures through the end of state fiscal year (SFY) 2025. Pursuant to Assembly Bill 522, Sections 8, 9, 19 and 20, of the 82nd session, the Department is requesting reimbursements of actual and projected COLA expenditures for the State Fiscal Year SFY 2025.

The funds requested will help offset any salary deficiencies for NDOC budget accounts which could not absorb the 11% salary increase and the continuity of service costs in SFY 2025, helping offset Category 01 personnel shortfalls. The Department has taken the appropriate actions to ensure the total request for BOE salary adjustment funds are only for budget accounts with a projected shortfall in Category 01. The Department is requesting funding for the following budget accounts 3706, 3710, 3717, 3722, 3723, 3724, 3725, 3738, 3739, 3748, 3751, 3752, 3759, 3760, 3761, and 3762, in the amount of \$8,029,616 as there are no alternatives available to fund these shortfalls.

Without the requested allocation, the budget accounts listed above are projected to have insufficient funding available to pay Category 01, Personnel Services expenditures through the end of the fiscal year and/or will have significant impacts to reserves and retained earnings. It should be noted that while not every NDOC budget account is projecting a shortfall in Category 01, several budget accounts remain under review. Requests for these accounts, if deemed eligible and necessary, will be submitted in a separate request. Additionally, NDOC may request redistribution of funds to other budget accounts with an SFY 2025 budgetary shortfall due to the COLA effective.

Department of Corrections		
FY25 Salary Adjustment Request		
Budget Account	Budget Account Name	Fund Adjustment
3706	HR-PRISON MEDICAL CARE	\$168,505
3710	HR-DIRECTOR'S OFFICE	\$171,882
3717	HR-NO NEVADA CORRECTNL CENTER	\$869,983
3722	HR-STEWART CONSERVATION CAMP	\$44,535
3723	HR-PIOCHE CONSERVATION CAMP	\$45,376
3724	HR-NO NV TRANSITIONAL HOUSING	\$17,958
3725	HR-THREE LAKES VLY CONSERVATION CAMP	\$102,272
3738	HR-SO DESERT CORRECTIONAL CCENTER	\$1,046,948
3739	HR-WELLS CONSERVATION CAMP	\$17,000
3748	HR-JEAN CONSERVATION CAMP	\$51,251
3751	HR-ELY STATE PRISON	\$1,039,403
3752	HR-CARLIN CONSERVATION CAMP	\$34,601
3759	HR-LOVELOCK CORRECTIONAL CENTER	\$929,485
3760	HR-CASA GRANDE TRANS HOUSING	\$43,382
3761	HR-FLORENCE MCCLURE WOMENS CORRECTIONAL CENTER	\$609,675
3762	HR-HIGH DESERT STATE PRISON	\$2,837,360
	Total	\$8,029,616

Thank you for your time and consideration in this matter.

Kitty DeSocio, MSM, CGFM
Deputy Director of Support Services
Nevada Department of Corrections

Code	Budget Account	TOTAL GFO PROJECTION	CURRENT AUTHORITY	SHORTFALL GFO #S	LONGEVITY PROJECTION	SHORTFALL AFTER LONGEVITY	COLA ON PROJECTION	SHORTFALL AFTER COLA	MUSTER TOTAL PROJECTION	MUSTER CLAIMING	SHORTFALL AFTER MUSTER	SHORTFALL AFTER ALL CLAIMS
3706	HR-PRISON MEDICAL CARE	\$31,432,488.71	\$30,695,885.00	(\$736,533.71)	\$31,325.00	(\$705,245.71)	\$168,505.00	(\$536,753.71)	\$0.00	\$0.00	(\$536,753.71)	(\$536,753.71)
3708	HR-OFFENDERS' STORE FUND	\$4,103,832.54	\$4,700,110.00	\$596,277.46	\$0.00	\$596,277.46	\$0.00	\$596,277.46	\$0.00	\$0.00	\$596,277.46	\$596,277.46
3710	HR-DIRECTOR'S OFFICE	\$22,030,305.19	\$20,524,933.00	(\$1,505,372.19)	\$57,172.00	(\$1,448,200.19)	\$171,862.00	(\$1,276,338.19)	\$294,134.00	\$0.00	(\$1,276,338.19)	(\$1,276,338.19)
3711	HR-CORRECTIONAL PROGRAMS	\$9,849,022.94	\$10,579,929.00	\$730,906.06	\$0.00	\$730,906.06	\$0.00	\$730,906.06	\$0.00	\$0.00	\$730,906.06	\$730,906.06
3716	HR-WARN SPRINGS CORRECTNL CTR	\$1,705,001.11	\$1,824,782.00	\$119,780.89	\$0.00	\$119,780.89	\$0.00	\$119,780.89	\$0.00	\$0.00	\$119,780.89	\$119,780.89
3717	HR-NO NEVADA CORRECTNL CENTER	\$39,410,651.22	\$32,824,149.00	(\$6,586,502.22)	\$49,134.00	(\$6,537,368.22)	\$69,983.00	(\$6,667,385.22)	\$1,474,169.00	\$1,474,169.00	(\$4,193,216.22)	(\$4,193,216.22)
3719	HR-PRISON INDUSTRY		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3722	HR-STEWART CONSERVATION CAMP	\$2,290,403.57	\$2,023,771.00	(\$266,632.57)	\$6,014.00	(\$260,618.57)	\$44,535.00	(\$216,083.57)	\$139,565.00	\$0.00	(\$216,083.57)	(\$216,083.57)
3723	HR-PIOCHE CONSERVATION CAMP	\$2,393,584.30	\$2,193,816.00	(\$199,768.30)	\$4,576.00	(\$195,192.30)	\$45,376.00	(\$149,816.30)	\$123,278.00	\$0.00	(\$149,816.30)	(\$149,816.30)
3724	HR-NO NV TRANSITIONAL HOUSING	\$1,688,797.89	\$1,453,491.00	(\$235,306.89)	\$8,050.00	(\$228,256.89)	\$17,958.00	(\$210,298.89)	\$73,868.00	\$0.00	(\$210,298.89)	(\$210,298.89)
3725	HR-THREE LAKES VLY CNSRVTN CMP	\$3,793,492.38	\$3,182,990.00	(\$610,502.38)	\$2,507.00	(\$607,995.38)	\$102,272.00	(\$505,723.38)	\$177,863.00	\$0.00	(\$505,723.38)	(\$505,723.38)
3727	HR-PRISON RANCH		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3738	HR-SO DESERT CORRECTIONAL CTR	\$39,199,581.15	\$31,746,131.00	(\$7,453,450.15)	\$41,173.00	(\$7,412,277.15)	\$1,046,948.00	(\$8,359,225.15)	\$1,782,318.00	\$1,782,318.00	(\$4,583,011.15)	(\$4,583,011.15)
3739	HR-WELLS CONSERVATION CAMP	\$1,662,675.96	\$1,644,906.00	(\$17,869.96)	\$1,275.00	(\$18,594.96)	\$17,000.00	(\$405.04)	\$0.00	\$0.00	\$405.04	\$405.04
3741	HR-HUMBOLDT CONSERVATION CAMP	\$1,950.16	\$0.00	(\$1,950.16)	\$0.00	(\$1,950.16)	\$0.00	(\$1,950.16)	\$1,322.00	\$0.00	(\$1,950.16)	(\$1,950.16)
3748	HR-ELLY STATE PRISON	\$2,325,137.25	\$2,003,635.00	(\$321,502.25)	\$3,102.00	(\$318,400.25)	\$51,251.00	(\$267,149.25)	\$88,651.00	\$0.00	(\$267,149.25)	(\$267,149.25)
3752	HR-CARLIN CONSERVATION CAMP	\$34,162,423.90	\$28,237,056.00	(\$5,925,367.90)	\$38,926.00	(\$5,886,441.90)	\$1,039,403.00	(\$4,847,038.90)	\$1,616,352.00	\$1,616,352.00	(\$3,230,686.90)	(\$3,230,686.90)
3759	HR-LOVELOCK CORRECTIONAL CTR	\$1,720,574.99	\$1,601,620.00	(\$118,954.99)	\$2,903.00	(\$116,051.99)	\$34,601.00	(\$81,450.99)	\$0.00	\$81,451.00	\$0.01	\$0.01
3760	HR-CASA GRANDE TRANS HOUSING	\$32,265,750.53	\$28,035,377.00	(\$4,230,373.53)	\$40,526.00	(\$4,189,847.53)	\$929,485.00	(\$3,260,362.53)	\$1,594,076.00	\$0.00	(\$3,260,362.53)	(\$3,260,362.53)
3761	HR-CASA GRANDE TRANS HOUSING	\$4,182,680.72	\$3,944,573.00	(\$238,087.72)	\$9,251.00	(\$228,836.72)	\$43,382.00	(\$185,454.72)	\$125,283.00	\$0.00	(\$185,454.72)	(\$185,454.72)
3762	HR-F MCCLURE WOMENS COR CTR	\$26,132,627.65	\$21,839,590.00	(\$4,293,037.65)	\$34,752.00	(\$4,258,285.65)	\$609,675.00	(\$3,648,610.65)	\$1,020,446.00	\$1,020,446.00	(\$2,628,164.65)	(\$2,628,164.65)
3762	HR-HIGH DESERT STATE PRISON	\$86,851,169.83	\$68,429,808.00	(\$18,421,361.83)	\$87,914.00	(\$18,333,447.83)	\$2,837,360.00	(\$15,496,087.83)	\$4,600,986.00	\$0.00	(\$15,496,087.83)	(\$15,496,087.83)
3763	HR-INMATE WELFARE ACCOUNT	\$1,120,886.90	\$1,336,423.00	\$215,536.10	\$0.00	\$215,536.10	\$0.00	\$215,536.10	\$0.00	\$0.00	\$215,536.10	\$215,536.10
Totals:		\$348,323,988.80	\$298,822,875.00	(\$49,501,113.80)	\$418,600.00	(\$49,062,523.80)	\$8,029,616.00	(\$41,032,907.80)	\$13,112,311.00	\$5,974,738.00	(\$36,078,171.80)	\$100,000

POTENTIAL FURTHER SAVINGS
3715 CLOSED FACILITY

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522 Sections 4, 5, 13, and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3161	Division of Public and Behavioral Health (DPBH) – Southern Nevada Adult Mental Health Services	\$3,386,133
3162	DPBH – Northern Nevada Adult Mental Health Services	\$556,226
3168	DPBH – Behavioral Health Administration	\$103,995
3200	DPBH – Prevention and Treatment of Problem Gambling	\$20,994
3645	DPBH – Lakes Crossing Center	\$341,447
	Total	\$4,408,795

Joe Lombardo
Governor

Richard Whitley,
MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**

 **NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH**



Cody L. Phinney,
MPH
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical
Officer

DATE: March 28, 2025

TO: Tiffany Greenameyer, Governor's Finance Office Director

THROUGH: Richard Whitley, DHHS Director, DHHS Director's Office *CRH* for Richard Whitley

FROM: Cody Phinney, Administrator *CPB* (John Borrowman for Cody Phinney)

RE: Request for SFY25 Salary Adjustment Funds – Cost of Living Adjustment - BA 3161

Pursuant to Assembly Bill 522, Section 4, 5, 13, and 14 of the 82nd session of the Nevada Legislature, Southern Nevada Adult Mental Health Services (SNAMHS) BA 3161 is requesting reimbursement for the Cost of Living Adjustment expenditures where the funding was not appropriated directly to the agency.

Attached are the before and after fund maps (all eligible positions are 100% General Fund), operating statement, category 01 expenditures by GL, GFO All Agency Memo 2023-05 table with available COLA balance, salary adjustment calculations, salary projections by PCN, NEBS130, WP form, and 2023 AB522.

BA 3161 SNAMHS was authorized \$18,303,476 for the Cost of Living Adjustment. SNAMHS is requesting \$3,386,133 in Cost of Living Adjustment expenditures on the actual and projected expenditures.

From the \$3,386,133 request, \$600,954 are from unclassified positions and \$2,785,179 are from classified Non Collective Bargaining Agreement (CBA) positions for SNAMHS.

BA3161 Southern Nevada Adult Mental Health Services
BOE Salary Adjustment Calculation
SFY 2025

Request	Amount	Notes / Methodology
Projected Personnell Services Shortfall	\$ (18,042,894)	Shortfall calculated by PCN
Two Grade Increase Authority	\$ (691,716)	Total authority of BOE Salary Adjustment funds for 2 grade increase reduction (see grades calculation)
Two Grade Increase Projected Need	\$ 637,015	Projected Need for Two Grade Increase
BOE Salary Adjustment Funds (Longevity) 25CS31611	\$ 161,461	Projected amount of longevity payments made to eligible staff in FY25
BOE Salary Adjustment Funds (CBA): 25CB31611	\$ 9,594,870	Amount of salaries associated with 24% (13% in year 1 and 11% in year 2) increase for those part of a Collective Bargaining Agreement
BOE Salary Adjustment Funds (Forensic Recruitment Bonus) 25CB31612	\$ 81,000	Amount of actual and projected recruitment bonuses paid through 06/30/2025
BOE Salary Adjustment Funds (Personnel) Salary Contingency	\$ 4,874,132	Requested amount for unallowable salary items such as: Overtime, Shift Differential Overtime, Retention Incentive, Terminal Sick Leave, Terminal Annual Leave and Forfeited Annual Leave.
25SA31611	\$ 3,386,133	After exhausting all other revenue sources, COLA shortfall to be solved by requesting BOE Salary Adjustment funds

Total Unfunded COLA and Continuity of Service Shortfall (0)

Salary Adjustment Funds

Total General Fund 2025 COLA-SNAMHS	18,303,476
25CB31611	(9,594,870)
25CB31612	(81,000)
25CS31611	(161,461)
Overtime	(2,917,496)
Comp time Payoff	(1,040)
Shift Differential Overtime	(70,237)
Retention Incentive	(2,250)
Terminal Sick Payout	(16,701)
Terminal Leave Payout	(65,275)
Forfeited Annual Payout	(27,425)
25SA31611	\$ (3,386,133)
Remaining Salary Adjustment Funds	1,979,587

Southern Nevada Adult Mental Health Services
BA 3161
Cat 01 Projections
Work Program

Object	Description	Expended	Projected	Total	L01 for UA
5100	Salaries	35,836,500	17,510,206	53,346,706	
5190	Supplemental Military Pay	(8,826)	0	(8,826)	
5200	Workers Compensation	749,653	313,854	1,063,507	
5300	Ret Cont Employer Pay Plan	3,092,833	1,400,000	4,492,833	
5301	Ret Cont Employee/Employer Pay Plan	6,296,976	2,680,000	8,976,976	
5400	Personnel Assessment	132,795	44,265	177,060	
5420	Collective Bargaining Assessment	2,380	1,040	3,420	
5430	Labor Relations Assessment	39,333	0	39,333	
5500	Group Insurance	4,345,920	1,502,820	5,848,740	
5610	Sick Leaves	2,105,895	0	2,105,895	
5620	Annual Leaves	2,171,823	0	2,171,823	
5630	Holiday Leaves	35,411	0	35,411	
5640	Comp Time Leaves	270,401	0	270,401	
5650	Other Leaves	793,850	0	793,850	
5700	Payroll Assessment	24,773	16,515	41,288	
5750	Retired Employees Group Insurance	1,306,097	556,825	1,862,922	
5810	Overtime Pay	2,505,867	930,118	3,435,985	518,489
5820	Holiday Pay	390,154	90,000	480,154	
5830	Comp time Payoff	1,040	0	1,040	
5840	Medicare	639,920	253,898	893,818	
5880	Shift Differential Pay	627,297	231,094	858,391	
5882	Shift Differential Overtime	41,967	28,270	70,237	
5891	Recruitment Bonus Pay	36,000	45,000	81,000	
5910	Standby Pay	117,292	50,693	167,985	
5930	Longevity	76,461	85,000	161,461	
5932	Retention Incentive	2,250	0	2,250	
5960	Terminal Sick Leave Pay	16,701	0	16,701	
5970	Terminal Annual Leave Pay	65,275	0	65,275	
5975	Forfeited Annual Leave Payoff	27,425	0	27,425	

Sub Total	61,743,463	25,739,597	87,483,061
Less Overtime and Unallowables	2,658,276	958,387	3,616,664
Total Allowable	59,085,187	24,781,210	83,866,397

Total L01 Authority	69,440,166
Less L01 Authority for Unallowables	(518,489)
Net L01 Authority for Allowables	68,921,677
Approved CB Work Program	-
Current Authority	68,921,677
Over (Short)	(14,944,720)

Projected 25CB31611- CB COLA	9,594,870
Projected 25CB31612- CB Bonus	81,000
Projected 25CS31611-CoS	161,461
Projected Internal Transfers(Bal)	-
Projected 2-Grade Cash Adj	-
Salary Adjustment WP request	(3,386,133)

Internal Transfers (Bal)	\$ -
Internal Transfers (UA)	\$ -
Transfer Work Program	\$ -

IFC Contingency F \$ 4,874,132

Joe Lombardo
Governor

Richard Whitley,
MS
Director



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

 NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Cody L. Phinney,
MPH
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical
Officer

DATE: April 11, 2025, 2025

TO: Tiffany Greenameyer, Director, Governor's Finance Office

THROUGH: Richard Whitley, Director, DHHS Director's Office *CRH* for Richard Whitley

FROM: Cody Phinney, Administrator *CMB* (John Borrowman for Cody Phinney)

RE: Request for SFY25 Salary Adjustment Funds- Cost of Living Adjustment – BA3162

Pursuant to Assembly Bill 522, Sections 4, 5, 13, and 14 of the 82nd Legislative Session, DPBH, BA3162 Northern Nevada Adult Mental Health Services (NNAMHS), is requesting reimbursement for the Cost of Living Adjustment expenditures where the funding was not appropriated directly to the agency.

Attached are the before and after fund maps (all eligible positions are 100% General Fund), operating statement, category 01 expenditures by GL, GFO All Agency Memo 2023-05 table with available COLA balance, salary adjustment calculations, salary projections by PCN, NEBS130, WP form, and 2023 AB522.

NNAMHS is projected to have a shortfall of \$556,226 for the Cost of Living Adjustment. NNAMHS will run out of authority in the Personnel category in May 2025. After exhausting all other funding sources, NNAMHS requests \$ 45,944 for unclassified staff and \$510,282 for classified staff for a total request of \$556,226 for SFY25.

	Amount	Notes/Methodology
FY25 Projected Personnel Shortfall Projected Work Program	2,054,901	Shortfall calculated by PCN
	2,054,901	Total Personnel Shortfall
BOE Salary Adjustment Funds (CoS) WP	40,904	Estimated amount of longevity payments made to eligible staff in FY25
BOE Salary Adjustment Funds (CBA)	1,294,836	Amount of salaries associated with 24% (13% in year 1 and 11% in year 2) Increase for those part of a Collective Bargaining Agreement
Less Overtime and Unallowables	162,935	Amount of unallowables less L01 authority for unallowables
Unfunded shortfall	556,226	After exhausting all other revenue sources, COLA shortfall to be solved by requesting BOE Salary Adjustment funds

BOE Salary Adjustment	4,175,060	Total BOE Salary Adjustment funds available to BA3162
Salary Acceleration (NPD-4 Exempt)	(117,795)	Reduce BOE Salary Adjustment balance by accelerated hires, difficult to fill
NPD-4 Exempt Reversion	117,795	Reverse reduction of accelerated hires that are historically difficult to fill
Salary Acceleration (NPD-4 Non-Exempt)	(121,461)	Reduce BOE Salary Adjustment balance by accelerated hires, not difficult to fill
Overtime	(209,930)	Reduce BOE Salary Adjustment balance by unbudgeted overtime (not used for client care in 24/7 facility)
Shift Diff	(66,448)	Reduce BOE Salary Adjustment balance by unbudgeted shift differential pay (not used for client care in 24/7 facility)
Standby Pay	(3,557)	Reduce BOE Salary Adjustment balance by unbudgeted standby pay
Term Leave	(44,094)	Reduce BOE Salary Adjustment balance by unbudgeted term leave, and Forfeited Annual Leave Payoff
Adjusted BOE Salary	(53,658)	Adjusted BOE Salary Adjustment funds available to BA3645
	3,675,912	

Remaining COLA Authority

3,119,686

NON-CBA CLASSIFIED
NON-CBA UNCLASSIFIED

510,282
45,944
556,226

Northern Nevada Adult Mental Health Services
BA 3162
Cat 01 Projections
FY2025

Object	Description	FY25 Expended	Projected	Total	L01 for UA
5100	SALARIES	7,609,928	3,463,792	11,073,719	
5200	WORKERS COMPENSATION	172,414	66,685	239,099	
5300	RET CONT EMPLOYER PAY PLAN	746,701	288,804	1,035,505	
5301	RET CONT EMPLOYEE/EMPLOYER PLN	1,160,834	448,979	1,609,813	
5400	PERSONNEL ASSESSMENT	32,558	32,558	65,115	
5420	COLLECTIVE BARGAINING ASSESSMENT	514	0	514	
5430	LABOR RELATIONS ASSESSMENT	11,936	0	11,936	
5500	GROUP INSURANCE	1,086,086	362,029	1,448,115	
5610	SICK LEAVES	475,105	0	475,105	
5620	ANNUAL LEAVES	479,825	0	479,825	
5630	HOLIDAY LEAVES	1,304	0	1,304	
5640	COMP TIME LEAVES	75,305	0	75,305	
5650	OTHER LEAVES	108,150	0	108,150	
5700	PAYROLL ASSESSMENT	6,074	6,074	12,149	
5750	RETIRED EMPLOYEES GROUP INSURA	277,840	107,461	385,301	
5810	OVERTIME PAY	174,238	52,271	226,509	123,858
5820	HOLIDAY PAY	39,982	7,996	47,978	
5830	COMP TIME PAYOFF	70	0	70	
5840	MEDICARE	129,425	50,058	179,484	
5880	SHIFT DIFFERENTIAL PAY	60,108	18,033	78,141	
5882	SHIFT DIFFERENTIAL OVERTIME	2,946	884	3,830	
5910	STANDBY PAY	35,301	10,496	45,796	
5930	LONGEVITY PAY	20,452	20,452	40,904	
5932	RETENTION INCENTIVE	1,000	0	1,000	
5960	TERMINAL SICK LEAVE PAY	19,778	0	19,778	
5970	TERMINAL ANNUAL LEAVE PAY	32,528	0	32,528	
5975	FORFEITED ANNUAL LEAVE PAYOFF	2,955	0	2,955	
5980	CALL BACK PAY	124	0	124	
5990	LABOR LOAD RESERVE-FRIDGE	13,902	5,377	19,279	
Sub Total		12,777,382	4,941,948	17,719,330	
Less Overtime and Unallowables		233,638	53,155	286,793	
Total Allowable		12,543,744	4,888,793	17,432,537	
				17,432,537	
L01 Authority				\$17,683,991	
Less L01 Authority for Unallowables				(\$123,858)	
Net L01 Authority for Allowables				\$17,560,133	
Approved WP C72596				(\$2,019,562)	
Approved CB Work Program				\$0	
Current Authority				\$15,540,571	
Over/(Short)				(\$1,891,966)	
Projected 25CB31621 CB COLA				\$1,294,836	
Projected 25CS31621 Continuity of Service				\$40,904	
Projected Internal Transfers (Bal)				\$0	
Salary Adjustment WP Request				(\$556,226)	
Internal Transfers (Bal)				\$ -	
Internal Transfers (UA)				\$ -	
Transfer Work Program				\$ -	
IFC Contingency Fund				\$ 162,934.98	

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**

**NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH**



Cody L. Phinney, MPH
Administrator

Ihsan Azzam, Ph.D.,
M.D.
Chief Medical Officer

DATE: March 25, 2025

TO: Tiffany Greenameyer, Director, Governor's Finance Office

THROUGH: Richard Whitley, DHHS Director, Director's Office *CKH* for Richard Whitley

FROM: Cody Phinney, Administrator *JPB* (John Borrowman for Cody Phinney)

RE: Request for SFY25 Salary Adjustment Funds- Cost of Living Adjustment – BA3168

Pursuant to Assembly Bill 522, Sections 4, 5, 13, and 14 of the 82nd Legislative Session, the Division of Public and Behavioral Health (DPBH), BA3168 Behavioral Health Administration (BHA) is requesting reimbursement for the Cost-of-Living Adjustment (COLA) expenditures where the funding was not appropriated directly to the agency.

Attached are the before and after fund maps (all eligible positions are 100% other funding), operating statement, category 01 expenditures by GL, GFO All Agency Memo 2023-05 table with available COLA balance, salary adjustment calculations, salary projections by PCN, NEBS130, WP form for 25SA31681, and 2023 AB522.

BHA is authorized \$518,381 for the Cost of Living Adjustment. BHA projects to have a shortfall of \$232,740 for the SFY25 COLA, of which \$19,213 is for unclassified staff and \$213,527 is for classified staff. BHA will exhaust the authority in the Personnel category in May 2025. After exhausting all other funding sources, including internal transfers among categories and fiscal support for the Continuity of Service expenses, BHA requests \$103,995 (\$8,585 for unclassified staff and \$95,410 for classified staff) for SFY25 from the Board of Examiner's (BOE) Salary Adjustment Fund to provide for the actual and projected COLA expenditures.

BA 3168 Behavioral Health Administration
BOE Salary Adjustment Calculation
SFY 2025

	Amount	Notes/Methodology
FY25 Projected Personnel Shortfall (May 12 - June 30, 2025)	228,619	Shortfall calculated by PCN
FY25 Projected Longevity	4,121	Estimated amount of Longevity payments made to eligible staff in FY25
Unfunded shortfall	232,740	

BOE Salary Adjustment	518,381	Total BOE Salary Adjustment funds available to BA3168
Salary Acceleration (NPD-4 Exempt)	-	
NPD-4 Exempt Reversion	-	
Salary Acceleration (NPD-4 Non-Exempt)	-	
Overtime	(13,650)	Reduce BOE Salary Adjustment balance by unbudgeted overtime
Shift Diff	-	
Shift Diff OT	-	
Standby Pay	-	
Term Leave	-	
Adjusted BOE Salary	504,731	

May BOE Request 103,995

BOE COLA Salary Adjustment Request - Unclassified	8,585	Shortfall calculated by PCN
BOE COLA Salary Adjustment Request - Classified	95,410	Shortfall calculated by PCN
	103,995	

Remaining shortfall (WP C749960 + Longevity Request)

128,745 Anticipate requesting at August BOE

CBA	-	Shortfall calculated by PCN
COLA Unclassified	10,628	Shortfall calculated by PCN
Classified	118,117	Shortfall calculated by PCN
	128,745	

Behavioral Health Administration
BA 3168
Cat 01 Projections
FY2025

Object	Description	Expended	Projected	Total	L01
5100	SALARIES	\$ 753,726.07	\$ 427,579.00	\$ 1,181,305.07	
5200	WORKERS COMPENSATION	\$ 16,639.44	\$ 8,265.65	\$ 24,905.09	
5300	RET CONT EMPLOYER PAY PLAN	\$ 106,014.09	\$ 52,662.55	\$ 158,676.64	
5301	RET CONT EMPLOYEE/EMPLOYER PLN	\$ 93,858.74	\$ 46,624.37	\$ 140,483.11	
5400	PERSONNEL ASSESSMENT	\$ 2,512.50	\$ 837.50	\$ 3,350.00	
5420	COLLECTIVE BARGAINING ASSESSMENT	\$ 63.75	\$ -	\$ 63.75	
5430	LABOR RELATIONS ASSESSMENT	\$ 796.00	\$ -	\$ 796.00	
5500	GROUP INSURANCE	\$ 95,307.71	\$ 47,344.15	\$ 142,651.86	
5610	SICK LEAVES	\$ 40,526.32	\$ -	\$ 40,526.32	
5620	ANNUAL LEAVES	\$ 54,372.85	\$ -	\$ 54,372.85	
5650	OTHER LEAVES	\$ 2,641.38	\$ -	\$ 2,641.38	
5700	PAYROLL ASSESSMENT	\$ 468.00	\$ 156.00	\$ 624.00	
5750	RETIRED EMPLOYEES GROUP INSURA	\$ 27,054.06	\$ -	\$ 27,054.06	
5810	OVERTIME PAY	\$ 8,680.10	\$ 13,400.00	\$ 22,080.10	\$ -
5840	HOLIDAY PAY	\$ 12,306.46	\$ 6,113.24	\$ 18,419.70	
5930	LONGEVITY	\$ 1,795.66	\$ 2,325.00	\$ 4,120.66	
5970	TERMINAL ANNUAL LEAVE	\$ 1,771.09	\$ -	\$ 1,771.09	\$ -
Sub Total		\$ 1,218,534.22	\$ 605,307.46	\$ 1,823,841.68	
Less Overtime and Unallowables		\$ 10,451.19	\$ 13,400.00	\$ 23,851.19	
Total Allowable		\$ 1,208,083.03	\$ 591,907.46	\$ 1,799,990.49	
		\$ 1,208,083.03		\$ 1,799,990.49	
				\$ 1,799,990.49	
			Total L01 Authority	\$ 1,591,102.00	
			Less L01 Authority for Unallowables	\$ -	
			Net L01 Authority for Allowables	\$ 1,591,102.00	
			Approved CB Work Program	\$ -	
			Current Authority	\$ 1,591,102.00	
			Over (Short)	\$ (208,888.49)	
			CB COLA	\$ -	
			CB Bonus	\$ -	
\$	4,120.66		Projected Continuity of Service	\$ 4,120.66	
\$	100,773.81		Projected Internal Transfers (Bal)	\$ 100,773.81	
\$	103,994.02		Salary Adjustment WP Request	\$ (103,994.02)	
\$	208,888.49				
			Internal Transfers (Bal)	\$ 100,773.81	
			Internal Transfers (UA)	\$ 23,851.19	
			Transfer Work Program	\$ 124,625.00	
			IFC Contingency Fund	\$ -	

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Helping people. It's who we are and what we do.



Cody Phinney
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical Officer

DATE: March 25, 2025
TO: Tiffany Greenameyer, Governor's Finance Office Director
THROUGH: Richard Whitley, DHHS Director, DHHS Director's Office *CKH* for Richard Whitley
FROM: Cody Phinney, Administrator *JAB* (John Borrowman for Cody Phinney)
RE: Request for SFY25 Salary Adjustment Funds – Cost of Living Adjustment - BA 3200

Pursuant to Assembly Bill 522, Sections 5 and 14 of the 82nd Legislative Session, Division of Public and Behavioral Health, BA 3200 Prev/Treat of Problem Gambling, is requesting reimbursement for the Cost of Living Adjustment expenditures for classified personnel where the funding was not appropriated directly to the agency.

Attached are the before and after fund maps (all eligible positions are 100% General Fund), operating statement, category 01 expenditures by GL, GFO All Agency Memo 2023-05 table with available COLA balance, salary adjustment calculations, salary projections by PCN, NEBS130, WP form, and 2023 AB522.

Prev/Treat of Problem Gambling requests \$20,994 for SFY25 to provide for the actual and projected Cost of Living Adjustment expenditures for classified employees.

Problem Gambling

BA 3200

Salary Adjustment Funds Balance Calculations

FY25 Salary Adjustment Funds Available	\$	21,068

Requests:

COLA	\$	21,179

Overtime		-

Longevity Pay		(185.65)

Shift Differential		-

Stand by Pay		-

25SA32001	\$	20,994

Balance Available	\$	74

Prev/Treat Problem Gambling
BA 3200
Cat 01 Projections
Work Program 25SA32001
FY25

		BSR: 2/10/25			L01 for UA
Object	Description	Expended	Projected	Total	
5100	SALARIES	\$ 37,530.00	\$ 31,825.44	\$ 69,355.44	
5200	WORKERS COMPENSATION	\$ 459.62	\$ 469.36	\$ 928.98	
5300	RET CONT EMPLOYER PAY PAN	\$ 15,389.94	\$ 10,661.48	\$ 26,051.42	
5400	PERSONNEL ASSESSMENT	\$ 99.00	\$ 99.00	\$ 198.00	
5420	COLLECTIVE BARGAINING ASSESSMT	\$ 4.25	\$ -	\$ 4.25	
5430	LABOR RELATIONS ASSESSMENT	\$ 57.00	\$ -	\$ 57.00	
5500	GROUP INSURANCE	\$ 5,955.32	\$ 3,789.41	\$ 9,744.73	
5610	SICK LEAVES	\$ 3,171.18	\$ -	\$ 3,171.18	
5620	ANNUAL LEAVES	\$ 3,577.12	\$ -	\$ 3,577.12	
5640	COMP TIME LEAVES	\$ 1,501.20	\$ -	\$ 1,501.20	
5650	OTHER LEAVES	\$ 75.06	\$ -	\$ 75.06	
5700	PAYROLL ASSESSMENT	\$ 18.50	\$ 18.50	\$ 37.00	
5750	RETIRED EMPLOYEES GROUP INSURA	\$ 1,457.20	\$ 1,012.09	\$ 2,469.29	
5840	MEDICARE	\$ 633.03	\$ 448.07	\$ 1,081.10	
5930	LONGEVITY PAY	\$ 85.65	\$ 100.00	\$ 185.65	
Sub Total		\$ 70,014.07	\$ 48,423.35	\$ 118,437.42	

Less Overtime and Unallowable	\$ -	\$ -	\$ -

Total Allowable	\$ 70,014.07	\$ 48,423.35	\$ 118,437.42

\$ 118,437.42

Total L01 Authority	\$ 97,258.00
Less L01 Authority for Unallowables	\$ -
Net L01 Authority for Allowables	\$ 97,258.00
CBA Work Program	\$ -
Current Authority	\$ 97,258.00
Over (Short)	\$ (21,179.42)

Projected Continuity of Service	\$ 185.65
Salary Adjustment WP Request	\$ (20,993.77)

Internal Transfers (Bal)	\$ -
Internal Transfers (UA)	\$ -
Transfer Work Program	\$ -

IFC Contingency Fund	\$ -

Joe Lombardo
Governor

Richard Whitley,
MS
Director



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



Cody Phinney,
MPH
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical
Officer

DATE: April 11, 2025

TO: Tiffany Greenameyer, Governor's Finance Office Director

THROUGH: Richard Whitley, DHHS Director, DHHS Director's Office *CKH* or Richard Whitley

FROM: Cody Phinney, Administrator *CJB* (John Borrowman for Cody Phinney)

RE: Request for SFY25 Salary Adjustment Funds – Cost of Living Adjustment - BA 3645

Pursuant to Assembly Bill 522, Sections 4, 5, 13, and 14 of the 82nd Session of Nevada Legislature, Lake's Crossing Center (LCC) BA 3645 is requesting reimbursement for the Cost of Living Adjustment expenditures where the funding was not appropriated directly to the agency.

Attached are the revenue and expenditure schedule, fund map (all eligible positions are 100% General Fund), salary projections, Cost of Living Adjustment calculation, schedule of authorized amount for the Cost of Living Adjustment per the All Agency Memo 2023-05 from the Governor's Finance Office, NEBS130, Category 01 by GL, and non-IFC work program cover page 25SA36451.

LCC was authorized \$2,788,627 for the Cost of Living Adjustment. The actual request is \$341,447 for SFY25 salary adjustment funds after exhausting all other funding sources, including budgetary transfers. LCC will run out of authority in late April. This request is \$32,328 for unclassified positions and \$309,119 for classified positions.

BA3645 Lakes Crossing Center
BOE Salary Adjustment Calculation
SFY 2025

	Amount	Notes / Methodology
Projected Personnell Services Shortfall	\$ 3,384,841	Shortfall calculated by PCN
Two Grade Increase Authority	\$ (471,113)	Total authority of BOE Salary Adjustment funds for 2 grade increase reduction (see grades calculation)
Two Grade Increase Projected Need	\$ 438,549	Projected Need for Two Grade Increase (resulting in \$32,564 difference)
BOE Salary Adjustment Funds (Longevity)	\$ 17,225	Projected amount of longevity payments made to eligible staff in FY25
BOE Salary Adjustment Funds (CBA)	\$ 1,423,850	Amount of salaries associated with 24% (13% in year 1 and 11% in year 2) increase for those part of a Collective Bargaining Agreement
BOE Salary Adjustment Funds (Bonus)	\$ 34,500	Amount of actual recruitment bonuses paid through 03/21/2025
Less Overtime and Unallowables	\$ 1,567,819	Amount of unallowables less L01 authority for unallowables
Unfunded shortfall	\$ 374,011	After exhausting all other revenue sources, COLA shortfall to be solved by requesting BOE Salary Adjustment funds
Two Grade Increase Savings	\$ (32,564)	
Work Program Request	\$ 341,447	
BOE Salary Adjustment Ceiling	2,788,627	Total BOE Salary Adjustment funds available to BA3645 in FY25
Overtime	(1,468,238)	Reduce BOE Salary Adjustment balance by unbudgeted overtime (OT budgeted for \$258,731)
Comp Time Pay	(5,799)	Reduce BOE Salary Adjustment balance by unbudgeted comp time pay
Shift Diff OT	(38,923)	Reduce BOE Salary Adjustment balance by unbudgeted shift differential OT pay
Field Training Officer Pay	(359)	Reduce BOE Salary Adjustment balance by unbudgeted standby pay
Retention Incentive	(353)	Reduce BOE Salary Adjustment balance by unbudgeted retention incentive pay
Dangerous Duty Pay	(356)	Reduce BOE Salary Adjustment balance by unbudgeted dangerous duty pay
Term Sick Leave Pay	(5,902)	Reduce BOE Salary Adjustment balance by unbudgeted term sick leave pay
Term Annual Leave Pay	(47,547)	Reduce BOE Salary Adjustment balance by unbudgeted term annual leave pay
Call Back Pay	(341)	Reduce BOE Salary Adjustment balance by unbudgeted call back pay
Actual BOE Salary	1,220,808	Adjusted BOE Salary Adjustment funds available to BA3645
Remaining COLA Authority	\$ 846,797	
NON-CBA CLASSIFIED	\$ 32,328	
NON-CBA UNCLASSIFIED	\$ 309,119	

Lakes Crossing Center
BA 3645
Cat 01 Projections
FY2025

Object	Description	FY25 Expended	Projection	Total	L01 for UA
5100	SALARIES	\$ 4,927,461	\$ 2,453,202	\$ 7,380,664	
5200	WORKERS COMPENSATION	\$ 111,510	\$ 46,065	\$ 157,575	
5300	RET CONT EMPLOYER PAY PLAN	\$ 800,561	\$ 330,712	\$ 1,131,273	
5301	RET CONT EMPLOYEE/EMPLOYER PLN	\$ 897,824	\$ 370,891	\$ 1,268,715	
5400	PERSONNEL ASSESSMENT	\$ 16,565	\$ 6,843	\$ 23,407	
5420	COLLECTIVE BARGAINING ASSESSMT	\$ 357	\$ -	\$ 357	
5430	LABOR RELATIONS ASSESSMENT	\$ 6,082	\$ -	\$ 6,082	
5500	GROUP INSURANCE	\$ 576,792	\$ 238,273	\$ 815,065	
5610	SICK LEAVES	\$ 302,612	\$ -	\$ 302,612	
5620	ANNUAL LEAVES	\$ 304,339	\$ -	\$ 304,339	
5640	COMP TIME LEAVES	\$ 260,403	\$ -	\$ 260,403	
5650	OTHER LEAVES	\$ 78,287	\$ -	\$ 78,287	
5700	PAYROLL ASSESSMENT	\$ 3,090	\$ 2,060	\$ 5,150	
5750	RETIRED EMPLOYEES GROUP INSURA	\$ 186,621	\$ 77,093	\$ 263,714	
5810	OVERTIME PAY	\$ 1,218,127.67	\$ 508,542	\$ 1,726,669	258,431.00
5820	HOLIDAY PAY	\$ 39,738	\$ 16,416	\$ 56,153	
5830	COMP TIME PAYOFF	\$ 4,104	\$ 1,695	\$ 5,799	
5840	MEDICARE	\$ 104,831	\$ 43,306	\$ 148,137	
5880	SHIFT DIFFERENTIAL PAY	\$ 110,761	\$ 45,755	\$ 156,516	
5882	SHIFT DIFFERENTIAL OVERTIME	\$ 38,923.18	\$ -	\$ 38,923	
5887	FIELD TRNG OFFICER PAY	\$ 359	\$ -	\$ 359	
5891	RECRUITMENT BONUS PAY	\$ 34,500	\$ -	\$ 34,500	
5910	STANDBY PAY	\$ 18,101	\$ 7,477	\$ 25,578	
5930	LONGEVITY PAY	\$ 6,385	\$ 2,638	\$ 9,023	
5932	RETENTION INCENTIVE	\$ 250	\$ 103	\$ 353	
5940	DANGEROUS DUTY PAY	\$ 252	\$ 104	\$ 356	
5960	TERMINAL SICK LEAVE PAY	\$ 4,177	\$ 1,726	\$ 5,902	
5970	TERMINAL ANNUAL LEAVE PAY	\$ 33,647	\$ 13,900	\$ 47,547	
5980	CALL BACK PAY	\$ 241	\$ 100	\$ 341	
7355	COURT AWD-COMPENSATORY DAMAGES	\$ 1,980	\$ 816	\$ 2,798	
Sub Total		\$ 10,088,879	\$ 4,167,717	\$ 14,256,597	
Less Overtime and Unallowables		\$ 1,300,081	\$ 526,169	\$ 1,826,250	
Total Allowable		\$ 8,788,799	\$ 3,641,549	\$ 12,430,347	
				\$ 12,430,347	
L01 Authority		\$	12,023,013		
Less L01 Authority for Unallowables		\$	(258,431)		
Net L01 Authority for Allowables		\$	11,764,582		
Approved WP C67723		\$	(1,151,257)		
Approved CB Work Program		\$	-		
Current Authority		\$	10,613,325		
Over/(Short)		\$	(1,817,022)		
Projected 25CB36451 CB COLA		\$	1,423,850		
Projected 25CS36451 Continuity of Service		\$	17,225		
Projected 25CB36452 Recruitment Bonus		\$	34,500		
Projected Internal Transfers (Bal)		\$	-		
*Projected 2-Grade Cash Adj		\$	(32,564)		
Salary Adjustment WP Request		\$	(374,011)		
Internal Transfers (Bal)		\$	-		
Internal Transfers (UA)		\$	-		
Transfer Work Program		\$	-		
IFC Contingency Fund			1,567,818.66		

*RGL 4601 authority is \$471,113 for 2-grade step increases authorized by the 82nd Legislative Session. The agency projects only \$438,549 is needed, resulting in salary savings of \$32,564. The overall salary shortfall resulting from cost-of-living increases through state fiscal year 2025 is \$374,011, which is reduced by \$32,564 for a total work program need of \$341,477.

State of Nevada Work Program

WP Number: 25SA36451

FY 2025

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

DATE	FUND	AGENCY	BUDGET	DEPT/DIV/BUDGET NAME
02/19/25	101	406	3645	HHS-DPBH- LAKES CROSSING CENTER

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	341,447	471,113	812,560
Subtotal Budgetary General Ledgers		0	Subtotal Revenue General Ledgers(RB)		341,447		812,560
Total Budgetary & Revenue GLs					341,447		

Expenditures

[illegible]

Sub Total Category Expenditures

341,447

Total Budgetary General Ledgers and Category Expenditures (AP)

341,447

[illegible]

This work program requests the transfer from the General Fund Salary Adjustment Funds to the Personnel Services category to fund a projected shortfall for the remainder of the fiscal year due to Cost of Living Adjustments (COLA).

chadwic1

Authorized Signature

04/14/25

Date _____

Controller's Office Approval

Does not require Interim Finance approval since WP implements general/highway fund salary adjustments approved by the BOE

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522 Sections 4, 5, 13, and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3145	Division of Child and Family Services – Children, Youth and Family Administration Account	\$597,232
	Total	\$597,232

Joe Lombardo
Governor

Richard Whitley, MS
Director



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



Marla McDade
Williams, MPA
Administrator

DATE: April 08, 2025

TO: Tiffany Greenameyer, Director, Governor's Finance Office
THROUGH: Richard Whitley, Director, DHHS Director's Office *CKH* for Richard Whitley
FROM: Marla McDade Williams, Administrator, Division of Child and Family Services
RE: Request for SFY25 Salary Adjustment Funds – Cost of Living Adjustment - BA 3145

Pursuant to Assembly Bill 522, Sections 4, 5, 13, and 14 of the 82nd Legislative Session, Division of Child and Family Services, BA 3145, Children, Youth & Family Admin, is requesting reimbursement for the Cost of Living Adjustment expenditures where the funding was not appropriated directly to the agency.

Attached please find Revenue and Expenditure Detail, Fund Map, Salary Projections by PCN, Cost of Living Adjustment calculation, BOE Salary Adjustment Calculation, and Non-IFC Work Program Cover Page.

BA 3145 Children, Youth & Family Admin requests \$597,232 for SFY25 to provide for the actual and projected Cost of Living Adjustment expenditure.

BA 3145 BOE SALARY ADJUSTMENT SUMMARY

Salary Adjustment Funds (per All Agency Memo 2023-05)	\$	597,232
Allowable Salary Adjustment Funds (based on Actuals + Projections)	\$	752,629
GFUND Salary Shortfall	\$	1,157,562
SFY2025 Salary Fund Adjustment Request	\$	597,232
Longevity	\$	7,525
Contingency Request to be submitted separately	\$	552,805
Balance	\$	-

This budget account will be out of authority after pay period 25

1.2432

100%

[illegible]

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 5, 13 and 14 made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3203	Department of Health and Human Services Office of Data Analytics	\$58,705
	Total	\$58,705

BA 3203 BOE SALARY ADJUSTMENT SUMMARY

Salary Adjustment Funds (per All Agency Memo 2023-05)	\$	143,799.00
Allowable Salary Adjustment Funds (based on Actuals + Projections)	\$	135,847.85
Longevity		\$273.03
Unallowable GLs	\$	-
SFY2025 Projected Shortfall	\$	(58,977.25)
Total Salary Adjustment Funds Request		\$58,705.00

FY	2025
Unit	3203

Total salary projection by GL for all funding sources

Sub Unit	GL	Expended	Projected	Total
1	5100	\$ 1,318,911.44	\$ 556,893.67	\$ 1,875,805.11
	5200	\$ 27,839.87	\$ 12,854.13	\$ 40,694.00
	5300	\$ 167,808.78	\$ 245,907.22	\$ 413,716.00
	5301	\$ 172,591.70	\$ -	\$ 172,591.70
	5400	\$ 4,285.50	\$ 1,428.50	\$ 5,714.00
	5420	\$ 72.25	\$ 41.75	\$ 114.00
	5430	\$ 1,535.00	\$ -	\$ 1,535.00
	5500	\$ 160,657.60	\$ 103,474.40	\$ 264,132.00
	5610	\$ 72,157.03	\$ -	\$ 72,157.03
	5620	\$ 85,121.83	\$ -	\$ 85,121.83
	5640	\$ 21.48	\$ -	\$ 21.48
	5650	\$ 9,862.32	\$ -	\$ 9,862.32
	5700	\$ 800.25	\$ 266.75	\$ 1,067.00
	5750	\$ 47,232.04	\$ 15,504.96	\$ 62,737.00
	5840	\$ 21,222.76	\$ 7,378.24	\$ 28,601.00
	5880	\$ 14.04	\$ -	\$ 14.04
	5930	\$ 1,177.94	\$ -	\$ 1,177.94
	5970	\$ 2,862.41	\$ 300.00	\$ 3,162.41
Grand Total		\$ 2,094,174.24	\$ 944,049.62	\$ 3,038,223.86

Total General Fund Projected	\$ 713,087.25
L01 AUTHORITY	\$ 654,110.00
Over/(Short)	\$ (58,977.25)
Unallowable GLs	\$ -
Continuity of Service (Actuals Only)	\$ 273.03
Salary Adj. Funds Request	\$ 58,705.00
	\$ 0.78

ADMIN	Employee Title	MANAGEMENT ANALYST 2	HEALTH BUREAU CHIEF	MANAGEMENT ANALYST 4	CHIEF BIOSTATSTCN, DATA ANALYST	MANAGEMENT ANALYST 3	BIOSTATSTICIAN 2
BRIEFING SUPPORT WORKSHEET AND PROJECTION							
BA 3203	RETIREMENT	PP02	PP02	PP02	XP010	PP01	PP01
	FRINGE	41.93%	41.93%	41.93%	25.93%	25.93%	25.93%
	HOURLY RATE	\$ 32.83	\$ 54.03	\$ 42.96	\$ 66.27	\$ 38.34	\$ 35.11
SPY25 SALARY COST	CURRENT						
	GRADE-STEP	35-06	42-10	39-08	UNCLASS	37-04	35-04
ANNIVERSARY DATE		6/10/2025	7/1/2025	4/4/2025	7/1/2025	7/1/2025	7/1/2025
HOURLY GRADE-STEP		\$ 34.32	\$ 54.03	\$ 44.98	\$ 66.27	\$ 40.07	\$ 36.68
		35-07	42-10	39-09	UNCLASS	37-05	35-05
	INS. RATE	\$759	\$759	\$759	\$759	\$759	\$759
	RGL	2501	2501	2501	2501	2501	2501

Pay Period	PCH	24	35	207	396	403	1207	DATE
01 (JUST INSURANCE) (JULY)	6/10/2024	6/23/2024	\$730	\$730	\$730			7/5/2024
02 (7 working days)	6/24/2024	7/7/2024	1,889.72	2,847.60	2,371.57			7/19/2024
151 QTR PAYROLL ASMT (GL 5700)			9.19	9.19	9.19	9.19	9.20	9/13/2024
151 QTR PERSNL ASMT (GL 5400)			49.26	49.26	49.25	49.25	49.25	9/13/2024
Collective Bargaining asmt (GL 5420)			2.50	2.50	2.50	2.50	2.49	9/13/2024
Labor Relations Assessment (GL 5430)			52.93	52.96	52.93	52.93	52.93	9/13/2024
04	7/8/2024	7/21/2024	4,532.69	6,882.49	5,139.42			7/19/2024
05 INS (AUGUST)								9/10/2024
06	7/22/2024	8/4/2024	3,744.69	5,698.03	4,745.52			9/10/2024
07	8/5/2024	8/18/2024	3,745.97	5,700.90	4,746.14			9/10/2024
08 INS (OCTOBER)	9/16/2024	9/29/2024	4,903.68	6,459.49	5,504.52			9/10/2024
09	9/30/2024	10/13/2024	3,744.69	5,698.03	4,745.53			9/10/2024
2ND QTR PAYROLL ASMT (GL5700)			9.19	9.19	9.19	9.19	9.20	9/10/2024
2ND QTR PERSNL ASMT (GL5400)			49.26	49.26	49.25	49.25	49.25	9/10/2024
10 INS (NOVEMBER)	10/14/2024	10/27/2024	4,320.82	6,579.08	5,453.09			9/10/2024
11	10/28/2024	11/10/2024	3,627.66	5,967.66	4,745.52			9/10/2024
12 INS (DECEMBER)	11/11/2024	11/24/2024	4,986.66	6,729.12	5,504.52			9/10/2024
13	11/25/2024	12/7/2024	3,627.66	5,967.66	4,745.53			9/10/2024
LONGEVITY (GL5930)	12/15/2023		149.89	128.48				9/10/2024
14 INS (JANUARY)	12/9/2024	12/22/2024	4,486.49	6,893.37	5,635.09			9/10/2024
15	12/23/2024	1/5/2025	3,721.48	6,188.84	4,935.88			9/10/2024
16 INS (FEBRUARY)	1/6/2025	1/19/2025	3,728.78	6,134.77	4,876.71			9/10/2025
3RD QTR PAYROLL ASMT			9.19	9.19	9.19	9.19	9.20	9/10/2025
3RD QTR PERSNL ASMT			49.26	49.26	49.25	49.25	49.25	9/10/2025
17 (March)	1/20/2025	2/2/2025	4,420.65	6,851.90	5,593.66			9/10/2025
18 INS	2/3/2025	2/16/2025	3,721.49	6,130.75	4,876.10			9/10/2025
19 (April)	2/17/2025	3/2/2025	4,486.49	6,893.37	5,635.09			9/10/2025
20 INS	3/3/2025	3/16/2025	3,727.48	6,130.75	4,876.09			9/10/2025
21	3/17/2025	3/30/2025	3,727.65	6,134.78	4,877.85			9/10/2025
22 INS (MAY)	3/31/2025	4/13/2025	4,486.65	6,893.78	5,866.21			9/10/2025
4TH QTR PAYROLL ASMT			9.19	9.19	9.19	9.19	9.20	9/10/2025
4TH QTR PERSNL ASMT			49.26	49.26	49.25	49.25	49.25	9/10/2025
23	4/14/2025	4/27/2025	3,727.65	6,134.78	5,107.21			9/10/2025
LONGEVITY (GL5930)			149.89	128.48				9/10/2025
24 INS (JUNE)	4/28/2025	5/11/2025	4,486.65	6,893.78	5,866.21			9/10/2025
25	5/12/2025	5/25/2025	3,727.65	6,134.78	5,107.21			9/10/2025
26	5/26/2025	6/8/2025	3,727.65	6,134.78	5,107.21			9/10/2025
01 SEP 24 INS (JULY)	6/9/2025	6/22/2025	3,896.83	6,134.78	5,107.21			9/10/2025
02	6/23/2025	7/6/2025	3,896.83	6,134.78	5,107.21			9/10/2025
Total			107,374.27	157,432.63	137,836.49	138,020.30	78,577.75	83,845.81
Actuals								
General Funds 2401								
Remaining								
Projection								
ROL								

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, section Sections 4, 6, 13, and 14 made appropriations from 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 Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	HIGHWAY FUND ADJUSTMENT
4715	Department of Motor Vehicles-Automation	\$1,081,211
4717	Department of Motor Vehicles – Motor Carrier	\$109,388
4735	Department of Motor Vehicles – Field Services	\$4,888,169
	Total	\$6,078,768



Memorandum

From
Tonya Laney
Director
Voice (775) 684-4549
Fax (775) 684-4692
Tlaney@dmv.nv.gov

To: Tiffany Greenameyer, Director

Governor's Finance Office

Date: March 4, 2025

Subject: Updated Work program requests for Salary Adjustment funds

BLW
3/3/2025

The Department of Motor Vehicles is projecting a shortfall of Highway Fund appropriations to fund salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 5, of the 82nd legislative session, the Department is requesting reimbursements of actual and projected COLA expenditures for state fiscal year 2025.

The Department has taken actions to ensure the total request for BOE salary adjustment funds are only for the budget accounts with a projected shortfall in Category 01. The Department is requesting a total of \$6,078,768 for the budget accounts listed below. There are no alternatives available to the department to fund the remaining budget account shortfalls.

Without this allocation, these budget accounts funded with Highway Fund appropriations are projected to have insufficient funding available to pay Category 01 expenditures through the end of fiscal year 2025 due to the COLA increases authorized by the Legislature.

Budget Account	2025 COLA allotted	2025 COLA requested
4715	\$1,844,473	\$1,081,211
4717	\$928,334	\$109,388
4735	\$11,210,664	\$4,888,169
TOTAL	\$13,983,471	\$6,078,768

Attachments include salary and expenditure projections through fiscal year 2025

Analysis as of : 02/26/25

Holidays Paydate Pay Period Pay Period Dates	Pending 6/6/25 PP25	Pending 6/20/25 PP26	Pending Juneteenth 7/4/25 PP01	Pending Juneteenth 7/18/25 PP02	TOTAL	BUDGET	DIFF.
Salaries							
5100 - Salaries	\$ 223,143.34	\$ 223,143.34	\$ 223,143.34	\$ 133,886.00	\$ 5,723,780.81	\$ 6,001,782	\$ 278,001.19
5610-5690 Leave Time	\$ 34,414.68	\$ 34,414.68	\$ 34,414.68	\$ 20,648.81	\$ 874,945.53	\$ -	\$ (874,945.53)
5904 - Vacancy Savings	\$ -	\$ -	\$ -	\$ -	\$ -	\$ (41,207)	\$ (41,207.00)
Subtotal	\$ 257,558.02	\$ 257,558.02	\$ 257,558.02	\$ 154,534.81	\$ 6,598,726.34	\$ 5,960,575.00	\$ (638,151.34)
Employee Costs							
5200 - Workers Comp	\$ 9,845.66	\$ 9,845.66	\$ 9,845.66	\$ 5,907.40	\$ 151,205.84	\$ 105,173	\$ (46,032.84)
5300 - Retirement Employee Pay	\$ 28,512.54	\$ 28,512.54	\$ 28,512.54	\$ 17,107.52	\$ 734,229.01	\$ 1,299,801	\$ 565,571.99
5301 - Retirement Employee/Employer Pay	\$ 30,447.83	\$ 30,447.83	\$ 30,447.83	\$ 18,268.70	\$ 782,093.14	\$ -	\$ (782,093.14)
5400 - Personnel Assessment	\$ 3,744.00	\$ -	\$ 3,744.00	\$ -	\$ 18,720.00	\$ 14,976	\$ (3,744.00)
5420 - Collective Bargaining Assessment	\$ -	\$ -	\$ -	\$ -	\$ 242	\$ 306	\$ 63.75
5430 - Labor Relations Assessment	\$ -	\$ -	\$ -	\$ -	\$ 3,865	\$ 3,865	\$ -
5500 - Group Insurance	\$ -	\$ 57,684.00	\$ -	\$ 57,684.00	\$ 601,809.18	\$ 692,208	\$ 90,398.82
5700 - Payroll Ass.	\$ 698.50	\$ -	\$ 698.50	\$ -	\$ 3,492.50	\$ 2,794	\$ (698.50)
5750 - Ret. Group Ins.	\$ 8,176.35	\$ 8,176.35	\$ 8,176.35	\$ 4,905.81	\$ 209,598.23	\$ 190,854	\$ (18,744.23)
5800 - Unemp Compensation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5840 - Medicare	\$ 3,626.82	\$ 3,626.82	\$ 3,626.82	\$ 2,176.09	\$ 93,708.76	\$ 87,028	\$ (6,680.76)
Subtotal	\$ 85,051.70	\$ 138,293.20	\$ 85,051.70	\$ 106,049.52	\$ 2,598,963.91	\$ 2,397,005.00	\$ (201,958.91)
Miscellaneous Costs							
5810 - Overtime Pay	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5820 - Holiday Pay	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5830 - Paid Comp	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5880 - Shift Diff (Non-OT)	\$ 500.70	\$ 500.70	\$ 500.70	\$ 300.42	\$ 12,002.24	\$ 10,532	\$ (1,470.24)
5882 - Shift Diff OT	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5910 - Standby Pay	\$ 1,481.24	\$ 1,481.24	\$ 1,481.24	\$ 888.74	\$ 44,098.88	\$ 41,463	\$ (2,635.88)
5930 - Longevity Pay	\$ -	\$ 10,947.00	\$ -	\$ -	\$ 21,893.68	\$ -	\$ (21,893.68)
5960 - Term Sick	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5970 - Term Annual	\$ -	\$ -	\$ -	\$ -	\$ 2,403.35	\$ -	\$ (2,403.35)
5975 - Forfeited Annual Leave Payoff	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
5980 - Call Back Pay	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal	\$ 1,981.94	\$ 12,928.94	\$ 1,981.94	\$ 1,189.16	\$ 80,398.15	\$ 51,995.00	\$ (28,403.15)
PP DAWN TOTAL	\$ 344,591.66	\$ 408,780.16	\$ 344,591.66	\$ 261,773.50	\$ 9,278,088.41	\$ 8,409,575	\$ (868,513.41)
YTD DAWN TOTAL	\$ 8,262,943.09	\$ 8,671,723.25	\$ 9,016,314.91	\$ 9,278,088.41			

Comp Balance

\$ 47,402.11

VACANCIES Date Vacant

0005 ITP 2 - grade 38-10	08/19/21
0006 ITP 3 - grade 40-10	01/05/25
0032 ITP 2 - grade 38-10	08/09/21
0077 ITP 2 - grade 38-10	11/05/20
0083 ITP 2 - grade 38-10	06/15/19
0084 ITP 2 - grade 38-10	08/09/21
0085 ITP 2 - grade 38-10	02/08/19

7

TOTAL PROJECTED	\$ 9,516,153.10	\$ (1,106,578.10)

\$ 9,516,153.10

Salary Adjust Authorized	\$ 1,844,473.00	Authority Difference Less OT
Balance	\$ (1,106,578.10)	Less Continuity Service
	\$ 737,894.90	Total Salary Adjustment Funds Needed

B/A 201-4735 - FIELD SERVICES
FY25 Salary Projections
FTE = 745

Analysis as of : 2/26/2025

Holidays
Paydate
Pay Period

Pay Period Dates	Expended	Projected	TOTAL	BUDGET	DIFF.
Salaries					
5100 - Salaries	\$ 21,770,062.49	\$ 12,540,064.99	\$ 34,310,127.48	\$ 36,395,974	\$ 2,085,846.52
5610-5690 Leave Time	\$ 3,458,763.87	\$ 2,111,304.10	\$ 5,570,067.97	\$ -	\$ (5,570,067.97)
5904 - Vacancy Savings	\$ -	\$ -	\$ -	\$ (320,013)	\$ (320,013.00)
Subtotal	\$ 25,228,826.36	\$ 14,651,369.09	\$ 39,880,195.45	\$ 36,075,961	\$ (3,804,234.45)
Employee Costs					
5200 - Workers Comp	\$ 534,448.11	\$ 557,048.74	\$ 1,091,496.85	\$ 1,034,066	\$ (57,430.85)
5300 - Retirement Employee Pay	\$ 2,089,500.14	\$ 1,191,761.09	\$ 3,281,261.23	\$ 7,688,628	\$ 4,407,366.77
5301 - Retirement Employee/Employer Pay	\$ 3,313,618.81	\$ 1,918,232.54	\$ 5,231,851.35	\$ -	\$ (5,231,851.35)
5400 - Personnel Assessment	\$ 109,806.75	\$ 36,602.25	\$ 146,409.00	\$ 146,409	\$ -
5420 - Collective Bargaining Assessment	\$ 2,779.50	\$ -	\$ 2,779.50	\$ 3,816	\$ 1,036.50
5430 - Labor Relations Assessment	\$ 41,607.00	\$ -	\$ 41,607.00	\$ 41,607	\$ -
5500 - Group Insurance	\$ 3,804,136.42	\$ 2,255,748.00	\$ 6,059,884.42	\$ 6,767,244	\$ 707,359.58
5700 - Payroll Ass.	\$ 20,484.75	\$ 6,828.25	\$ 27,313.00	\$ 27,313	\$ -
5750 - Ret. Group Ins.	\$ 797,585.45	\$ 461,715.46	\$ 1,259,300.91	\$ 1,157,372	\$ (101,928.91)
5800 - Unemp Compensation	\$ -	\$ -	\$ -	\$ -	\$ -
5840 - Medicare	\$ 358,262.23	\$ 205,269.79	\$ 563,532.02	\$ 527,736	\$ (35,796.02)
Subtotal	\$ 11,072,229.16	\$ 6,633,206.12	\$ 17,705,435.28	\$ 17,394,191	\$ (311,244.28)
Miscellaneous Costs					
5810 - Overtime Pay	\$ 99.56	\$ -	\$ 99.56	\$ -	\$ (99.56)
5830 - Paid Comp	\$ 3,578.05	\$ -	\$ 3,578.05	\$ -	\$ (3,578.05)
5880 - Shift Diff (Non-OT)	\$ 0.22	\$ -	\$ 0.22	\$ -	\$ (0.22)
5901 - Payroll Adjustment	\$ (1,310.94)	\$ -	\$ (1,310.94)	\$ -	\$ 1,310.94
5930 - Longevity Pay	\$ 74,736.81	\$ 74,737.00	\$ 149,473.81	\$ -	\$ (149,473.81)
5960 - Term Sick	\$ 34,061.48	\$ -	\$ 34,061.48	\$ -	\$ (34,061.48)
5970 - Term Annual	\$ 90,583.45	\$ -	\$ 90,583.45	\$ -	\$ (90,583.45)
5975 - Forfeited Annual Leave Payoff	\$ 1,166.82	\$ -	\$ 1,166.82	\$ -	\$ (1,166.82)
Subtotal			\$ 277,652.45	\$ -	\$ (277,652.45)
PP DAWN TOTAL			\$ 57,863,283.17	\$ 53,470,152.00	\$ (4,393,131.17)
YTD DAWN TOTAL					
Comp Balance			\$ 113,000.82		
Retire payout (1/31/25)			\$ 20,000.00		

\$ 58,511,368.12

\$ (5,041,116.56) Authority Difference Less OT
\$ (152,947.85) Less Continuity Service
\$ (4,888,168.71) Total Salary Adjustment Funds Needed
\$ (5,041,116.56)
\$ 99.56 Category help

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, section Sections 4, 5, 6, 13, 14, and 20 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	HIGHWAY FUND ADJUSTMENT
3740	Department of Public Safety – Parole and Probation	\$2,845,474	
3743	Department of Public Safety – Investigation Division	\$998,253	\$100,235
4701	Department of Public Safety – Evidence Vault	\$111,967	
	Total	\$3,955,694	\$100,235

Joe Lombardo
Governor



George Togliatti
Director

Sheri Brueggemann
Deputy Director

Director's Office

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

Memorandum

DATE: April 25, 2025

TO: Tiffany Smorra, Executive Branch Budget Officer

FROM: Kristi Defer, Administrative Services Officer, Department of Public Safety
Kristi Defer

SUBJECT: Public Safety - Salary Adjustment Funds (COLA) Request 2025

The Nevada Department of Public Safety (DPS) seeks approval from the Board of Examiners to request Appropriations to cover allowable unfunded salary increases.

Due to the 12% and 11% salary increases authorized by Assembly Bill 522, the DPS is projecting a shortfall to fund salary expenditures through the end of fiscal year 2025. The DPS has evaluated its available authority and does not have adequate funding to cover the shortfall through transfers within or between DPS budget accounts. Pursuant to Assembly Bill 522, Sections 4, 5, 13, 14 and 20 of the 82nd legislative session, DPS is requesting General Fund salary adjustment funds as follows. Pursuant to Assembly Bill 522, Sections 4, 6, 13 and 14 of the 82nd legislative session, DPS is requesting Highway Fund salary adjustment funds as follows for fiscal year 2025:

- Budget Account 3740-Parole & Probation is requesting a total of \$2,845,474 in General Fund
- Budget Account 3743-Investigation Division is requesting a total of \$998,253 in General Fund and \$100,235 in Highway Fund
- Budget Account 4701-Evidence Vault is requesting a total of \$111,967 in General Fund

If this request is denied, the divisions will not have sufficient funding to cover payroll expenses through the remainder of the fiscal year.

3740 - Parole & Probation
Detail Salary Projection
Fiscal Year: 2025

Object	Expended As of PP20	Projected	Total
5100 Salaries	\$ 23,820,342.22	10,383,739.58	34,204,081.80
5200 Workers' Comp	\$ 484,886.87	\$196,575.76	681,462.63
5300 Ret Cont Employer Pay Plan	\$ 7,343,020.18	\$2,976,900.07	10,319,920.25
5301 Ret Cont Employee/Employer Pln	\$ 2,280,427.90	\$924,497.80	3,204,925.70
5400 Personnel Assessment	\$ 89,410.50	\$29,803.50	119,214.00
5420 Collective Bargaining Assessment	\$ 1,836.00	\$696.00	2,532.00
5430 Labor Relations Assessment	\$ 32,399.00	\$0.00	32,399.00
5500 Group Insurance	\$ 3,024,026.54	\$1,147,608.00	4,171,634.54
5610 Sick Leaves	\$ 1,512,028.72	\$612,984.62	2,125,013.34
5620 Annual Leaves	\$ 1,634,093.73	\$662,470.43	2,296,564.16
5630 Holiday Leaves	\$ 2,669.22	\$1,082.12	3,751.34
5640 Comp Time Leaves	\$ 342,188.08	\$138,724.90	480,912.98
5650 Other Leaves	\$ 320,196.34	\$129,809.33	450,005.67
5700 Payroll Assessment	\$ 16,680.75	\$5,560.25	22,241.00
5750 Retired Employees Group Insura	\$ 877,276.21	\$509,921.97	1,387,198.18
5800 Unemployment Compensation	\$ 11,524.27	\$4,672.00	16,196.27
5810 Overtime Pay	\$ 877,065.05	\$355,566.91	1,232,631.96
5820 Holiday Pay	\$ 2,789.41	\$1,130.84	3,920.25
5830 Comp Time Payoff	\$ 12,129.03	\$42,020.65	54,149.68
5840 Medicare	\$ 412,553.01	\$232,511.59	645,064.60
5880 Shift Differential Pay	\$ 76,095.30	\$30,849.45	106,944.75
5882 Shift Differential Overtime	\$ 3,531.13	\$1,431.54	4,962.67
5885 Occupational Trng Salary Adj	\$ 478.97	\$194.18	673.15
5887 Field Trng Officer Pay	\$ 18,737.42	\$7,596.25	26,333.67
5890 Education Pay	\$ 59,700.00	\$0.00	59,700.00
5901 Payroll Adjustments			0.00
5904 Vacancy Savings			0.00
5910 Standby Pay	\$ 46,677.79	\$14,358.56	61,036.35
5930 Longevity Pay	\$ 66,842.42	\$84,846.72	151,689.14
5932 Retention Incentive	\$ 1,000.00		1,000.00
5940 Dangerous Duty Pay	\$ -		0.00
5960 Terminal Sick Leave Pay	\$ 19,342.14	\$58,705.94	78,048.08
5970 Terminal Annual Leave Pay	\$ 75,554.63	\$66,610.95	142,165.58
5975 Forfeited Annual Leave Payoff	\$ 10,323.74	\$29,713.30	40,037.04
5980 Call Back Pay	\$ 62,088.08	\$25,170.84	87,258.92
5990 Labor Load Reserve-Fringe	\$ 8,957.20	\$3,631.30	12,588.50
7170 Cloth/Uniform/Tool Allowance	\$ 146,825.06	96,386.44	243,211.50

\$ 43,693,696.91 \$ 18,775,771.77 62,469,468.68

L01 Authority minus E673 & E674 Salary Adjustment authority 55,223,503.00

Over / (Short) (7,245,965.68)

Excluded GLs

5810	Overtime Pay	1,232,631.96
5830	Comp Time Payoff	54,149.68
5880	Shift Differential Pay	106,944.75
5882	Shift Differential Overtime	4,962.67
5890	Education Pay	59,700.00
5910	Standby Pay	61,036.35
5930	Longevity Pay	151,689.14
5960	Terminal Sick Leave Pay	78,048.08
5970	Terminal Annual Leave Pay	142,165.58
5975	Forfeited Annual Leave Payoff	40,037.04
5980	Call Back Pay	87,258.92
7170	Cloth/Uniform/Tool Allowance	243,211.50
E673 & E674 Salary Adjustments		\$ 2,138,657.00
Salary Adjustment Funds Needed		\$ 2,845,473.01

GLs that should get reimbursed

5890	Education Pay	59,700.00
5930	Continuity of Service	151,689.14
5960	Terminal Sick Leave Pay	0.00
5970	Terminal Annual Leave Pay	14,753.01
5975	Forfeited Annual Leave Payoff	40,037.04
7170	Cloth/Uniform/Tool Allowance	243,211.50
E673 & E674 Salary Adjustments		\$ 2,138,657.00
		\$ 2,648,047.69
Net Over/Short		(51,752,444.98)

DPS - Investigations
Category 01 FY25 Salary Projections

Reconciled as of:
4/8/2025 PP21 CC

	L01	Work Programs	Revised L01	Dawn Expenditures	Projections	Total Expenses and Projections	Remaining Balance	DAWN	Actual	Balance
Personnel - General Fund 2801	5,574,407.00	0.00	5,574,407.00	5,048,288.43	2,234,236.15	7,282,524.58	(1,708,117.58)	\$ 5,869,860.43	\$ 5,869,860.43	\$ -
Salary Adjustment - GF 4601Sworn Grade										
Increases (Grade/Step)	317,916.00	0.00	317,916.00			0.00	0.00			
HWY Grade/Step	21,642.00	0.00	21,642.00			0.00	0.00			
Personnel - Highway Fund 2507	313,408.00		313,408.00	444,753.83	144,959.20	589,723.03	(276,315.03)			
Personnel - SafeVoice -DHHS	599,939.00	(75,000.00)	524,939.00	376,808.17	126,290.83	503,099.00	21,840.00			
TOTALS	6,827,312.00	(75,000.00)	6,752,312.00	5,869,860.43	2,505,466.18	8,375,346.61	(1,623,034.61)			
		PP In	PP To Go							
		20								
		Dawn								
	60			284,903.88						

	3-year Average	Expenditures	Projections	FY24	FY23	FY22	1.2432 Cola	Steps	Grade	Total Cola and Grade
5810 Overtime	\$ 76,879.61	\$ 126,065.95	\$ 76,879.61	\$	\$	\$	82,126.70			
5820 Holiday Pay	\$ 8,269.19	\$ 8,531.63	\$ (262.44)	\$	\$	\$	9,550.27			
5830 Comp Time Payoff	\$ 22,544.28	\$ 63,872.01	\$ 116,512.67	\$	\$	\$	26,150.00			
5880 Shift Differential	\$ 23,054.02	\$ 20,425.72	\$ 2,628.30	\$	\$	\$	20,958.71			
5882 Shift Differential Overtime	\$ 1,487.82	\$ 1,069.53	\$ 418.29	\$	\$	\$	25,619.85			
5910 Standby Pay	\$ 12,543.88	\$ 12,803.59	\$ (259.71)	\$	\$	\$	1,657.74			
5980 Call Back Pay	\$ 5,602.18	\$ 5,729.62	\$ (127.44)	\$	\$	\$	16,278.20			
Total	\$ 150,380.37	\$ 238,498.05	\$ 195,789.28	\$	\$	\$	9,820.02			
				\$ 6,463.52	\$ 9,260.98	\$ 1,082.06				

Projected Uniform Allowance QTR 4 \$1187.50 per QTR (350.0*19)
Projected Boot Allowance QTR 4 (62.50*19)

CB
CB

Retirement - Estimated Payouts
Longevity projected June Pymt

Total Projected GFUND
Total Projected HWY
Total Projected DHHS
Total Projected Salaries

Furlough pay out

Total revised authority

Projected Balance over/(short)

\$ - This is the difference between authority and actual amount spent. As of 1/23 we have not received the JV for furlough payouts, so technically we are short another 79k

\$ 6,752,312.00 L01 (E11)

\$ (1,913,873.45) Revised authority -L01 - total projected salaries

GF & HF funds over/short

\$ (1,935,713.45)

Update PP #s and comp time balances each pay period

Cola- GF \$ 988,252.23
Cola- Hwy \$ 100,234.88
CB \$ 38,585.07
Continuity \$ 21,028.81
Contingency Term Leave \$ 86,845.52
Total \$ 1,244,946.51

Evidence Vault
BA 4701
Cat. 01 Projections
Work Program 25SA4701
FY 2025

Object	Description	Expended	Projected	Total
5100	Salaries	263,541.69	147,280.25	410,821.94
5200	Workers Compensation	5,169.45	5,596.54	10,765.99
5300	Retirement Contribution Employer Pay Plan	67,335.57	33,646.01	100,981.58
5301	Retirement Contribution Employee/Employer Pay Plan	16,635.97	8,323.77	24,959.74
5400	Personnel Assessment	1,034.25	344.75	1,379.00
5420	Collective Bargaining Assessment	25.50	10.50	36.00
5430	Labor Relations Assessment	398.00	0.00	398.00
5500	Group Insurance	46,807.38	15,939.00	62,746.38
5610	Sick Leaves	11,482.57	0.00	11,482.57
5620	Annual Leaves	16,290.41	0.00	16,290.41
5640	Comp Time Leaves	2,994.38	0.00	2,994.38
5650	Other Leaves	1,036.76	0.00	1,036.76
5700	Payroll Assessment	725.16	64.25	789.41
5750	Retired Employees Group Insurance	9,088.65	4,705.33	13,793.98
5810	Overtime Pay	0.00	0.00	0.00
5840	Medicare	3,952.98	2,077.83	6,030.81
5930	Longevity Pay	721.09	721.09	1,442.18
		447,239.81	218,709.31	665,949.12
			L01 Authority	547,253.00
				(118,696.12)
			Not Yet Requested - Continuity of Service	1,909.30
			Salary Adjustment Funds Requesting	111,967.00
				(4,819.82)
			Not Yet Applied - Increase DPS Cost Allocation & Apply any Sub Unit Savings	4,819.82
			Net	0.00

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 5, 13 and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2361	Department of Taxation	\$2,444,508
	Total	\$2,444,508



STATE OF NEVADA
DEPARTMENT OF TAXATION

MAIN OFFICE
3850 Arrowhead Drive
Carson City, Nevada 89706

JOE LOMBARDO
Governor

GEORGE KELESIS
Chair, Nevada Tax Commission

SHELLIE HUGHES
Executive Director

MEMORANDUM

Date: April 25, 2025
To: Karen Hall, Executive Branch Budget Officer I, Governor's Finance Office
Through: Shellie Hughes, Executive Director, Department of Taxation *SH*
From: Bonnie Long, Administrative Services Officer IV, Department of Taxation *BL*
Subject: FY 2025 Salary Adjustment Funds – B/A 2361 (Revised)

The Department of Taxation (Department) is projecting a shortfall in funds to cover unfunded personnel expenses for FY 2025. Pursuant to Assembly Bill 522, Section 5 of the 82nd Legislative Session, funds have been earmarked for each agency for the 11% and 12% salary increases authorized by the bill. Of the \$7,587,896 set aside in FY 2025, the Department respectfully requests Salary Adjustment Funds for B/A 2361 in the amount of \$2,444,508 (rounded). The Department will request funds for Continuity of Services later in the fiscal year, if needed.

For your review, attached please find the following documents: 1) Actual and Projections for Category 01 – Personnel Services, 2) Continuity of Service Payment #2 by PCN, 3) Projections for the Balance of all Categories, 4) Category 01 tab from the Department's fiscal tracker, 5) Position Fund Map (current), and the L01 NEBS130 Report.

Thank you for your consideration of this request. Please contact me with any questions at 702-486-2317 or via e-mail at blong@tax.state.nv.us.

cc: Kelli Lay, Executive Branch Budget Officer II, Governor's Office of Finance
Adriane Roberts-Larson, Deputy Executive Director, Department of Taxation

Department of Taxation
B/A2361 - FY25
Category 01 - Actuals and Projections

FY25 - Current Budget

GL	Description	Authority
5100	SALARIES	24,454,163.00
5200	WORKERS COMPENSATION	572,157.00
5300	RET CONT EMPLOYER PAY PLAN	5,488,092.00
5400	PERSONNEL ASSESSMENT	80,988.00
5420	COLLECTIVE BARGAINING ASSESSMT	1,812.00
5430	LABOR RELATIONS ASSESSMENT	22,111.00
5500	GROUP INSURANCE	3,752,496.00
5700	PAYROLL ASSESSMENT	15,145.00
5750	RETIRED EMPLOYEES GROUP INSURA	777,637.00
5810	OVERTIME PAY	118,448.00
5840	MEDICARE	354,585.00
5860	BOARD AND COMMISSION PAY	179,538.00
5904	VACANCY SAVINGS	(1,733,142.00)
5910	STANDBY PAY	28,162.00
	TOTAL	34,112,192.00

FY25 - Category 01 - Actuals and Projections

GL	Description	Actual through PP22	Projections through 6/30	Total
5100	SALARIES	17,375,517.09	4,769,057.48	22,144,574.57
5200	WORKERS COMPENSATION	412,017.26	113,086.36	525,103.62
5300	RET CONT EMPLOYER PAY PLAN	2,488,769.88	683,092.57	3,171,862.45
5301	RET CONT EMPLOYEE/EMPLOYER PLN	2,198,903.98	603,533.09	2,802,437.07
5400	PERSONNEL ASSESSMENT	60,741.00	20,247.00	80,988.00
5420	COLLECTIVE BARGAINING ASSESSMT	1,270.75	-	1,270.75
5430	LABOR RELATIONS ASSESSMENT	22,111.00	-	22,111.00
5500	GROUP INSURANCE	2,486,773.61	682,544.65	3,169,318.26
5610	SICK LEAVES	1,097,375.83	329,212.75	1,426,588.58
5620	ANNUAL LEAVES	1,229,376.61	368,812.98	1,598,189.59
5630	HOLIDAY LEAVES	3,125.52	-	3,125.52
5640	COMP TIME LEAVES	137,308.68	-	137,308.68
5650	OTHER LEAVES	105,855.17	-	105,855.17
5700	PAYROLL ASSESSMENT	11,358.75	3,786.25	15,145.00
5750	RETIRED EMPLOYEES GROUP INSURA	633,190.41	173,791.75	806,982.16
5810	OVERTIME PAY	34,719.53	10,415.86	45,135.39
5830	COMP TIME PAYOFF	96,426.49	45,911.48	142,337.97
5840	MEDICARE	288,706.05	79,241.14	367,947.19
5860	BOARD AND COMMISSION PAY	140,156.84	29,992.97	170,149.81
5880	SHIFT DIFFERENTIAL PAY	84.87	-	84.87
5901	PAYROLL ADJUSTMENTS	(868.54)	868.54	-
5910	STANDBY PAY	27,749.40	8,324.82	36,074.22
5930	LONGEVITY PAY	46,217.20	61,025.00	107,242.20

GL	Description	Actual through PP22	Projections through 6/30	Total
5932	RETENTION INCENTIVE	500.00	-	500.00
5960	TERMINAL SICK LEAVE PAY	32,268.63	18,126.44	50,395.07
5970	TERMINAL ANNUAL LEAVE PAY	126,097.24	7,411.38	133,508.62
5975	FORFEITED ANNUAL LEAVE PAYOFF	2,993.31	-	2,993.31
5990	LABOR LOAD RESERVE-FRINGE	7,242.57	-	7,242.57
	TOTAL	29,065,989.13	8,008,482.49	37,074,471.62

L01 Authority

34,112,192.00

Less Excluded Expenses:

GL	Description	Actual through PP22	Projections through 6/30	Total
5810	OVERTIME PAY	34,719.53	10,415.86	45,135.39
5830	COMP TIME PAYOFF	96,426.49	45,911.48	142,337.97
5880	SHIFT DIFFERENTIAL PAY	84.87	-	84.87
5910	STANDBY PAY	27,749.40	8,324.82	36,074.22
5930	LONGEVITY PAY*	46,217.20	61,025.00	107,242.20
5960	TERMINAL SICK LEAVE PAY	32,268.63	18,126.44	50,395.07
5970	TERMINAL ANNUAL LEAVE PAY	126,097.24	7,411.00	133,508.24
5975	FORFEITED ANNUAL LEAVE PAYOFF	2,993.31	-	2,993.31
	TOTAL	366,556.67	151,214.60	517,771.27

Eligible Expenses:

28,699,432.46

7,857,267.89

36,556,700.36

L01 Authority

34,112,192.00

TOTAL FUNDS NEEDED - CATEGORY 01 (ROUNDED): **(2,444,508.00)**

* The Longevity Pay will be requested at a later date, if needed.

Department of Taxation
B/A 2361 - FY25 Actual and Projected Expenses
Category Changes for Salary Adjustment Funds Request

Cat	Expenditure Description	Actual YTD Expenditures	Projected Expenditures	Total Expenditures	Approved Budget	Needed Adjustment WP
01	PERSONNEL SERVICES	29,065,989.13	7,490,710.87	36,556,700.00	34,112,192.00	(2,444,508.00)
02	OUT-OF-STATE TRAVEL	4,858.66	5,750.34	10,609.00	10,609.00	-
03	IN-STATE TRAVEL	101,883.43	51,495.57	153,379.00	153,379.00	-
04	OPERATING	1,616,421.84	659,196.16	2,275,618.00	2,275,618.00	-
08	BUILDING SECURITY	175,825.66	66,711.86	242,537.52	260,666.00	18,128.48
09	COMPLIANCE AUDIT INVESTIGATIONS	18,413.23	252,230.16	270,643.39	353,914.00	83,270.61
10	AUDIT TRAVEL	-	35,318.00	35,318.00	35,318.00	-
11	MSA TRAVEL AND OPERATING	2,973.63	6,095.37	9,069.00	9,069.00	-
12	LANGUAGE ACCESS PLAN	-	247,339.00	247,339.00	247,339.00	-
13	UTS MODERNIZATION	14,898,950.92	7,417,437.08	22,316,388.00	22,316,388.00	-
15	LOCKBOX PROGRAM	316,204.21	49,691.79	365,896.00	365,896.00	-
17	SB466 - ONE SHOT	112,500.00	48,016.00	160,516.00	160,516.00	-
18	SB467 - ONE SHOT	313,833.41	58,162.59	371,996.00	371,996.00	-
19	SB489 - ONE SHOT	906,794.96	22,743.04	929,538.00	929,538.00	-
21	DEMOGRAPHIC SURVEYS	28,242.53	1,100.47	29,343.00	29,343.00	-
25	CIGARETTE STAMPS	77,947.30	99,012.70	176,960.00	176,960.00	-
26	INFORMATION SERVICES	1,343,721.28	487,507.72	1,831,229.00	1,831,229.00	-
30	TRAINING	410.00	1,766.00	2,176.00	2,176.00	-
82	HR COST ALLOCATION	89,728.50	29,909.50	119,638.00	119,638.00	-
87	PURCHASING ASSESSMENT	2,448.00	816.00	3,264.00	3,264.00	-
88	STATE COST RECOVERY PLAN	3,535.50	1,178.50	4,714.00	4,714.00	-
89	AG COST ALLOCOATION	1,274,889.00	-	1,274,889.00	1,274,889.00	-
90	ARPA SYSTEMS RESV-FUTURE YRS	-	-	-	3,103,344.00	-
93	RESERVE FOR REVERSION	-	-	-	503,365.00	-
TOTAL EXPENDITURES		50,355,571.19	17,032,188.72	67,387,759.91	68,651,360.00	(2,343,108.91)

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 6, 13, and 14 made appropriations from 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	HIGHWAY FUND ADJUSTMENT
4660	Transportation Administration	\$29,121,240
	Total	\$29,121,240



STATE OF NEVADA
DEPARTMENT OF TRANSPORTATION
1263 S. Stewart Street
Carson City, Nevada 89712

JOE LOMBARDO
Governor

TRACY LARKIN THOMASON, P.E.
Director

MEMORANDUM

Date: April 03, 2025

To: Tiffany Greenameyer, Director, Governor's Finance Office

From: Tracy Larkin Thomason, P.E., Director, Nevada Department of Transportation

Cc: Nima Rezaie, Executive Branch Budget Officer

Re: FY2025 Salary Adjustment Funds BA4660

The Nevada Department of Transportation respectfully requests funds to cover allowable unfunded salary increases.

Due to the 12% and 11% salary increase authorized by Assembly Bill 522, Section 6, the Department of Transportation will experience a salary shortfall. The Department has evaluated its available authority and does not have the requisite funding to cover the shortfall through a transfer within the budget account or department. Consequently, the Department respectfully requests Salary Adjustment funds for BA 5660 in the amount of \$29,121.240 for FY2025.

For your review, attached please find:

1. Salary projections,
2. Projections for the balance of the fiscal year for all categories supported by the Highway Fund, and
3. Position fund map.

Thank you for your consideration of this request. Please contact me at your convenience with any questions.

BUDGET CATEGORY 01 INFORMATION/PROJECTIONS

GL/Description	Allowable	Total thru PP18	Additional based on pay periods remaining	One more annual payment due	One more quarterly payment due	Two more quarterly payments due	Three more quarterly payments due	Four more quarterly payments due	Two more holiday (12 total)	Four additional months	Additional REOI at 2.35 %	Additional Workers Comp due	Projected Estimate for FY 25
5100 Salaries	\$ 73,001,496.19	\$ 34,981,903.19											\$ 107,983,399.38
5200 Workers Comp	\$ 3,265,373.78											\$ 1,451,277.24	\$ 4,716,651.02
5300 Retirement	\$ 11,080,162.40	\$ 4,924,518.62											\$ 16,004,679.02
5301 Retirement	\$ 9,952,313.91	\$ 4,423,250.63											\$ 14,375,564.54
5400 Assessment	\$ 287,225.75	\$ 5,950.00			\$ 95,742.25								\$ 382,969.00
5420 Collective Bargaining Assessment	\$ 101,062.00												\$ 101,062.00
5430 Labor Relations Assessment	\$ 43,334.00												\$ 43,334.00
5440 Personnel Subsidy	\$ 9,148,876.81									\$ 4,574,438.41			\$ 13,723,315.22
5610 Sick Leaves	\$ 4,846,896.05	\$ 2,154,175.58											\$ 7,001,070.63
5620 Annual Leave	\$ 5,542,504.81	\$ 2,483,335.47											\$ 8,025,840.28
5630 Holiday Leave	\$ 4,899,780.01												\$ 6,533,040.01
5650 Other Leave	\$ 1,045,359.95	\$ 484,804.42											\$ 1,529,964.37
5800 Unemployment Ins	\$ 75,945.78												\$ 75,945.78
5810 Overtime Pay	\$ 3,861,437.45	\$ 180,015.55											\$ 4,041,453.00
5820 Holiday Pay	\$ 111,323.65	\$ 9,898.35											\$ 121,222.00
5830 Comp Time Pay	\$ 296,680.27	\$ 131,946.79											\$ 428,627.06
5840 Medicare	\$ 1,366,262.79	\$ 607,227.91											\$ 1,973,490.70
5880 Shift Differential	\$ 342,244.68	\$ 152,108.75											\$ 494,353.43
5882 Shift Differential Overtime	\$ 44,446.12												\$ 44,446.12
5910 Standby Pay	\$ 80,183.87	\$ 35,637.28											\$ 115,821.15
5940 Dangerous	\$ 4,394.31	\$ 1,953.03											\$ 6,347.34
5960 Term Sick Leave	\$ 271,327.26	\$ 120,589.89											\$ 391,917.15
5970 Term Annual Pay	\$ 606,352.49	\$ 269,490.00											\$ 875,842.49
5975 Annual Leave Pay	\$ 210,505.87	\$ 93,558.16											\$ 304,064.03
5980 Call Back	\$ 80,063.06	\$ 35,593.56											\$ 115,646.64
5990 Labor Load	\$ 11,054,015.31	\$ 4,912,895.78											\$ 15,966,911.29
7170 Tool Allowance	\$ 79,250.17	\$ 35,240.08											\$ 114,530.25
Total	\$ 141,705,012.94	\$ 55,997,831.04		\$ 95,742.25	\$ -	\$ -	\$ -	\$ -	#####	\$ 4,574,438.41	\$ -	\$ 1,451,277.24	\$ 206,457,681.88

Not Allowable

5640 Comp Leave	\$ 1,085,645.92	\$ 482,509.30											\$ 1,568,155.22
5700 Payroll Assessment	\$ 53,610.00				\$ 17,870.00								\$ 71,480.00
5750 Retired Employees Group Insurance	\$ 2,867,888.37										\$ 822,074.72		\$ 3,689,963.09
5810 Holiday Pay		\$ 429,048.61											\$ 429,048.61
5820 Shift Differential Overtime		\$ 49,477.18											\$ 49,477.18
5882 Field Training Officer Pay		\$ 19,753.83											\$ 19,753.83
5891 Recruitment Bonus Pay													\$ -
5901 Pay Adjust													\$ -
5930 Longevity Pay													\$ -
7045 State Printing Charges	\$ 262,400.71	\$ -	\$ 262,400.71										\$ 524,801.42
Total	\$ 4,268,857.14	\$ 980,788.91	\$ 262,400.71	\$ 17,870.00	\$ 113,612.25	\$ -	\$ -	\$ -	#####	\$ 4,574,438.41	\$ 822,074.72	\$ 1,451,277.24	\$ 6,351,991.49
Grand Total	\$ 145,973,870.08	\$ 56,978,719.96	\$ 262,400.71	\$ 113,612.25	\$ 113,612.25	\$ -	\$ -	\$ -	#####	\$ 4,574,438.41	\$ 822,074.72	\$ 1,451,277.24	\$ 211,809,653.36

(1) Workers Comp = Monthly average of 2025 plus 3% for salary increase

Allowable		
FY 2025 Legislatively Approved Budget	\$178,336,622.00	
Projected excess (deficit) Budget	\$ (26,121,139.88)	
Classified Positions	\$ (26,309,028.48)	
Unclassified Positions	\$ (201,211.40)	
Total	\$ (26,121,139.88)	
Total Need not including COLA	\$ (35,473,131.36)	
Possible Additional WP	\$ (6,361,991.49)	

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 5, 13, and 14 made appropriations from the General 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
4061	Gaming Control Board	\$511,342
	Total	\$511,342



JOE LOMBARDO
Governor

NEVADA GAMING CONTROL BOARD

1919 College Parkway, Suite 110, P.O. Box 8003, Carson City, Nevada 89702

7 State of Nevada Way, Las Vegas, Nevada 89119

3650 S. Pointe Circle, Suite 203, P.O. Box 31109, Laughlin, Nevada 89028

557 W. Silver Street, Suite 207, Elko, Nevada 89801

9670 Gateway Drive, Reno, Nevada 89521

KIRK D. HENDRICK, Chairman
HON. GEORGE ASSAD (RET.), Member
CHANDANI K. SENDALL, Member

MEMORANDUM

DATE: April 7, 2025

TO: Nima Rezaie, Executive Branch Budget Officer 1
Governor's Finance Office

THROUGH: Kirk D. Hendrick, Chairman
Nevada Gaming Control Board 

FROM: Nathan Riggle, Chief, Administration Division
Nevada Gaming Control Board

SUBJECT: FY 2025 Salary Adjustment Funds BA 4061

The Nevada Gaming Control Board (Board) respectfully requests funds to cover allowable unfunded salary increases.

Due to the 12% and 11% salary increases authorized by Assembly Bill 522 sections 5 and 14 of the 2023 Legislative Session, the Board will experience a salary shortfall. The Board has evaluated its available authority and does not have the requisite funding to cover the shortfall through a transfer within the budget account or department. Consequently, the Board respectfully requests Salary Adjustment funds for BA 4061 in the amount of **\$511,342*** for FY 2025.

For your review, attached please find: (1) salary projections, (2) projections for the balance of the fiscal year for all categories supported by the general fund, and (3) a position fund map.

Thank you for your consideration of this request. Please contact me at your convenience with any questions at nriggle@gcb.nv.gov or (702) 486-2176.

* \$7,023,304 previously requested in
WP 25SA40611

Nevada Gaming Control Board**BA 4061****Projected Cat 01 Expenses****WP 25SA40612, C75276, C75287****FY 2025****FY 2025 L01**

Object	Object Description	Authority
5002	SALARIES	383,912
5100	SALARIES	37,723,347
5200	WORKERS COMPENSATION	551,660
5300	RET CONT	7,600,770
5400	PERSONNEL ASSESSMENT	77,638
5420	COLLECTIVE BARGAINING ASSESSMT	342
5430	LABOR RELATIONS ASSESSMENT	4,036
5500	GROUP INSURANCE	3,643,200
5700	PAYROLL ASSESSMENT	14,705
5750	RETIRED EMPLOYEES GROUP INSURA	970,203
5800	UNEMPLOYMENT COMPENSATION	-
5820	HOLIDAY PAY	65,874
5840	MEDICARE	442,417
5880	SHIFT DIFFERENTIAL PAY	125,504
5904	VACANCY SAVINGS	(1,444,684)
Total Authority		50,158,924

Expenses

Object	Object Description	Actual	Projected	Total
5100	SALARIES	21,188,151.37	15,208,594.43	36,396,745.80
5200	WORKERS COMPENSATION	399,114.10		399,114.10
5300	RET CONT EMPLOYER PAY PLAN	3,882,935.07		3,882,935.07
5301	RET CONT EMPLOYEE/EMPLOYER PLN	2,182,385.64		2,182,385.64
5400	PERSONNEL ASSESSMENT	58,228.50	19,409.50	77,638.00
5420	COLLECTIVE BARGAINING ASSESSMT	250.75		250.75
5430	LABOR RELATIONS ASSESSMENT	4,036.00		4,036.00
5500	GROUP INSURANCE	2,369,337.74		2,369,337.74
5610	SICK LEAVES	1,035,356.48		1,035,356.48
5620	ANNUAL LEAVES	1,482,204.31		1,482,204.31
5630	HOLIDAY LEAVES	4,618.72		4,618.72
5640	COMP TIME LEAVES	255,645.07		255,645.07
5650	OTHER LEAVES	132,100.59		132,100.59
5700	PAYROLL ASSESSMENT	11,028.75	3,676.25	14,705.00
5750	RETIRED EMPLOYEES GROUP INSURA	761,845.26		761,845.26
5810	OVERTIME PAY	233,349.81	61,480.00	294,829.81
5820	HOLIDAY PAY	94,357.11	67,397.94	161,755.05
5830	COMP TIME PAYOFF	8909.49		8,909.49
5840	MEDICARE	351,411.26		351,411.26
5880	SHIFT DIFFERENTIAL PAY	108,951.66	77,822.61	186,774.27

5882 SHIFT DIFFERENTIAL OVERTIME	1,856.10	1,325.79	3,181.89
5901 PAYROLL ADJUSTMENTS	-848.92		(848.92)
5930 LONGEVITY PAY	59,926.88	80,255.57	140,182.45
5932 RETENTION INCENTIVE	250.00		250.00
5960 TERMINAL SICK LEAVE PAY	92,297.17		92,297.17
5970 TERMINAL ANNUAL LEAVE PAY	120,745.92	115,943.93	236,689.85

Subtotal: Personnel Costs	34,838,444.83	15,635,906.02	50,474,350.85

Excluded Expenses

5810 OVERTIME PAY	233,349.81	61,480.00	294,829.81
5820 HOLIDAY PAY	94,357.11	67,397.94	161,755.05
5830 COMP TIME PAYOFF	8,909.49	-	8,909.49
5880 SHIFT DIFFERENTIAL PAY	108,951.66	77,822.61	186,774.27
5882 SHIFT DIFFERENTIAL OVERTIME	1,856.10	1,325.79	3,181.89
5960 TERMINAL SICK LEAVE PAY	92,297.17	-	92,297.17
5970 TERMINAL ANNUAL LEAVE PAY	120,745.92	115,943.93	236,689.85

Subtotal: Excluded Costs	660,467.26	323,970.27	984,437.53

Terminal Pay	48,000
Overtime (Forfeiture)	294,830
Salary Adjustment Funds	511,342
Total	854,172

Previously Requested - Salary Adjustment Funds (WP# 25SA40611)	7,023,304
Current Request - Salary Adjustment Funds	511,342
Total - Salary Adjustment Funds	7,534,646

Nevada Gaming Control Board
 BA 4061
 Projected Expenses
 WP 25SA40612, C75276, C75287
 FY 2025

Category	Description	Expended	Projected	Total	Work Program	Authority Over (Short)	Car 26 Overage	Overtime (Forfeiture)	Actual Terminal Pay	Salary Adj. Funds	Total
01	PERSONNEL SERVICES	34,838,445	15,635,906	50,474,351	50,158,924	(315,427)		294,830	48,000	511,342	854,172
02	OUT OF STATE TRAVEL	92	500	592	18,205	17,613	(17,613)				(17,613)
03	IN STATE TRAVEL	401,642	198,913	600,555	612,381	11,826	(11,826)				(11,826)
04	OPERATING	2,099,238	457,923	2,557,161	2,557,835	674	(674)				(674)
10	82ND SESSION ONE SHOT SB 490	203,277	1,320,638	1,523,915	1,523,915	-					-
16	INVESTIGATIONS	-	-	-	2,531	2,531	(2,531)				(2,531)
18	ELECTRONICS LAB	14,464	578	15,042	18,971	3,929					-
26	INFORMATION SERVICES	509,186	171,267	680,453	555,300	(125,153)	76,661				76,661
28	OSHA	960	858	1,818	2,789	971	(971)				(971)
30	TRAINING	88,083	47,640	135,672	178,719	43,047	(43,047)				(43,047)
50	ARPA FUNDS	47,818	-	47,818	47,818	-					-
51	ALPHA MIGRATION PROJ PHASE 2	5,382,463	5,614,887	10,997,350	10,997,350	-					-
87	PURCHASING ASSESSMENT	2,365	788	3,153	3,153	-					-
88	STATEWIDE COST ALLOCATION PLAN	809,390	269,797	1,079,187	1,079,187	-					-
Total		44,397,373	23,719,695	68,117,068	67,757,078	(359,989.87)	-	294,830	48,000	511,342	854,172

Funded via investigative fees

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 5 and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1000	Governor's Office	\$312,083
	Total	\$312,083

Joe Lombardo
Governor



Joy Grimmer
Director

Robert Ragar
Deputy Director

Daniel Marlow
Administrator

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

209 E. Musser Street, Suite 304 | Carson City, Nevada 89701
Phone: (775) 531-3200 | www.adminsycs.nv.gov | Fax: (775) 684-5846

MEMORANDUM

DATE: March 18, 2025

TO: Curtis Palmer, Deputy Director of GFO

FROM: Daniel Marlow, Administrator 
Administrative Services Division

THROUGH: Debi Reynolds, Deputy Chief of Staff 
Office of the Governor

SUBJECT: Request for May 2025 Board of Examiners
- Salary Adjustment Funds (WP 25SA1001)

The Office of the Governor is projecting a shortfall of salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 14, of the 82nd Legislative Session, the department is requesting the revenue and authority to meet any salary deficiencies that could not be absorbed by the 11% salary increase for Fiscal Year 2025. The division is requesting \$312,083 in Salary Adjustment Funds to cover the projected shortfall through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay category 01, Personnel Services expenditures through the end of the fiscal year.

Attached is a supporting spreadsheet for the payroll calculations.

Thank you for your time and consideration in this manner.

CC: Maria Gassaway, ASO III
Administrative Services Division

Category	Desc	IFC Threshold	L01	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Work Program	Revised Authority	Revised Projected Budget Balance
00	0042 Appropriation		4,464,199	4,464,199	4,464,199.00	-	-	4,464,199.00	0.00	25SA10001	4,464,199	0.00
00	4601 GF SALARY ADJUSTMENTS						312,083.00	312,083.00	312,083.00	312,083	312,083	0.00
00	4611 TRANSFER IN FED ARPA ACT				187,139.77	516,709.23	457,424.23	644,564.00	(59,285.00)		703,849	59,285.00
00	4654 TRANSFER IFC		0	0	-	-	-	-	0.00			0.00
00	4665 TRAN FRM STATUTORY CONTINGENCY		0	12,000	12,000.00	(12,000.00)	-	-	(12,000.00)			0.00
Total Rev			5,124,585	5,180,048	4,663,338.77	516,709.23	757,507.23	5,420,846.00	240,798.00	312,083	5,492,131	71,285.00
01	PERS SERVICE	\$499,952	4,155,593	4,005,641	3,438,527.22	567,113.78	879,196.75	4,317,723.97	(312,082.97)	312,083	4,317,724	0.03
02	OUT ST TRAV	\$75,000	9,227	9,227	6,667.83	2,559.17	766.44	7,434.27	1,792.73		9,227	1,792.73
03	IN ST TRAV	\$75,000	34,133	34,133	19,880.80	14,252.20	1,715.65	21,596.45	12,536.55		34,133	12,536.55
04	OPERATING	\$84,420	444,065	434,645	319,091.75	115,553.25	91,149.96	410,241.71	24,403.29		434,645	24,403.29
15	ARPA ACT	IFC	3,486	207,610	110,359.68	97,250.32	59,285.48	169,645.16	37,964.84		207,610	37,964.84
16	BOARDS TRK	\$92,541	17,541	0	-	-	-	-	0.00			0.00
17	ARPA AUDIO VISUAL	\$75,000	0	0	-	-	-	-	0.00			0.00
26	INFO SERV	\$65,580	77,886	87,306	70,149.86	17,156.14	17,154.02	87,303.88	2.12		87,306	2.12
30	TRAINING	\$75,000	0	0	-	-	-	-	0.00			0.00
82	DPT CST ALLO	\$75,000	99,195	99,195	81,415.75	11,779.25	11,779.25	93,195.00	0.00		99,195	0.00
87	PURCH ASMNT	\$75,000	383	383	383.00	-	-	383.00	0.00		383	0.00
89	AG COST ALOC	\$75,000	289,076	289,076	289,076.00	-	-	289,076.00	0.00		289,076	0.00
93	RES FOR REV	\$75,000	0	0	-	-	-	-	0.00			0.00
Total Exp			5,124,585	5,161,216	4,335,551.89	825,664.11	1,061,047.55	5,396,599.44	(235,383.44)	312,083	5,473,299	76,599.56
	Operating Income											
	Beq Net Assets		0	18,832	327,786.88	(308,954.88)	(303,540.32)	24,246.56	476,181.44		18,832	(5,414.56)
	End Net Assets		0	0	-	-	-	-	0.00			
	Days Exp in Ending Rav		0	1	-	-	(303,540.32)	24,246.56	476,181.44		18,832	(5,414.56)
								1.62				

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 7 and 15 made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
2980	University of Nevada, Reno (UNR)	\$27,446,885
2982	UNR School of Medicine	\$4,824,801
2983	UNR Intercollegiate Athletics	\$246,419
2985	UNR Statewide Programs	\$1,232,333
2989	Agricultural Experiment Station	\$1,247,325
2990	Cooperative Extension Service	\$1,042,012
2996	University Press	\$82,019
3003	Business Center North	\$445,598
3221	Health Laboratory and Research	\$248,110
2987	University of Nevada, Las Vegas (UNLV)	\$39,738,693
2988	UNLV Intercollegiate Athletics	\$394,992
2992	UNLV Law School	\$1,921,175
3001	UNLV Statewide Programs	\$363,617
3002	UNLV Dental School	\$2,058,269
3004	Business Center South	\$393,078
3014	UNLV School of Medicine	\$4,901,769
2994	Great Basin College	\$2,452,467
3005	Nevada State University	\$5,136,903
3011	College of Southern Nevada	\$18,837,970
3012	Western Nevada College	\$2,512,304
3017	Prison Education Program (WNC)	\$9,568
3018	Truckee Meadows Community College	\$6,672,697
3010	Desert Research Institute	\$1,438,761
2986	System Administration	\$765,112
2991	System Computing Services	\$2,247,196
2977	Special Projects	\$73,418
	Total	\$126,733,491

Nevada System of Higher Education

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



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

MEMORANDUM

Date: April 14, 2025

To: Michael Rankin, Executive Budget Officer II
Governor's Finance Office, Budget Division

From: Chris Viton, Vice Chancellor of Budget and Finance, NSHE

Subject: Request for Salary Adjustment Funds (FY 2025)

NSHE requests Salary Adjustment funds totaling \$126,733,491 for FY 2025 to date. Attached is a summary document identifying the amount requested for the following budgets:

• Budget Account 2977 – Special Projects	\$73,418
• Budget Account 2980 – UNR	\$27,446,885
• Budget Account 2982 – UNR, School of Medicine	\$4,824,801
• Budget Account 2983 – UNR, Intercollegiate Athletics	\$246,419
• Budget Account 2985 – UNR, Statewide Programs	\$1,232,333
• Budget Account 2986 – System Administration	\$765,112
• Budget Account 2987 – UNLV	\$39,738,693
• Budget Account 2988 – UNLV, Intercollegiate Athletics	\$394,992
• Budget Account 2989 – UNR, Agricultural Experiment Station	\$1,247,325
• Budget Account 2990 – UNR, Cooperative Extension	\$1,042,012
• Budget Account 2991 – System Computing Services	\$2,247,196
• Budget Account 2992 – UNLV, Law School	\$1,921,175
• Budget Account 2994 – Great Basin College	\$2,452,467
• Budget Account 2996 – University Press	\$82,019
• Budget Account 3001 – UNLV, Statewide Programs	\$363,617
• Budget Account 3002 – UNLV, Dental School	\$2,058,269
• Budget Account 3003 – Business Center North	\$445,598
• Budget Account 3004 – Business Center South	\$393,078
• Budget Account 3005 – Nevada State University	\$5,136,903
• Budget Account 3010 – Desert Research Institute	\$1,438,761
• Budget Account 3011 – College of Southern Nevada	\$18,837,970

• Budget Account 3012 – Western Nevada College	\$2,512,304
• Budget Account 3014 – UNLV, School of Medicine	\$4,901,769
• Budget Account 3017 – Prison Education	\$9,568
• Budget Account 3018 – Truckee Meadows Community College	\$6,672,697
• Budget Account 3221 – UNR Health Lab	\$248,110

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

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

NSHE FY25 COLA Analysis Using GF Percent									
BA	Name	Total GF Allocated		Total Justified	General Fund %	NSHE Portion	NSHE Funded by COLA Delay	NSHE Portion Net of Delay	Balance to be Funded*
2977	Special Projects	\$ 173,762		\$ 73,418	100.00%	\$ -	\$ 10,647	\$ -	\$ 73,418
2980	UNR	\$ 24,614,525		\$ 39,836,264	57.09%	\$ 17,095,144	\$ 4,705,765	\$ 12,389,379	\$ 27,446,885
2982	UNR School of Medicine	\$ 4,547,105		\$ 5,107,459	84.05%	\$ 814,886	\$ 532,228	\$ 282,658	\$ 4,824,801
2983	UNR ICA	\$ 194,928		\$ 246,419	100.00%	\$ -	\$ 28,062	\$ -	\$ 246,419
2985	UNR Statewide	\$ 1,348,825		\$ 1,232,333	100.00%	\$ -	\$ 154,561	\$ -	\$ 1,232,333
2986	System Administration	\$ 981,818		\$ 765,112	96.85%	\$ 24,101	\$ 109,175	\$ -	\$ 765,112
2987	UNLV	\$ 37,056,640		\$ 55,556,194	59.41%	\$ 22,552,559	\$ 6,735,058	\$ 15,817,501	\$ 39,738,693
2988	UNLV ICA	\$ 410,557		\$ 394,992	100.00%	\$ -	\$ 54,955	\$ -	\$ 394,992
2989	Ag Exp Station	\$ 894,304		\$ 1,247,325	100.00%	\$ -	\$ 153,240	\$ -	\$ 1,247,325
2990	Coop Extension	\$ 816,426		\$ 1,042,012	100.00%	\$ -	\$ 111,584	\$ -	\$ 1,042,012
2991	System Computing Services	\$ 2,794,156		\$ 2,247,196	100.00%	\$ -	\$ 323,880	\$ -	\$ 2,247,196
2992	UNLV Law	\$ 1,887,774		\$ 2,459,912	65.05%	\$ 859,739	\$ 321,002	\$ 538,737	\$ 1,921,175
2994	GBC	\$ 2,709,979		\$ 2,868,665	75.08%	\$ 714,871	\$ 298,673	\$ 416,198	\$ 2,452,467
2996	University Press	\$ 67,683		\$ 82,019	100.00%	\$ -	\$ 8,962	\$ -	\$ 82,019
3001	UNLV SWP	\$ 406,665		\$ 363,617	100.00%	\$ -	\$ 50,015	\$ -	\$ 363,617
3002	UNLV Dental	\$ 2,259,080		\$ 3,311,773	53.13%	\$ 1,552,324	\$ 298,820	\$ 1,253,504	\$ 2,058,269
3003	Business Center North	\$ 481,173		\$ 445,598	100.00%	\$ -	\$ 31,603	\$ -	\$ 445,598
3004	Business Center South	\$ 411,295		\$ 393,078	100.00%	\$ -	\$ 35,940	\$ -	\$ 393,078
3005	NSU	\$ 3,903,743		\$ 6,181,530	70.34%	\$ 1,833,442	\$ 788,815	\$ 1,044,627	\$ 5,136,903
3010	DRI	\$ 1,365,100		\$ 1,438,761	100.00%	\$ -	\$ 147,243	\$ -	\$ 1,438,761
3011	CSN	\$ 17,552,192		\$ 22,418,650	72.67%	\$ 6,126,351	\$ 2,545,671	\$ 3,580,680	\$ 18,837,970
3012	WNC	\$ 2,478,444		\$ 2,865,283	76.58%	\$ 671,049	\$ 318,070	\$ 352,979	\$ 2,512,304
3014	UNLV School of Medicine	\$ 7,020,912		\$ 4,901,769	90.40%	\$ 470,570	\$ 578,625	\$ -	\$ 4,901,769
3017	Prison Ed	\$ 35,369		\$ 12,257	63.56%	\$ 4,466	\$ 1,777	\$ 2,689	\$ 9,568
3018	TMCC	\$ 6,503,675		\$ 8,050,992	71.93%	\$ 2,260,269	\$ 881,974	\$ 1,378,295	\$ 6,672,697
3221	UNR Health Lab	\$ 308,780		\$ 248,110	100.00%	\$ -	\$ 18,811	\$ -	\$ 248,110
Total		\$ 121,224,910		\$ 163,790,738		\$ 54,979,771	\$ 19,245,156	\$ 37,057,247	\$ 126,733,491

UNR Total	\$ 33,273,749	\$ 49,487,539	\$ 17,910,030	\$ 5,744,816	\$ 12,672,037	\$ 36,815,502
UNLV Total	\$ 49,452,923	\$ 67,381,335	\$ 25,435,192	\$ 8,074,415	\$ 17,609,742	\$ 49,771,593

* Balance to be funded includes FY24 carryforward funds

**NSHE FY25 COLA Justification
BA 2977 Special Projects**

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	333,131	25.8%
Classified	\$	-	32.9%
Fringe	\$	85,948	Actual x Fringe Rate
Total	\$	419,079	
Professional COLA	\$	58,361	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	-	Actual - (Actual/1.11/1.12)
Fringe	\$	15,057	COLA x Fringe Rate
COLA Justified	\$	73,418	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	73,418	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	307,742	
FY25 COLA at 11% for 12 months	\$	33,852	
FY25 COLA at 11% with 3 month delay	\$	25,389	
Value of 3 month delay	\$	8,463	
3 months delay with fringe	\$	10,647	

NSHE FY25 COLA Justification
BA 2980 University of Nevada, Reno

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 140,756,854	31.6%
Classified	\$ 26,659,628	41.6%
Fringe	\$ 55,569,571	Actual x Fringe Rate
Total	\$ 222,986,052	
Professional COLA	\$ 24,659,152	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 5,215,269	Actual - (Actual/1.11/1.12)
Fringe	\$ 9,961,844	COLA x Fringe Rate
COLA Justified	\$ 39,836,264	
FY25 General Fund %	57.09%	
NSHE Portion	\$ 17,095,144	
NSHE Portion funded by 3 month COLA delay	\$ (4,705,765)	
Net NSHE Portion	\$ 12,389,379	
General Fund Portion	\$ 27,446,885	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 130,029,426	
FY25 COLA at 11% for 12 months	\$ 14,303,237	
FY25 COLA at 11% with 3 month delay	\$ 10,727,428	
Value of 3 month delay	\$ 3,575,809	
3 months delay with fringe	\$ 4,705,765	
UNR GF %:		
Projected Registration Fees	\$ 90,260,924	
Projected Non-resident Tuition	\$ 24,884,801	
Projected Miscellaneous Student Feed	\$ 90,637	
5% Student Fee Increase to fund COLA	\$ (5,483,130)	
Net Projected Student Fees	\$ 109,753,232	
State Appropriation	\$ 146,001,190	
General Fund %	57.1%	

NSHE FY25 COLA Justification
BA 2982 UNR School of Medicine

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 13,933,079	31.6%
Clinical Faculty	\$ 5,198,350	31.6%
Classified	\$ 4,343,047	41.6%
Fringe	\$ 6,209,561	Actual x Fringe Rate
Total	\$ 29,684,037	
Professional COLA	\$ 2,440,932	Actual - (Actual/(1+(.11*9/12)))/1.12)
Clinical Faculty	\$ 692,152	Actual - (Actual/(1+(.04*9/12)))/1.12)
Classified COLA	\$ 849,605	Actual - (Actual/1.11/1.12)
Fringe	\$ 1,124,770	COLA x Fringe Rate
COLA Justified	\$ 5,107,459	
FY25 General Fund %	84.05%	
NSHE Portion	\$ 814,886	
NSHE Portion funded by 3 month COLA delay	\$ (532,228)	
Net NSHE Portion	\$ 282,658	
General Fund Portion	\$ 4,824,801	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 12,871,205	
FY25 COLA at 11% for 12 months	\$ 1,415,833	
FY25 COLA at 11% with 3 month delay	\$ 1,061,874	
Value of 3 month delay	\$ 353,959	
3 months delay with fringe	\$ 465,810	
FY25 Pre-COLA Clinical Faculty (Clinical Faculty/(1+(.04x9/12))	\$ 5,046,941	
FY25 COLA at 4% for 12 months	\$ 201,878	
FY25 COLA at 4% with 3 month delay	\$ 151,409	
Value of 3 month delay	\$ 50,469	
3 months delay with fringe	\$ 66,418	

NSHE FY25 COLA Justification
BA 2983 UNR Intercollegiate Athletics

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	839,391	31.6%
Classified	\$	190,963	41.6%
Fringe	\$	344,688	Actual x Fringe Rate
Total	\$	1,375,042	
Professional COLA	\$	147,053	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	37,357	Actual - (Actual/1.11/1.12)
Fringe	\$	62,009	COLA x Fringe Rate
COLA Justified	\$	246,419	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	246,419	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	775,419	
FY25 COLA at 11% for 12 months	\$	85,296	
FY25 COLA at 11% with 3 month delay	\$	63,972	
Value of 3 month delay	\$	21,324	
3 months delay with fringe	\$	28,062	

NSHE FY25 COLA Justification
BA 2985 UNR Statewide Programs

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 4,623,173	31.6%
Classified	\$ 600,939	41.6%
Fringe	\$ 1,710,913	Actual x Fringe Rate
Total	\$ 6,935,025	
Professional COLA	\$ 809,932	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 117,558	Actual - (Actual/1.11/1.12)
Fringe	\$ 304,843	COLA x Fringe Rate
COLA Justified	\$ 1,232,333	
FY25 General Fund %	100.00%	
NSHE Portion	\$ -	
NSHE Portion funded by 3 month COLA delay	\$ -	
Net NSHE Portion	\$ -	
General Fund Portion	\$ 1,232,333	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 4,270,830	
FY25 COLA at 11% for 12 months	\$ 469,791	
FY25 COLA at 11% with 3 month delay	\$ 352,343	
Value of 3 month delay	\$ 117,448	
3 months delay with fringe	\$ 154,561	

NSHE FY25 COLA Justification
BA 2986 System Administration

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	3,416,121	25.8%
Classified	\$	47,074	32.9%
Fringe	\$	896,846	Actual x Fringe Rate
Total	\$	4,360,040	
Professional COLA	\$	598,469	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	9,209	Actual - (Actual/1.11/1.12)
Fringe	\$	157,435	COLA x Fringe Rate
COLA Justified	\$	765,112	
FY25 General Fund %		96.85%	
NSHE Portion	\$	24,101	
NSHE Portion funded by 3 month COLA delay	\$	(24,101)	
Net NSHE Portion	\$	-	
General Fund Portion	\$	765,112	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	3,155,770	
FY25 COLA at 11% for 12 months	\$	347,135	
FY25 COLA at 11% with 3 month delay	\$	260,351	
Value of 3 month delay	\$	86,784	
3 months delay with fringe	\$	109,175	

NSHE FY25 COLA Justification
BA 2987 University of Nevada, Las Vegas

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 199,485,606	32.9%
Classified	\$ 32,636,032	42.7%
Fringe	\$ 79,566,350	Actual x Fringe Rate
Total	\$ 311,687,989	
Professional COLA	\$ 34,947,824	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 6,384,397	Actual - (Actual/1.11/1.12)
Fringe	\$ 14,223,972	COLA x Fringe Rate
COLA Justified	\$ 55,556,194	
FY25 General Fund %	59.41%	
NSHE Portion	\$ 22,552,559	
NSHE Portion funded by 3 month COLA delay	\$ (6,735,058)	
Net NSHE Portion	\$ 15,817,501	
General Fund Portion	\$ 39,738,693	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 184,282,315	
FY25 COLA at 11% for 12 months	\$ 20,271,055	
FY25 COLA at 11% with 3 month delay	\$ 15,203,291	
Value of 3 month delay	\$ 5,067,764	
3 months delay with fringe	\$ 6,735,058	

NSHE FY25 COLA Justification
BA 2988 UNLV Intercollegiate Athletics

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 1,627,672	32.9%
Classified	\$ 57,409	42.7%
Fringe	\$ 560,017	Actual x Fringe Rate
Total	\$ 2,245,097	
Professional COLA	\$ 285,152	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 11,231	Actual - (Actual/1.11/1.12)
Fringe	\$ 98,610	COLA x Fringe Rate
COLA Justified	\$ 394,992	
FY25 General Fund %	100.00%	
NSHE Portion	\$ -	
NSHE Portion funded by 3 month COLA delay	\$ -	
Net NSHE Portion	\$ -	
General Fund Portion	\$ 394,992	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 1,503,623	
FY25 COLA at 11% for 12 months	\$ 165,399	
FY25 COLA at 11% with 3 month delay	\$ 124,049	
Value of 3 month delay	\$ 41,350	
3 months delay with fringe	\$ 54,955	

NSHE FY25 COLA Justification
BA 2989 Agricultural Experiment Station

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	4,583,648	31.6%
Classified	\$	687,951	41.6%
Fringe	\$	1,734,621	Actual x Fringe Rate
Total	\$	7,006,221	
Professional COLA	\$	803,008	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$	134,580	Actual - (Actual/1.11/1.12)
Fringe	\$	309,736	COLA x Fringe Rate
COLA Justified	\$	1,247,325	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	1,247,325	
COLA Delay:			
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$	4,234,317	
FY25 COLA at 11% for 12 months	\$	465,775	
FY25 COLA at 11% with 3 month delay	\$	349,331	
Value of 3 month delay	\$	116,444	
3 months delay with fringe	\$	153,240	

**NSHE FY25 COLA Justification
BA 2990 Cooperative Extension**

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	3,337,664	31.6%
Classified	\$	983,796	41.6%
Fringe	\$	1,463,961	Actual x Fringe Rate
Total	\$	5,785,421	
Professional COLA	\$	584,724	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$	192,454	Actual - (Actual/1.11/1.12)
Fringe	\$	264,834	COLA x Fringe Rate
COLA Justified	\$	1,042,012	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	1,042,012	
COLA Delay:			
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$	3,083,292	
FY25 COLA at 11% for 12 months	\$	339,162	
FY25 COLA at 11% with 3 month delay	\$	254,372	
Value of 3 month delay	\$	84,790	
3 months delay with fringe	\$	111,584	

NSHE FY25 COLA Justification
BA 2991 System Computing Services

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 10,134,403	25.8%
Classified	\$ 52,649	32.9%
Fringe	\$ 2,631,998	Actual x Fringe Rate
Total	\$ 12,819,051	
Professional COLA	\$ 1,775,443	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 10,299	Actual - (Actual/1.11/1.12)
Fringe	\$ 461,453	COLA x Fringe Rate
COLA Justified	\$ 2,247,196	
FY25 General Fund %	100.00%	
NSHE Portion	\$ -	
NSHE Portion funded by 3 month COLA delay	\$ -	
Net NSHE Portion	\$ -	
General Fund Portion	\$ 2,247,196	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 9,362,036	
FY25 COLA at 11% for 12 months	\$ 1,029,824	
FY25 COLA at 11% with 3 month delay	\$ 772,367	
Value of 3 month delay	\$ 257,457	
3 months delay with fringe	\$ 323,880	

NSHE FY25 COLA Justification
BA 2992 UNLV Law

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 9,507,758	32.9%
Classified	\$ 882,117	42.7%
Fringe	\$ 3,504,716	Actual x Fringe Rate
Total	\$ 13,894,591	
Professional COLA	\$ 1,665,661	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 172,564	Actual - (Actual/1.11/1.12)
Fringe	\$ 621,687	COLA x Fringe Rate
COLA Justified	\$ 2,459,912	
FY25 General Fund %	65.05%	
NSHE Portion	\$ 859,739	
NSHE Portion funded by 3 month COLA delay	\$ (321,002)	
Net NSHE Portion	\$ 538,737	
General Fund Portion	\$ 1,921,175	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 8,783,149	
FY25 COLA at 11% for 12 months	\$ 966,146	
FY25 COLA at 11% with 3 month delay	\$ 724,609	
Value of 3 month delay	\$ 241,537	
3 months delay with fringe	\$ 321,002	

NSHE FY25 COLA Justification
BA 2994 Great Basin College

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 9,397,936	25.1%
Classified	\$ 3,031,845	36.4%
Fringe	\$ 3,462,473	Actual x Fringe Rate
Total	\$ 15,892,253	
Professional COLA	\$ 1,646,422	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 593,103	Actual - (Actual/1.11/1.12)
Fringe	\$ 629,141	COLA x Fringe Rate
COLA Justified	\$ 2,868,665	
FY25 General Fund %	75.08%	
NSHE Portion	\$ 714,871	
NSHE Portion funded by 3 month COLA delay	\$ (298,673)	
Net NSHE Portion	\$ 416,198	
General Fund Portion	\$ 2,452,467	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 8,681,696	
FY25 COLA at 11% for 12 months	\$ 954,987	
FY25 COLA at 11% with 3 month delay	\$ 716,240	
Value of 3 month delay	\$ 238,747	
3 months delay with fringe	\$ 298,673	

NSHE FY25 COLA Justification
BA 2996 UNR PRESS

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	268,036	31.6%
Classified	\$	73,007	41.6%
Fringe	\$	115,070	Actual x Fringe Rate
Total	\$	456,113	
Professional COLA	\$	46,957	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	14,282	Actual - (Actual/1.11/1.12)
Fringe	\$	20,780	COLA x Fringe Rate
COLA Justified	\$	82,019	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	82,019	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	247,609	
FY25 COLA at 11% for 12 months	\$	27,237	
FY25 COLA at 11% with 3 month delay	\$	20,427	
Value of 3 month delay	\$	6,810	
3 months delay with fringe	\$	8,962	

NSHE FY25 COLA Justification
BA 3001 UNLV Statewide Programs

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	1,481,391	32.9%
Classified	\$	67,019	42.7%
Fringe	\$	515,995	Actual x Fringe Rate
Total	\$	2,064,405	
Professional COLA	\$	259,524	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$	13,111	Actual - (Actual/1.11/1.12)
Fringe	\$	90,982	COLA x Fringe Rate
COLA Justified	\$	363,617	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	363,617	
COLA Delay:			
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$	1,368,491	
FY25 COLA at 11% for 12 months	\$	150,534	
FY25 COLA at 11% with 3 month delay	\$	112,900	
Value of 3 month delay	\$	37,634	
3 months delay with fringe	\$	50,015	

NSHE FY25 COLA Justification
BA 3002 UNLV Dental

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 8,850,751	32.9%
Classified	\$ 4,481,649	42.7%
Fringe	\$ 4,825,561	Actual x Fringe Rate
Total	\$ 18,157,961	
Professional COLA	\$ 1,550,561	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 876,719	Actual - (Actual/1.11/1.12)
Fringe	\$ 884,493	COLA x Fringe Rate
COLA Justified	\$ 3,311,773	
FY25 General Fund %	53.13%	
NSHE Portion	\$ 1,552,324	
NSHE Portion funded by 3 month COLA delay	\$ (298,820)	
Net NSHE Portion	\$ 1,253,504	
General Fund Portion	\$ 2,058,269	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 8,176,213	
FY25 COLA at 11% for 12 months	\$ 899,383	
FY25 COLA at 11% with 3 month delay	\$ 674,538	
Value of 3 month delay	\$ 224,845	
3 months delay with fringe	\$ 298,820	

NSHE FY25 COLA Justification
BA 3003 Business Center North

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	945,309	31.6%
Classified	\$	821,853	41.6%
Fringe	\$	640,608	Actual x Fringe Rate
Total	\$	2,407,769	
Professional COLA	\$	165,609	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	160,775	Actual - (Actual/1.11/1.12)
Fringe	\$	119,215	COLA x Fringe Rate
COLA Justified	\$	445,598	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	445,598	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	873,264	
FY25 COLA at 11% for 12 months	\$	96,059	
FY25 COLA at 11% with 3 month delay	\$	72,045	
Value of 3 month delay	\$	24,014	
3 months delay with fringe	\$	31,603	

NSHE FY25 COLA Justification
BA 3004 Business Center South

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	1,064,505	32.9%
Classified	\$	520,257	42.7%
Fringe	\$	572,372	Actual x Fringe Rate
Total	\$	2,157,134	
Professional COLA	\$	186,490	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	101,775	Actual - (Actual/1.11/1.12)
Fringe	\$	104,813	COLA x Fringe Rate
COLA Justified	\$	393,078	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	393,078	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	983,377	
FY25 COLA at 11% for 12 months	\$	108,171	
FY25 COLA at 11% with 3 month delay	\$	81,128	
Value of 3 month delay	\$	27,043	
3 months delay with fringe	\$	35,940	

NSHE FY25 COLA Justification
BA 3005 Nevada State University

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 24,449,303	27.0%
Classified	\$ 2,829,751	34.0%
Fringe	\$ 7,563,427	Actual x Fringe Rate
Total	\$ 34,842,481	
Professional COLA	\$ 4,283,267	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 553,568	Actual - (Actual/1.11/1.12)
Fringe	\$ 1,344,695	COLA x Fringe Rate
COLA Justified	\$ 6,181,530	
FY25 General Fund %	70.34%	
NSHE Portion	\$ 1,833,442	
NSHE Portion funded by 3 month COLA delay	\$ (788,815)	
Net NSHE Portion	\$ 1,044,627	
General Fund Portion	\$ 5,136,903	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 22,585,961	
FY25 COLA at 11% for 12 months	\$ 2,484,456	
FY25 COLA at 11% with 3 month delay	\$ 1,863,342	
Value of 3 month delay	\$ 621,114	
3 months delay with fringe	\$ 788,815	

NSHE FY25 COLA Justification
BA 3010 Desert Research Institute

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	3,833,316	51.2%
Technologist	\$	1,558,098	55.1%
Fringe	\$	2,821,170	Actual x Fringe Rate
Total	\$	8,212,584	
Professional COLA	\$	671,558	Actual - (Actual/(1+(.11*9/12)))/1.12
Technologist COLA	\$	272,963	Actual - (Actual/(1+(.11*9/12)))/1.12
Fringe	\$	494,240	COLA x Fringe Rate
COLA Justified	\$	1,438,761	
FY25 General Fund %		100.00%	
NSHE Portion	\$	-	
NSHE Portion funded by 3 month COLA delay	\$	-	
Net NSHE Portion	\$	-	
General Fund Portion	\$	1,438,761	
COLA Delay:			
FY25 without COLA (Prof+Tech / (1+(.11 x 9/12))	\$	3,541,170	
FY25 COLA at 11% for 12 months	\$	389,529	
FY25 COLA at 11% with 3 month delay	\$	292,146	
Value of 3 month delay	\$	97,383	
3 months delay with fringe	\$	147,243	

NSHE FY25 COLA Justification
BA 3011 College of Southern Nevada

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 75,856,825	32.1%
Classified	\$ 17,694,756	40.5%
Fringe	\$ 31,516,417	Actual x Fringe Rate
Total	\$ 125,067,998	
Professional COLA	\$ 13,289,335	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 3,461,522	Actual - (Actual/1.11/1.12)
Fringe	\$ 5,667,793	COLA x Fringe Rate
COLA Justified	\$ 22,418,650	
FY25 General Fund %	72.67%	
NSHE Portion	\$ 6,126,351	
NSHE Portion funded by 3 month COLA delay	\$ (2,545,671)	
Net NSHE Portion	\$ 3,580,680	
General Fund Portion	\$ 18,837,970	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 70,075,589	
FY25 COLA at 11% for 12 months	\$ 7,708,315	
FY25 COLA at 11% with 3 month delay	\$ 5,781,236	
Value of 3 month delay	\$ 1,927,079	
3 months delay with fringe	\$ 2,545,671	

NSHE FY25 COLA Justification
BA 3012 Western Nevada College

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 9,638,483	29.9%
Classified	\$ 2,494,076	37.7%
Fringe	\$ 3,822,173	Actual x Fringe Rate
Total	\$ 15,954,732	
Professional COLA	\$ 1,688,563	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 487,901	Actual - (Actual/1.11/1.12)
Fringe	\$ 688,819	COLA x Fringe Rate
COLA Justified	\$ 2,865,283	
FY25 General Fund %	76.58%	
NSHE Portion	\$ 671,049	
NSHE Portion funded by 3 month COLA delay	\$ (318,070)	
Net NSHE Portion	\$ 352,979	
General Fund Portion	\$ 2,512,304	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 8,903,910	
FY25 COLA at 11% for 12 months	\$ 979,430	
FY25 COLA at 11% with 3 month delay	\$ 734,573	
Value of 3 month delay	\$ 244,857	
3 months delay with fringe	\$ 318,070	

**NSHE FY25 COLA Justification
BA 3014 UNLV Medical School**

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 13,497,097	32.9%
Clinical Faculty	\$ 10,033,418	26.2%
Classified	\$ 3,287,251	42.7%
Fringe	\$ 5,844,201	Actual x Fringe Rate
Total	\$ 32,661,967	
Professional COLA	\$ 2,364,552	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Clinical Faculty	\$ 666,897	Actual - (Actual/(1+ (.04*9/12)))/1.04)
Classified COLA	\$ 643,066	Actual - (Actual/1.11/1.12)
Fringe	\$ 1,227,254	COLA x Fringe Rate
COLA Justified	\$ 4,901,769	
FY25 General Fund %	90.40%	
NSHE Portion	\$ 470,570	
NSHE Portion funded by 3 month COLA delay	\$ (470,570)	
Net NSHE Portion	\$ -	
General Fund Portion	\$ 4,901,769	
COLA Delay:		
FY25 Pre-COLA (Professional / (1+ (.11 x 9/12))	\$ 12,468,450	
FY25 COLA at 11% for 12 months	\$ 1,371,530	
FY25 COLA at 11% with 3 month delay	\$ 1,028,647	
Value of 3 month delay	\$ 342,883	
3 months delay with fringe	\$ 455,692	
FY25 Pre-COLA Clinical Faculty (Clinical Faculty/(1+ (.04x9/12))	\$ 9,741,182	
FY25 COLA at 4% for 12 months	\$ 389,647	
FY25 COLA at 4% with 3 month delay	\$ 292,236	
Value of 3 month delay	\$ 97,411	
3 months delay with fringe	\$ 122,933	

**NSHE FY25 COLA Justification
BA 3017 WNC Prison Education**

FY25

	Total		Fringe Rate
Actual:			
Professional	\$	53,861	29.9%
Classified	\$	-	37.7%
Fringe	\$	16,105	Actual x Fringe Rate
Total	\$	69,966	
Professional COLA	\$	9,436	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$	-	Actual - (Actual/1.11/1.12)
Fringe	\$	2,821	COLA x Fringe Rate
COLA Justified	\$	12,257	
FY25 General Fund %		63.56%	
NSHE Portion	\$	4,466	
NSHE Portion funded by 3 month COLA delay	\$	(1,777)	
Net NSHE Portion	\$	2,689	
General Fund Portion	\$	9,568	
COLA Delay:			
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$	49,756	
FY25 COLA at 11% for 12 months	\$	5,473	
FY25 COLA at 11% with 3 month delay	\$	4,105	
Value of 3 month delay	\$	1,368	
3 months delay with fringe	\$	1,777	

NSHE FY25 COLA Justification
BA 3018 Truckee Meadows Community College

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 26,583,281	30.6%
Classified	\$ 7,183,569	40.1%
Fringe	\$ 11,015,095	Actual x Fringe Rate
Total	\$ 44,781,945	
Professional COLA	\$ 4,657,117	Actual - (Actual/(1+(.11*9/12)))/1.12)
Classified COLA	\$ 1,405,280	Actual - (Actual/1.11/1.12)
Fringe	\$ 1,988,595	COLA x Fringe Rate
COLA Justified	\$ 8,050,992	
FY25 General Fund %	71.93%	
NSHE Portion	\$ 2,260,269	
NSHE Portion funded by 3 month COLA delay	\$ (881,974)	
Net NSHE Portion	\$ 1,378,295	
General Fund Portion	\$ 6,672,697	
COLA Delay:		
FY25 without COLA (Professional / (1+(.11 x 9/12))	\$ 24,557,303	
FY25 COLA at 11% for 12 months	\$ 2,701,303	
FY25 COLA at 11% with 3 month delay	\$ 2,025,978	
Value of 3 month delay	\$ 675,325	
3 months delay with fringe	\$ 881,974	

NSHE FY25 COLA Justification
BA 3221 UNR Health Lab

FY25

	Total	Fringe Rate
Actual:		
Professional	\$ 562,651	31.6%
Classified	\$ 427,402	41.6%
Fringe	\$ 355,597	Actual x Fringe Rate
Total	\$ 1,345,649	
Professional COLA	\$ 98,571	Actual - (Actual/(1+ (.11*9/12)))/1.12)
Classified COLA	\$ 83,610	Actual - (Actual/1.11/1.12)
Fringe	\$ 65,930	COLA x Fringe Rate
COLA Justified	\$ 248,110	
FY25 General Fund %	100.00%	
NSHE Portion	\$ -	
NSHE Portion funded by 3 month COLA delay	\$ -	
Net NSHE Portion	\$ -	
General Fund Portion	\$ 248,110	
COLA Delay:		
FY25 without COLA (Professional / (1+ (.11 x 9/12))	\$ 519,770	
FY25 COLA at 11% for 12 months	\$ 57,175	
FY25 COLA at 11% with 3 month delay	\$ 42,881	
Value of 3 month delay	\$ 14,294	
3 months delay with fringe	\$ 18,811	

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, sections 4, 5, 13 and 14, made appropriations from the General 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 General Fund to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department requests for allocation from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
1050	Secretary of State	\$2,453,323
1051	HAVA Elections Account	\$43,236
	Total	\$2,496,559



101 N Carson Street, Suite 3
Carson City, NV
775.684.5708

MEMORANDUM

To: Michael Rankin, Executive Branch Budget Officer
From: Ashley Griffiths, Administrative Services Officer III
CC: Debbie Bowman, Deputy Secretary of State for Operations
Date: March 24, 2025
Subject: 2025 Salary Adjustment Fund Request

The Office of the Secretary of State is projecting a shortfall of salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 5, of the 82nd Legislative Session, the agency is requesting the revenue and authority to meet any salary deficiencies that could not absorb the salary increase for fiscal year 2025. The agency is requesting \$2,453,323 in Salary Adjustment funds to cover the projected shortfall through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay category 01, Personnel Services expenditures through the end of the fiscal year.

Please contact Ashley Griffiths at 684-5738 if you require additional information or have any questions.

Thank you for your time and consideration in this matter.

SECRETARY OF STATE - BA 1050
Fiscal Year 2025 Budget Summary by Category
March 4, 2025

March 4, 2025						
RGL	DESCRIPTION	REVENUE AUTHORITY	GF Authority	Other Fund Authority	PROJECTED GF ACTUALS	Projected Other ACTUALS
00-2501	Appropriation Control	25,678,925.00	25,678,925.00	-	25,678,925.00	-
00-2511	Balance Forward	13,294,246.00	13,114,737.00	179,509.00	13,294,246.00	-
00-3601	Domestic Partnership Fees	84,007.00	-	84,007.00	93,745.45	(9,738.45)
00-3602	Doc Prep App Fee	85,228.00	-	85,228.00	97,077.50	(11,849.50)
00-3603	Doc Prep Renew Fee	47,200.00	-	47,200.00	59,225.00	(12,025.00)
00-4266	Private Grant	-	-	-	-	-
00-4326	Treasurer's Interest Distribution	5,655.00	-	5,655.00	11,138.33	(5,483.33)
00-4601	General Fund Salary Adjustment	42,826.00	-	42,826.00	42,826.00	-
00-4677	Transfer from Operating Account	62,542.00	-	62,542.00	73,307.84	(10,765.84)
Total Revenue		\$ 39,300,629.00	\$ 38,793,662.00	\$ 506,967.00	\$ 39,350,491.12	\$ (49,862.12)
CAT	DESCRIPTION	BUDGET AUTHORITY	PROJECTED ACTUALS		BALANCE	
98% GF	PERSONNEL	13,016,096.00	12,751,087.00	265,009.00	(2,453,322.61)	
GF	02 OUT OF STATE TRAVEL	11,043.00	11,043.00	-	11,043.00	
GF	03 IN STATE TRAVEL	39,628.00	39,628.00	-	54,132.58	
99% GF	04 OPERATING	1,236,172.00	1,232,787.00	3,385.00	(14,504.58)	
GF	11 ELECTIONS	82,266.00	57,266.00	25,000.00	1,621,636.00	
GF	13 CREDIT CARD DISCOUNT FEES	3,076,964.00	2,575.00	-	82,266.00	
*	17 DOCPREP	13,217.00	-	-	2,575.00	
GF	23 BUSINESS PORTAL	192,037.00	192,037.00	13,217.00	24,957.20	
GRANT	24 COMMUNITY PROJECT FUND GRANT	4,000,000.00	-	-	192,037.00	
GF	25 AB321 MAIL BALLOT ELECTION	6,881,453.00	-	4,000,000.00	-	
GF	26 INFORMATION SERVICES	1,278,666.00	6,881,453.00	4,214,157.56	4,000,000.00	
GRANT	28 INVESTOR PROTECTION TRUST	74,760.00	1,277,876.00	790.00	2,667,295.44	
GF	29 UNIFORM ALLOWANCE	1,777.00	-	74,760.00	(546,430.48)	
GF	30 TRAINING	15,581.00	1,777.00	-	-	
*	39 ONE-SHOT REPLACEMENT EQUIPMENT IT SB483	295,496.00	15,581.00	-	-	
*	40 ONE-SHOT EQUIPMENT SB483	38,624.00	295,496.00	-	-	
*	41 ONE-SHOT ELECTIONS SB484	1,048,623.00	38,624.00	-	-	
*	42 ONE-SHOT PROJECT ORION SB485	10,995,803.00	1,048,623.00	-	-	
*	43 ONE-SHOT TECHNOLOGY ENHANCEMENTS SB485	736,191.00	10,995,803.00	-	-	
GF	83 NDOT 800 MHZ RADIOS COST ALLOCATION	4,800.00	736,191.00	-	3,500,000.00	
*	86 RESERVE	179,509.00	4,800.00	-	-	
GF	87 PURCH ASSESSMENT	1,663.00	-	179,509.00	-	
GF	88 SWCAP - STATE COST ALLOCATION	904.00	-	167,768.80	-	
GF	89 AGCAP - ATTY GENERAL COST ALLOCATION	178,116.00	1,663.00	1,663.00	11,740.20	
93	RESERVE FOR REVERSION	-	136,626.00	904.00	-	
Balance Forward categories		\$ 43,400,389.00	\$ 35,719,273.00	\$ 4,606,727.00	\$ 33,558,426.23	\$ 9,841,962.77

AB522 SALARY INCREASES
BA 1050 - SECRETARY OF STATE
FY 2025

255A1050001

2/18/2025 For Work through 2/28/2025 Ok Date										2/18/2025 For Work through 2/28/2025 Ok Date													
FUNDING NOTES										LESS DLS \$410													
ACTUAL PAYROLL + ASSESSMENTS										LESS NP004 MOD NON-GR SOURCES													
PROJECTED PAYROLL										PROJECTED PAYROLL													
3960, 3970, 3975, 5932										3960, 3970, 3975, 5932													
TOTAL										TOTAL													
NWB522 BUDGET AMT										NWB522 BUDGET AMT													
AB522 NUC21 - Chg Paygrade Increase										AB522 NUC21 - Chg Paygrade Increase													
AB522 - PROJECTED SHORTAGE										AB522 - PROJECTED SHORTAGE													
35K 3602 DCOPREP										40	1050	1	1	102,839.46	\$	58,098.29	\$	160,937.75	\$	150,704.33	\$	(10,233.42)	\$
										40	1050	2	1	135,146.57	\$	80,320.94	\$	215,467.51	\$	170,524.33	\$	(44,943.18)	\$
										40	1050	3	1	111,502.12	\$	65,509.24	\$	177,000.00	\$	143,964.33	\$	(33,040.04)	\$
										40	1050	5	1	64,102.33	\$	41,410.84	\$	(700.00)	\$	104,812.97	\$	(24,783.65)	\$
										40	1050	6	34	78,769.63	\$	47,456.59	\$	(3,346.55)	\$	122,879.67	\$	(46,780.34)	\$
										40	1050	8	36	80,905.94	\$	50,243.83	\$	(289.79)	\$	130,849.98	\$	(34,218.66)	\$
										40	1050	9	1	108,098.41	\$	67,762.92	\$	(5,441.16)	\$	170,420.17	\$	(26,455.85)	\$
										40	1050	11	34	71,965.71	\$	44,415.81	\$	(350.00)	\$	77,625.52	\$	(10,754.60)	\$
										40	1050	13	25	41,197.90	\$	38,056.10	\$	(1,047.97)	\$	85,111.92	\$	(21,355.26)	\$
										40	1050	14	29	64,392.46	\$	24,154.84	\$	-	\$	101,400.59	\$	80,045.33	\$
AB522 Grade Increases										40	1050	15	1	22,035.78	\$	19,572.76	\$	46,190.62	\$	55,308.33	\$		
										40	1050	16	25	16,223.26	\$	19,572.76	\$	-	\$	35,795.02	\$	86,635.65	\$
										40	1050	18	25	54,573.91	\$	32,061.74	\$	(8,743.50)	\$	157,115.18	\$	127,704.33	\$
										40	1050	19	41	102,233.61	\$	63,625.07	\$	(2,707.72)	\$	102,702.66	\$	77,779.33	\$
										40	1050	20	35	80,960.36	\$	47,871.11	\$	-	\$	80,752.62	\$	85,847.33	\$
										40	1050	23	29	64,638.78	\$	40,771.60	\$	(299.79)	\$	117,443.21	\$	94,042.33	\$
										40	1050	25	32	51,032.00	\$	29,720.62	\$	-	\$	68,206.11	\$	74,132.33	\$
										40	1050	26	33	73,129.02	\$	44,613.98	\$	-	\$	43,334.15	\$	44,217.17	\$
										40	1050	27	2	42,954.50	\$	25,251.61	\$	-	\$	17,083.69	\$	46,140.70	\$
										40	1050	28	35	20,901.35	\$	22,432.80	\$	(49.94)	\$	174,476.24	\$	142,601.33	\$
AB522 Grade Increases										40	1050	28	35	20,901.35	\$	22,432.80	\$	(49.94)	\$	174,476.24	\$	142,601.33	\$
										40	1050	29	43	109,024.75	\$	65,626.49	\$	(175.00)	\$	176,621.26	\$	139,661.33	\$
										40	1050	30	41	110,089.91	\$	69,086.15	\$	(2,566.80)	\$	156,965.07	\$	135,544.33	\$
										40	1050	31	41	102,047.70	\$	58,238.91	\$	(3,321.54)	\$	189,460.04	\$	149,990.33	\$
										40	1050	32	55	118,843.82	\$	70,616.22	\$	(100.00)	\$	152,958.59	\$	120,699.33	\$
										40	1050	33	39	95,722.48	\$	57,336.11	\$	(171.31)	\$	163,244.21	\$	135,544.33	\$
										40	1050	35	41	102,567.65	\$	60,947.87	\$	(165.99)	\$	74,169.23	\$	72,065.33	\$
										40	1050	36	29	46,557.97	\$	27,611.26	\$	(371.77)	\$	65,106.62	\$	54,048.33	\$
										40	1050	37	2	29,346.76	\$	17,568.02	\$	-	\$	50,389.00	\$	61,319.33	\$
										40	1050	40	25	41,191.26	\$	23,915.36	\$	-	\$	65,106.62	\$	54,048.33	\$
AB522 Grade Increases										40	1050	42	29	25,820.41	\$	24,940.36	\$	-	\$	65,106.62	\$	54,048.33	\$
										40	1050	43	29	18,072.49	\$	22,481.16	\$	(100.00)	\$	40,553.65	\$	63,928.33	\$
										40	1050	44	40	36,302.27	\$	27,491.93	\$	(100.00)	\$	80,257.78	\$	84,213.33	\$
										40	1050	46	25	47,571.83	\$	26,702.95	\$	(10,304.00)	\$	198,680.74	\$	157,245.33	\$
										40	1050	48	40	50,890.84	\$	29,692.74	\$	(325.80)	\$	63,694.20	\$	53,428.33	\$
										40	1050	50	50	124,623.04	\$	74,057.70	\$	(1,370.65)	\$	59,034.15	\$	53,194.33	\$
										40	1050	51	37	34,855.39	\$	25,549.41	\$	(400.00)	\$	72,255.69	\$	57,319.33	\$
										40	1050	52	25	74,399.52	\$	50,124.79	\$	-	\$	88,946.44	\$	68,647.33	\$
										40	1050	53	25	45,613.72	\$	26,641.97	\$	-	\$	103,742.05	\$	80,075.33	\$
										40	1050	55	36	55,019.66	\$	34,326.78	\$	-	\$	89,830.11	\$	72,477.33	\$
AB522 Grade Increases										40	1050	57	29	66,843.10	\$	40,644.95	\$	-	\$	89,830.11	\$	72,477.33	\$
										40	1050	58	27	56,027.58	\$	39,902.53	\$	(100.00)	\$	63,113.39	\$	57,319.33	\$
										40	1050	61	42	37,406.16	\$	26,625.25	\$	(918.02)	\$	169,220.29	\$	133,368.33	\$
										40	1050	62	37	105,710.52	\$	63,702.49	\$	(192.72)	\$	134,908.48	\$	110,686.33	\$
										40	1050	63	35	86,346.91	\$	48,561.57	\$	-	\$	116,238.15	\$	93,569.33	\$
										40	1050	63	35	73,305.96	\$	45,017.84	\$	(85.65)	\$	69,483.99	\$	95,096.33	\$
										40	1050	64	40	38,729.87	\$	31,644.12	\$	-	\$	151,528.01	\$	139,661.33	\$
										40	1050	66	41	95,835.12	\$	56,668.24	\$	(975.35)	\$	168,647.72	\$	135,544.33	\$
										40	1050	68	41	104,297.35	\$	65,904.65	\$	(1,554.28)	\$	122,089.73	\$	99,095.33	\$
										40	1050	70	35	82,223.64	\$	46,323.98	\$	(6,457.89)	\$	101,951.52	\$	92,335.33	\$
AB522 Grade Increases										40	1050	71	35	65,125.77	\$	38,296.00	\$	-	\$	105,484.53	\$	91,525.33	\$
										40	1050	75	34	65,990.69	\$	39,593.84	\$	(1,470.25)	\$	69,685.07	\$	72,065.33	\$
										40	1050	76	27	45,207.17	\$	25,652.60	\$	(100.00)	\$	65,342.01	\$	85,147.33	\$
										40	1050	77	77	60,490.17	\$	36,771.22	\$	(1,174.70)	\$	73,602.19	\$	57,188.33	\$
										40	1050	78	27	46,093.97	\$	27,598.22	\$	(2,417.45)	\$	120,067.36	\$	91,352.33	\$
										40	1050	80	33	75,457.85	\$	45,551.52	\$	(942.01)	\$	165,503.86	\$	(28,715.03)	\$
										40	1050	80	33	75,457.85	\$	45,551.52	\$	(942.01)	\$	165,503.86	\$	(28,715.03)	\$
										40	1050	80	33	75,457.85	\$	45,551.52	\$	(942.01)	\$	165,503.86	\$	(28,715.03)	\$
										40	1050	80	33	75,457.85	\$	45,551.52	\$	(942.01)	\$	165,503.86	\$	(28,715.03)	\$
										40	1050	80	33	75,457.85	\$	45,551.52	\$	(942.01)	\$	165,503.86	\$	(28,715.03)	\$

FUNDING NOTES										ACTUAL PAYROLL + ASSESSMENTS				PROJECTED PAYROLL				LESS G/L 5810, 5890, 5970, 5975, NON-IF SOURCES				TOTAL				MERS130 BUDGET AMT				AB522 SEC21 - One Paygrade Increase				AB522 - PROJECTED SHORTAGE			
ACCY	QTY	Posn NBR	Grade	Step	Pay/Pol	Cont Sec Dt	FTE																														
40	1050	81	28	6	PP02	10/8/2018	1	\$	50,777.73	\$	29,914.31	\$	(202.23)	\$	80,489.81	\$	90,202.33																				
40	1050	82	29	10	PP01	5/23/2016	1	\$	63,378.73	\$	38,030.32	\$		\$	101,309.05	\$	80,029.33																				
40	1050	83			PP01		0	\$	21,298.95	\$	22,602.86	\$	(245.04)	\$	43,656.77	\$	56,302.33																				
40	1050	84	25	2	PP01	4/17/2023	1	\$	41,177.52	\$	23,906.68	\$		\$	65,084.20	\$	53,428.33																				
40	1050	85	25	1	PP01	2/18/2025	1	\$	22,069.49	\$	24,229.97	\$	-	\$	46,299.46	\$	53,428.33																				
40	1050	86			PP01		0	\$	34,501.48	\$	21,648.12	\$	-	\$	55,149.60	\$	58,135.33																				
40	1050	87	25	1	PP01	2/18/2025	1	\$	44,905.02	\$	31,263.60	\$	(100.00)	\$	76,068.62	\$	53,428.33																				
40	1050	88	25	1	PP01	6/24/2024	1	\$	39,305.65	\$	23,096.13	\$	-	\$	62,401.78	\$	68,647.33																				
40	1050	89	39	9	PP01	7/7/2014	1	\$	91,367.84	\$	55,249.85	\$	-	\$	141,482.91	\$	54,048.33																				
40	1050	90	25	3	PP01	12/27/2021	1	\$	42,601.82	\$	25,284.07	\$	-	\$	67,885.89	\$	54,048.33																				
40	1050	93	25	3	PP01	3/7/2022	1	\$	42,601.82	\$	25,284.07	\$	-	\$	67,885.89	\$	54,048.33																				
40	1050	94	29	2	PP01	2/20/2024	1	\$	42,204.79	\$	24,781.48	\$	-	\$	67,885.89	\$	54,048.33																				
40	1050	95	29	1	PP01	8/26/2024	1	\$	50,908.09	\$	26,642.65	\$	-	\$	77,550.74	\$	77,779.33																				
40	1050	96	33	5	PP01	1/4/2022	1	\$	34,470.48	\$	25,522.15	\$	-	\$	59,992.63	\$	77,779.33																				
40	1050	97	27	2	PP01	1/9/2023	1	\$	42,278.98	\$	26,993.95	\$	-	\$	69,272.07	\$	87,682.33																				
40	1050	98	25	3	PP01	11/28/2022	1	\$	39,693.95	\$	25,646.00	\$	-	\$	65,339.95	\$	77,779.33																				
40	1050	99	33	1	PP01	4/3/2023	1	\$	41,677.44	\$	24,781.77	\$	-	\$	66,459.21	\$	77,779.33																				
40	1050	100			XP010	4/11/2022	1	\$	47,504.86	\$	30,513.22	\$	-	\$	77,994.08	\$	87,682.33																				
40	1050	103	38	9	PP02	12/11/2023	1	\$	84,341.75	\$	50,031.88	\$	-	\$	134,373.63	\$	60,716.33																				
40	1050	110	27	2	PP01	9/5/2023	1	\$	82,699.40	\$	50,404.21	\$	-	\$	133,103.61	\$	60,716.33																				
40	1050	111	25	2	PP01	11/14/2022	1	\$	43,628.43	\$	25,668.60	\$	-	\$	69,297.03	\$	57,819.33																				
40	1050	112	32	3	PP01	1/23/2023	1	\$	40,521.40	\$	24,145.99	\$	-	\$	64,662.39	\$	54,357.33																				
40	1050	114			PP01		0	\$	52,750.24	\$	31,345.60	\$	-	\$	84,095.84	\$	68,684.33																				
40	1050	115	25	1	PP01	2/18/2025	1	\$	42,290.27	\$	26,402.94	\$	-	\$	68,693.21	\$	54,357.33																				
40	1050	116			PP01		0	\$	31,160.49	\$	18,934.20	\$	-	\$	50,094.69	\$	53,428.33																				
40	1050	119	43	10	PP01	3/8/1999	1	\$	38,731.80	\$	25,496.16	\$	-	\$	64,229.96	\$	72,085.33																				
40	1050	120	40	10	PP01	11/1/2004	1	\$	114,732.50	\$	72,216.43	\$	-	\$	186,948.93	\$	143,518.33																				
40	1050	122	25	3	PP01	3/28/2022	1	\$	100,493.12	\$	62,383.22	\$	-	\$	162,876.34	\$	126,031.33																				
40	1050	123	27	3	PP01	6/1/2021	1	\$	42,581.39	\$	24,775.21	\$	-	\$	67,356.60	\$	54,048.33																				
40	1050	124	27	2	PP01	2/21/2021	1	\$	45,614.91	\$	26,635.70	\$	-	\$	72,250.61	\$	61,698.33																				
40	1050	125	27	9	PP01	4/21/2020	1	\$	34,727.79	\$	25,668.60	\$	-	\$	60,396.39	\$	57,819.33																				
40	1050	126	25	3	PP01	8/22/2022	1	\$	55,469.17	\$	33,298.46	\$	-	\$	88,763.20	\$	61,620.33																				
40	1050	129	41	7	PP01	1/23/2023	1	\$	32,817.43	\$	24,782.11	\$	-	\$	57,599.54	\$	53,428.33																				
40	1050	130	25	8	PP01	8/29/2016	1	\$	96,578.96	\$	52,944.25	\$	-	\$	149,523.21	\$	131,568.33																				
40	1050	131	42	5	PP01	3/7/2022	1	\$	16,580.79	\$	19,770.65	\$	-	\$	36,351.44	\$	55,308.33																				
40	1050	133	27	10	PP02	10/24/2011	1	\$	87,799.83	\$	52,121.07	\$	-	\$	139,920.90	\$	112,482.33																				
40	1050	134	27	1	PP01	12/11/2023	1	\$	57,297.73	\$	34,773.66	\$	-	\$	92,071.39	\$	57,480.33																				
40	1050	135	27	1	PP01	2/5/2024	1	\$	21,162.16	\$	24,782.11	\$	-	\$	45,944.27	\$	57,319.33																				
40	1050	136			PP01		0	\$	42,849.26	\$	24,782.11	\$	-	\$	67,631.37	\$	68,686.33																				
40	1050	137	25	1	PP01	6/24/2024	1	\$	60,708.01	\$	39,349.46	\$	-	\$	100,002.43	\$	85,549.33																				
40	1050	148	27	8	PP01	6/19/2017	1	\$	39,855.35	\$	23,596.13	\$	-	\$	63,451.48	\$	61,698.33																				
40	1050	151	31	6	PP02	1/4/2016	1	\$	54,451.75	\$	33,088.52	\$	-	\$	87,540.27	\$	88,362.33																				
40	1050	152			PP01		0	\$	57,296.21	\$	34,098.32	\$	-	\$	91,394.53	\$	86,700.33																				
40	1050	153	25	3	PP01	7/5/2022	1	\$	28,380.63	\$	34,028.46	\$	-	\$	62,409.09	\$	66,700.33																				

MEMORANDUM

To: Michael Rankin, Executive Branch Budget Officer
From: Ashley Griffiths, Administrative Services Officer III
CC: Debbie Bowman, Deputy Secretary of State for Operations
Date: March 28, 2025
Subject: 2025 Salary Adjustment Fund Request – BA1051

The Office of the Secretary of State is projecting a shortfall of salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 5, of the 82nd Legislative Session, the agency is requesting the revenue and authority to meet any salary deficiencies that could not absorb the salary increase for fiscal year 2025. The agency is requesting \$43,236 in Salary Adjustment funds to cover the projected shortfall through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay category 01, Personnel Services expenditures through the end of the fiscal year.

Please contact Ashley Griffiths at 684-5738 if you require additional information or have any questions.

Thank you for your time and consideration in this matter.

AB522 SALARY INCREASES
BA 1051 - HAVA ELECTIONS ACCOUNT
 FY 2025
 255A105101

Agcy	Org	Posn	NBR	Title	Grade	Title	Grade	Step	PayPol	Cont Svc Dt	FTE
GF	040	1051	237	7.641	41	7.641	41	7	PP02	3/28/2005	1
GF	040	1051	240	7.649	31	7.649	31	4	PP01	11/16/2020	1
GF	040	1051	260	7.647	33	7.647	33	6	PP01	6/19/2017	1
GF	040	1051	261	7.625	35	7.625	35	9	PP01	12/26/2023	1

For Work through										
Ck Date										
3/16/2025	3/28/2025	ACTUAL PAYROLL	ASSESSMENTS	PROJECTED PAYROLL	LESS DISALLOWED GLS	LESS HPD04	TOTAL	NEBS110 BUDGET AMT	OVERAGE	
\$ 106,192.05	\$ 235.25	\$ 43,355.55	\$ (8,455.33)	\$ -	\$ -	\$ (141,327.52)	\$ 134,322.00	\$ (7,005.52)		
\$ 60,093.56	\$ 235.25	\$ 29,835.92	\$ (762.73)	\$ -	\$ -	\$ (89,402.00)	\$ 89,402.00	\$ -		
\$ 70,870.78	\$ 235.25	\$ 32,474.61	\$ (3,673.39)	\$ -	\$ -	\$ (99,907.25)	\$ 86,921.00	\$ (12,986.25)		
\$ 86,420.14	\$ 235.25	\$ 37,582.29	\$ (1,918.76)	\$ (9,621.00)	\$ -	\$ (112,697.92)	\$ 89,454.00	\$ (23,243.92)		
323,576.53	941.00	143,248.37	(14,810.21)	(9,621.00)		(443,334.69)	400,099.00	(43,235.69)		

L01	400,099.00
Actual/Projected Salaries	467,765.90
Shortfall	(67,666.90)
AB522 Work Program	43,236.00
CAT11 to CAT01 Work Program	24,431.00
Total Work programs	67,667.00

SECRETARY OF STATE - BA 1051
Fiscal Year 2025 Budget Summary by Category
March 28, 2025

RGL	DESCRIPTION	REVENUE AUTHORITY	GF Authority	Other Fund Authority	PROJECTED GF ACTUALS	GF BALANCE
00-2501	Appropriation Control	1,235,179.00	1,235,179.00	-	1,235,179.00	-
00-2511	Balance Forward	21,144,005.00	21,144,005.00	-	21,144,005.00	-
00-2520	Balance Forwarded Federal Funds	2,827,802.00	-	2,827,802.00	-	-
00-4661	Trans From BA 3674	145,425.00	-	145,425.00	-	-
00-4326	Treasurer's Interest Distribution	48,795.00	-	48,795.00	-	-
Total Revenue		\$ 25,401,206.00	\$ 22,379,184.00	\$ 3,022,022.00	\$ 22,379,184.00	\$ -
CAT	DESCRIPTION	BUDGET AUTHORITY	PROJECTED ACTUALS			BALANCE
01	PERSONNEL	400,099.00	400,099.00	-	487,765.90	(67,666.90)
04	OPERATING	2,170.00	2,170.00	-	2,170.00	-
11	VOTING MACHINE REPLACEMENT	828,554.00	828,554.00	-	804,123.00	24,431.00
14	HOMELAND SECURITY GRANT	145,425.00	-	145,425.00	-	-
16	ADMINISTRATION OF ELECTIONS	40,863.00	-	-	-	-
26	INFORMATION SERVICES	3,750.00	3,750.00	-	3,750.00	-
31	VREMS - SB484	21,144,005.00	21,144,005.00	-	16,644,005.00	4,500,000.00
84	HAVA RESERVE	2,835,734.00	-	2,835,734.00	-	-
87	PURCHASING ASSESSMENT	606.00	606.00	-	606.00	-
Total		\$ 25,401,206.00	\$ 22,379,184.00	\$ 2,981,159.00	\$ 17,922,419.90	\$ 4,456,764.10

GF
GF
GF
GRANT
GRANT
ONE-SHOT
GF
GF

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, section 36, subsection 4, made appropriations from the General Fund to the Board of Examiners to encourage continuity of service established by section 32. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the General Fund to the departments, commissions, and agencies of the State for the purpose of encouraging continuity of services.

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
1354	Department of Administration – Fleet Services Division	\$8,954
	Total	\$8,954

Joe Lombardo
Governor



Jack Robb
Director

Joy Grimmer
Deputy Director

Daniel Marlow
Administrator

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

209 E. Musser Street, Suite 304 | Carson City, Nevada 89701
Phone: (775) 531-3200 | www.adminsvcs.nv.gov | Fax: (775) 684-5846

MEMORANDUM

DATE: January 21, 2025

TO: Dustin Speed, Executive Branch Budget Officer

FROM: Daniel Marlow, Administrator
Administrative Services Division

THROUGH: Robbie Burgess, Administrator
Fleet Services Division 

SUBJECT: Request for April 2025 Board of Examiners
- Longevity Payment Reimbursement (WP 25CS135401)

The Fleet Services Division is projecting a shortfall of salary expenditures through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 36, of the 82nd Legislative Session, the division is requesting the revenue and authority which was authorized by the Legislature associated with the longevity payment. The division is requesting \$8,953.97 to fund the longevity payment for direct and projected cost reimbursement through the end of fiscal year 2025.

Currently, the budget account has insufficient funding available to pay category 01, Personnel Services expenditures through the end of the fiscal year.

Attached is a supporting spreadsheet to support Fleet Services Division calculations.

Thank you for your time and consideration in this manner.

CC: Tiffany Day, Management Analyst III
Administrative Services Division

GL	Desc	Current Authority	Actual	Budget Balance	Projection	Actual Plus Projection	Projected Budget Balance	Work Program 25CS135401	Work Program C74245	Revised Authority	Revised Projected Budget Balance
5100	SALARIES	882,163	568,463.21	313,699.79	248,800.69	817,263.90	64,899.10			882,163	64,899.10
5200	WORKERS COMPENSATION	22,101	12,012.16	10,088.84	6,940.32	18,952.48	3,148.52			22,101	3,148.52
5300	RET CONT EMPLOYER PAY PLAN	201,090	88,246.86	112,843.14	21,800.56	110,047.42	91,042.58			201,090	91,042.58
5301	RET CONT EMPLOYEE/EMPLOYER PLN	0	77,822.36	(77,822.36)	26,002.26	103,824.62	(103,824.62)			201,090	91,042.58
5400	PERSONNEL ASSESSMENT	3,153	2,364.75	788.25	788.25	3,153.00	0.00	1,531	102,294	103,825	0.38
5420	COLLECTIVE BARGAINING ASSESSMT	90	55.25	34.75	34.75	90.00	0.00			3,153	-
5430	LABOR RELATIONS ASSESSMENT	853	853.00	-	-	853.00	0.00			90	-
5500	GROUP INSURANCE	145,728	97,139.71	48,588.29	64,330.58	161,470.29	(15,742.29)			853	-
5610	SICK LEAVE	0	54,888.56	(54,888.56)	27,444.28	82,332.84	(82,332.84)			145,728	(15,742.29)
5620	ANNUAL LEAVE	0	57,611.72	(57,611.72)	30,219.74	87,831.46	(87,831.46)		28,212	28,212	(54,120.84)
5630	HOLIDAY LEAVE	0	27,474.96	(27,474.96)	40,099.44	67,574.40	(67,574.40)		87,832	87,832	0.54
5640	COMP TIME LEAVE	0	-	-	-	-	-			0	(67,574.40)
5650	OTHER LEAVE	0	4,482.53	(4,482.53)	7,333.73	11,816.26	(11,816.26)			0	-
5700	PAYROLL ASSESSMENT	588	441.00	147.00	147.00	588.00	0.00			0	(11,816.26)
5750	RETIRED EMPLOYEES GROUP INSURANCE	28,055	22,414.71	5,640.29	6,863.20	29,277.91	(1,222.91)			588	-
5800	UNEMPLOYMENT COMPENSATION	0	-	-	-	-	0.00			28,055	(1,222.91)
5810	OVERTIME PAY	0	4,582.87	(4,582.87)	3,326.75	7,909.62	(7,909.62)			0	-
5820	HOLIDAY PAY	0	-	-	-	-	0.00			0	(7,909.62)
5830	COMP TIME PAYOFF	0	-	-	-	-	0.00			0	-
5840	MEDICARE	12,792	10,075.82	2,716.18	3,026.88	13,102.70	(310.70)	106		0	-
5880	SHIFT DIFFERENTIAL PAY	0	-	-	-	-	0.00			12,898	(204.70)
5901	PAYROLL ADJUSTMENT	0	-	-	-	-	0.00			0	-
5910	STANDBY PAY	0	-	-	-	-	0.00			0	-
5930	LONGEVITY PAY	0	-	-	-	-	0.00			0	-
5932	RETENTION INCENTIVE	0	3,470.88	(3,470.88)	3,845.88	7,316.76	(7,316.76)	7,317		0	0.24
5960	TERMINAL SICK LEAVE PAY	0	250.00	(250.00)	250.00	500.00	(500.00)			7,317	(500.00)
5970	TERMINAL ANNUAL LEAVE PAY	0	-	-	-	-	0.00			0	-
5975	FORFEITED ANNUAL LEAVE PAYOFF	0	-	-	-	-	0.00			0	-
5980	CALL BACK PAY	0	-	-	-	-	0.00			0	-
Total		1,296,613	1,032,650.35	263,962.65	491,254.31	1,523,904.66	(227,291.66)	8,954.00	218,338.00	1,523,905.00	0.34

FLEET SERVICES DIVISION
 B/A 1354
 Cat 01 Projections
 FY 25

Object	Description	Expended	Projected	Total
5100	SALARIES	568,463.21	248,800.69	817,263.90
5200	WORKERS COMPENSATION	12,012.16	6,940.32	18,952.48
5300	RET CONT EMPLOYER PAY PLAN	88,246.86	21,800.56	110,047.42
5301	RET CONT EMPLOYEE/EMPLOYER PLN	77,822.36	26,002.26	103,824.62
5400	PERSONNEL ASSESSMENT	2,364.75	788.25	3,153.00
5420	COLLECTIVE BARGAINING ASSESSMT	55.25	34.75	90.00
5430	LABOR RELATIONS ASSESSMENT	853.00	-	853.00
5500	GROUP INSURANCE	97,139.71	64,330.58	161,470.29
5610	SICK LEAVES	54,888.56	27,444.28	82,332.84
5620	ANNUAL LEAVES	57,611.72	30,219.74	87,831.46
5630	HOLIDAY LEAVES	27,474.96	40,099.44	67,574.40
5640	COMP TIME LEAVES	-	-	-
5650	OTHER LEAVES	4,482.53	7,333.73	11,816.26
5700	PAYROLL ASSESSMENT	441.00	147.00	588.00
5750	RETIRED EMPLOYEES GROUP INSURA	22,414.71	6,863.20	29,277.91
5800	UNEMPLOYMENT COMPENSATION	-	-	-
5810	OVERTIME PAY	4,582.87	3,326.75	7,909.62
5840	MEDICARE	10,075.82	3,026.88	13,102.70
5930	LONGEVITY PAY	3,470.88	3,845.88	7,316.76
5932	RETENTION INCENTIVE	250.00	250.00	500.00
5970	TERMINAL ANNUAL LEAVE PAY	-	-	-
		1,032,650.35	491,254.31	1,523,904.66

L01 Authority 1,296,613.00
 Overall (Short) (227,291.66)

Continuity of Service 8,954.00
 Salary Adjustment Funds -
 Work Program C74245 218,338.00
 Net 0.34

FLEET SERVICES DIVISION

B/A 1354

Continuity of Service

FY 25

Object	Description	1st	2nd	Total
5300	RET CONT EMPLOYER PAY PLAN	\$ 258.24	\$ 266.62	524.86
5301	RET CONT EMPLOYEE/EMPLOYER PLN	\$ 472.50	\$ 533.75	1,006.25
5800	UNEMPLOYMENT COMPENSATION	\$ -	\$ -	-
5840	MEDICARE	\$ 50.33	\$ 55.77	106.09
5930	LONGEVITY PAY	\$ 3,470.88	\$ 3,845.88	7,316.76
		4,251.95	4,702.02	8,953.97

JV Document (Multiple Items)

Sum of Amount	Column Labels											
Row Labels	5100	5200	5300	5301	5610	5620	5630	5750	5810	5840	5930	Grand Total
2		\$104.45		\$481.04		\$2,013.12	\$335.52	\$74.69		\$39.89	\$400.00	\$3,448.71
3	\$1,262.40	\$95.33		\$439.11		\$631.20	\$315.60	\$70.21		\$35.45	\$300.00	\$3,149.30
4	\$2,348.64	\$123.44		\$466.08						\$45.12	\$650.00	\$3,959.61
5	\$1,621.92	\$77.58	\$684.13				\$270.32	\$74.69	\$251.64	\$28.21	\$149.89	\$2,892.21
6	\$1,102.56	\$48.86	\$430.92				\$183.76	\$60.16		\$15.40		\$1,822.38
8	\$1,418.88	\$81.93		\$377.15			\$236.48	\$40.88		\$30.26	\$500.00	\$2,697.34
9	\$894.08	\$59.43		\$273.84	\$447.04		\$223.52	\$52.64		\$22.68		\$1,970.36
10	\$790.72	\$52.59		\$242.13		\$395.36	\$197.68	\$43.99		\$19.18		\$1,741.65
13	\$434.40	\$71.05		\$327.32		\$868.80	\$217.20	\$48.37		\$26.10	\$350.00	\$2,343.24
14	\$528.96	\$46.90	\$413.49		\$528.96		\$176.32	\$39.27		\$17.15		\$1,751.05
16		\$110.42	\$973.40		\$2,270.40		\$378.40	\$84.21		\$41.16	\$256.96	\$4,114.95
17	\$1,724.16	\$83.76	\$738.45				\$287.36	\$63.96		\$30.34	\$192.72	\$3,120.75
19	\$823.36	\$54.75					\$205.84	\$45.83		\$19.89		\$1,813.49
21	\$574.72	\$82.95	\$731.28	\$252.14	\$128.65	\$283.03	\$287.36	\$63.96		\$31.36	\$171.31	\$3,092.38
22	\$1,592.16	\$89.56		\$412.58		\$1,149.44	\$265.36	\$59.08		\$33.85	\$500.00	\$2,952.59
Grand Total	\$15,116.96	\$1,183.00	\$3,971.67	\$3,271.39	\$3,375.05	\$5,340.95	\$3,580.72	\$871.71	\$251.64	\$436.04	\$3,470.88	\$40,870.01

**1354 - FLEET SERVICES
PAYROLL PROJECTIONS**

	Budgeted Authority
1,296,613	

[illegible]

DAWN

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

14B

The 2023 Legislature, through Assembly Bill 522, Section 36, subsection 1, made appropriations from the General Fund to the Board of Examiners to encourage continuity of services established by section 32. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the General Fund to the departments, commissions, and agencies of the State for the purpose of encouraging continuity of services.

The following department requests for allocations from the General Fund salary adjustment account are recommended by the Director of the Governor's Finance Office:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3706	HR-PRISON MEDICAL CARE	\$31,325
3710	HR-DIRECTOR'S OFFICE	\$57,172
3717	HR-NO NEVADA CORRECTNL CENTER	\$49,134
3722	HR-STEWART CONSERVATION CAMP	\$6,014
3723	HR-PIOCHE CONSERVATION CAMP	\$4,576
3724	HR-NO NV TRANSITIONAL HOUSING	\$8,050
3725	HR-THREE LAKES VLY CNSRVTN CMP	\$2,507
3738	HR-SO DESERT CORRECTIONAL CTR	\$41,173
3739	HR-WELLS CONSERVATION CAMP	\$1,275
3748	HR-JEAN CONSERVATION CAMP	\$3,102
3751	HR-ELY STATE PRISON	\$38,926
3752	HR-CARLIN CONSERVATION CAMP	\$2,903
3759	HR-LOVELOCK CORRECTIONAL CTR	\$40,526
3760	HR-CASA GRANDE TRANS HOUSING	\$9,251
3761	HR-F MCCLURE WOMENS COR CTR	\$34,752
3762	HR-HIGH DESERT STATE PRISON	\$87,914
	Total	\$418,600

Joe Lombardo
Governor

James E. Dzurenda
Director

Kitty DeSocio, MSM, CGFM
Deputy Director
Of Support Services



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

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

STATE OF NEVADA
Department of Corrections

MEMORANDUM

Date: April 23, 2025

To: Vince Young-Brown, Executive Branch Budget Officer
Nima Rezaie, Executive Branch Budget Officer

A handwritten signature in blue ink, likely belonging to Kitty DeSocio, is written over a circular stamp.

From: Kitty DeSocio, MSM, CGFM, Deputy Director of Support Services

Subject: Request for May 2025 Board of Examiners-Longevity Payment Reimbursement

The Nevada Department of Corrections (NDOC) is projecting a shortfall of General Fund appropriations to fund salary expenditures through the end of State Fiscal Year SFY 2025. Pursuant to Assembly Bill 522, Section 36, of the 82nd Legislative Session, the department is requesting the revenue and authority which was authorized by the Legislature associated with the longevity payment. The department is requesting \$418,600 to fund the longevity payment for direct cost reimbursement through the remainder of SFY 2025, for the departmental budget accounts that are qualified for this reimbursement. Please see the breakdown below of the funding request by budget account:

NEVADA DEPARTMENT OF CORRECTIONS		
FY 25 CONTINUITY OF SERVICE/LONGEVITY PROJECTIONS		
Budg Acct	Budg Acct Description	FY25 Projected
3706	HR-PRISON MEDICAL CARE	\$31,325
3710	HR-DIRECTOR'S OFFICE	\$57,172
3717	HR-NO NEVADA CORRECTNL CENTER	\$49,134
3722	HR-STEWART CONSERVATION CAMP	\$6,014
3723	HR-PIOCHE CONSERVATION CAMP	\$4,576
3724	HR-NO NV TRANSITIONAL HOUSING	\$8,050
3725	HR-THREE LAKES VLY CNSRVTN CMP	\$2,507
3738	HR-SO DESERT CORRECTIONAL CTR	\$41,173
3739	HR-WELLS CONSERVATION CAMP	\$1,275
3748	HR-JEAN CONSERVATION CAMP	\$3,102
3751	HR-ELY STATE PRISON	\$38,926
3752	HR-CARLIN CONSERVATION CAMP	\$2,903
3759	HR-LOVELOCK CORRECTIONAL CTR	\$40,526
3760	HR-CASA GRANDE TRANS HOUSING	\$8,251
3761	HR-F MCCLURE WOMENS COR CTR	\$34,752
3762	HR-HIGH DESERT STATE PRISON	\$87,914
	Total	\$418,600

Without this funding, the budget accounts department wide would have insufficient funding available to pay Category 01 Personnel Services expenditures through the end of the fiscal year. Attached are spreadsheets to support NDOC's calculations.

Thank you for your time and consideration in this manner.

Kitty DeSocio, MSM, CGFM
Deputy Director of Support Services
Nevada Department of Corrections

PAYROLL ACCOUNTING - BSR RESEARCH

Payments by Budget Account for Fiscal Year 2025

Agency: 440 DEPARTMENT OF CORRECTIONS

Organizatio All

Object: 5930 LONGEVITY PAY

Code	Budget Account	Actual First Payment	Projected 2nd Payment	Total
3706	HR-PRISON MEDICAL CARE	\$15,662.13	\$15,662.13	\$31,324.26
3708	HR-OFFENDERS' STORE FUND	\$3,562.53	\$3,562.53	\$7,125.06
3710	HR-DIRECTOR'S OFFICE	\$28,585.58	\$28,585.58	\$57,171.16
3711	HR-CORRECTIONAL PROGRAMS	\$8,600.85	\$8,600.85	\$17,201.70
3716	HR-WARM SPRINGS CORRECTNL CTR	\$2,258.44	\$2,258.44	\$4,516.88
3717	HR-NO NEVADA CORRECTNL CENTER	\$24,566.73	\$24,566.73	\$49,133.46
3719	HR-PRISON INDUSTRY	\$3,809.79	\$3,809.79	\$7,619.58
3722	HR-STEWART CONSERVATION CAMP	\$3,006.90	\$3,006.90	\$6,013.80
3723	HR-PIOCHE CONSERVATION CAMP	\$2,287.79	\$2,287.79	\$4,575.58
3724	HR-NO NV TRANSITIONAL HOUSING	\$4,024.80	\$4,024.80	\$8,049.60
3725	HR-THREE LAKES VLY CNSRVTN CMP	\$1,253.10	\$1,253.10	\$2,506.20
3727	HR-PRISON RANCH	\$1,292.40	\$1,292.40	\$2,584.80
3738	HR-SO DESERT CORRECTIONAL CTR	\$20,586.43	\$20,586.43	\$41,172.86
3739	HR-WELLS CONSERVATION CAMP	\$637.30	\$637.30	\$1,274.60
3748	HR-JEAN CONSERVATION CAMP	\$1,550.60	\$1,550.60	\$3,101.20
3751	HR-ELY STATE PRISON	\$19,462.82	\$19,462.82	\$38,925.64
3752	HR-CARLIN CONSERVATION CAMP	\$1,451.16	\$1,451.16	\$2,902.32
3759	HR-LOVELOCK CORRECTIONAL CTR	\$20,262.81	\$20,262.81	\$40,525.62
3760	HR-CASA GRANDE TRANS HOUSING	\$4,625.04	\$4,625.04	\$9,250.08
3761	HR-F MCCLURE WOMENS COR CTR	\$17,375.98	\$17,375.98	\$34,751.96
3762	HR-HIGH DESERT STATE PRISON	\$43,956.89	\$43,956.89	\$87,913.78
3763	HR-INMATE WELFARE ACCOUNT	\$1,270.99	\$1,270.99	\$2,541.98
	Totals	\$230,091.06	\$230,091.06	\$460,182.12

POTENTIAL FURTHER SAVINGS
3715 CLOSED FACILITY

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, section 22 made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements to effect a one, two, or three-grade pay increase for specified employees in the classified service adopted pursuant to NRS 284.175 of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Office of Finance in the Office of the Governor, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission, or agency request for an allocation from the General Fund and/or Highway Fund salary adjustment account(s) are recommended by the Director of the Office of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT
3710	NDOC Director's Office	\$255,594
3716	Warm Springs Correctional Center	\$38,914
3717	Northern Nevada Correctional Center	\$1,396,194
3719	Prison Industry	\$29,991
3722	Stewart Conservation Camp	\$81,722
3723	Pioche Conservation Camp	\$89,718
3724	Northern Nevada Transitional Housing	\$43,179
3725	Three Lakes Valley Conservation Camp	\$150,881
3738	South Desert Correctional Center	\$1,449,825
3739	Wells Conservation Camp	\$44,546
3748	Jean Conservation Camp	\$74,862
3751	Ely State Prison	\$1,208,740
3752	Carlin Conservation Camp	\$62,022
3759	Lovelock Correctional Center	\$1,031,345
3760	Casa Grande Transitional Housing	\$162,192
3761	Florence McClure Women Correctional Center	\$1,031,669
3762	High Desert State Prison	\$3,201,296
	Total	\$10,352,690

Joe Lombardo
Governor

James E. Dzurenda
Director

Kitty DeSocio, MSM, CGFM
Deputy Director
Of Support Services



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

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

STATE OF NEVADA
Department of Corrections

MEMORANDUM

Date: April 8, 2025

To: Vince Young-Brown, Executive Branch Budget Officer
Nima Rezaie, Executive Branch Budget Officer

From: Kitty DeSocio, MSM, CGFM, Deputy Director of Support Services *KBD*

Subject: **Request for May 2025 Board of Examiners - Two-Grade Salary Increase**

The Nevada Department of Corrections (NDOC) respectfully submits a request for reimbursement of actual costs associated with the two-grade salary increases authorized by the Legislature under Assembly Bill 522 (AB 522), Section 22 as this funding was not directly allocated to the Department.

The requested reimbursement, totaling \$10,352,683, is intended to cover the additional expenses for all currently filled positions within NDOC, as per the E673 Legislatively Approved Decision Unit. These costs were calculated based on the provisions in AB 522, Section 22, which appropriated supplemental funds to the State Board of Examiners to address deficiencies arising from the bill's implementation. The reimbursement will be applied to NDOC budget accounts specifically under Category 01 and ensures compliance with the authorized funding mechanism outlined in AB 522.

Attached to this request are detailed supporting spreadsheets that outline NDOC's calculations and provide further justification for the requested amount.

Thank you for your time and consideration of this request. Should you require additional information or clarification, please do not hesitate to contact us.

cc: Jason Giesler, Administrative Services Officer IV, Fiscal Services

BA	2 Grade Increase cost incurred SFY 25	RGL 4601 L01 Remaining Authority	Percentage expended
3710	\$255,593.75	\$447,550.00	57%
3716	\$38,913.85	\$93,041.00	42%
3717	\$1,396,193.61	\$1,827,112.00	76%
3719	\$29,990.78	\$67,348.00	45%
3722	\$81,721.40	\$109,580.00	75%
3723	\$89,717.39	\$122,074.00	73%
3724	\$43,178.38	\$59,209.00	73%
3725	\$150,880.97	\$183,320.00	82%
3738	\$1,449,824.72	\$1,747,942.00	83%
3739	\$44,545.81	\$89,476.00	50%
3748	\$74,861.06	\$106,575.00	70%
3751	\$1,208,739.65	\$1,855,035.00	65%
3752	\$62,021.12	\$99,028.00	63%
3759	\$1,031,344.42	\$1,695,060.00	61%
3760	\$162,191.25	\$188,879.00	86%
3761	\$1,031,668.90	\$1,181,224.00	87%
3762	\$3,201,295.50	\$3,833,913.00	83%
Total	\$10,352,682.55	\$13,706,366.00	75.53%

Calculations are based on current filled positions.

The cost for current vacant positions was not requested.

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2023 Legislature, through Assembly Bill 522, section 22 made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements to effect a one, two, or three-grade pay increase for specified employees in the classified service adopted pursuant to NRS 284.175 of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Office of Finance in the Office of the Governor, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions, and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission, or agency request for an allocation from the General Fund and/or Highway Fund salary adjustment account(s) are recommended by the Director of the Office of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HIGHWAY FUND ADJUSTMENT
3740	Department of Public Safety – Parole and Probation	\$2,138,657	
3743	Department of Public Safety – Investigation Division	\$308,902	\$21,642
4738	Department of Public Safety – Dignitary Protection	\$57,540	
	Total	\$2,505,099	\$21,642

Joe Lombardo
Governor



George Togliatti
Director

Sheri Brueggemann
Deputy Director

Director's Office

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

Memorandum

DATE: April 25, 2025

TO: Tiffany Smorra, Executive Branch Budget Officer, Governor's Finance Office

FROM: Kristi Defer, Administrative Services Officer, Department of Public Safety
Kristi Defer

SUBJECT: Public Safety – Sworn Grade Increases Request

The Nevada Department of Public Safety (DPS) is projecting a shortfall to fund salary expenses through the end of fiscal year 2025. Pursuant to Assembly Bill 522, Section 22, of the 82nd legislative session. DPS is requesting the revenue which was authorized by the Legislature associated with the sworn position grade increases, for which funding was not allocated to the division in state fiscal year 2025.

These divisions were provided with fiscal authority for the grade increases, but the allocation of funding for this authority is granted by the Board of Examiners' approval. Fiscal projections to support this request are attached.

- Budget Account 4738-Dignitary Protection is requesting a total of \$57,540 in General Fund.
- Budget Account 3743-Investigation Division is requesting a total of \$308,902 in General Fund and \$21,642 in Highway Fund.
- Budget Account 3740-Parole and Probation is requesting a total of \$2,138,657 in General Fund.

PAYROLL ACCOUNTING - BSR RESEARCH
 Payments by Employee for Fiscal Year 2025
 Agency: 650 DEPARTMENT OF PUBLIC SAFETY
 Organization: All
 Budget Account: 4738 HR-DIGNITARY PROTECTION

\$ 75,513 Total Available 2-Grade Salary Funds

\$ 57,540 Total Salary Adjustment Request for BA 4738

Last Name	First Name	Empl ID	Posn #	Home Agency	Home Org	Amount	Adjustment Request	PCN	DU	Budget	Percentage of year PCN was filled or Projected to be Filled
			20	650	4738	\$57,854.36	\$ 5,639	000020	E673	\$ 9,515	59%
			25	650	4738	\$112,780.53	\$ 5,581	000025	E673	\$ 5,581	100%
			50	650	4738	\$158,463.96	\$ 10,955	000050	E673	\$ 10,955	100%
			55	650	4738	\$135,539.56	\$ 12,044	000055	E673	\$ 12,044	100%
			60	650	4738	\$114,715.13	\$ 9,415	000060	E673	\$ 9,415	100%
			65	650	4738	\$0.00	\$ 2,467	000065	E673	\$ 9,515	26%
			70	650	4738	\$0.00	\$ 2,467	000070	E673	\$ 9,515	26%
			80	650	4738	\$169,394.83	\$ 8,973	000080	E673	\$ 8,973	100%
			Totals			\$748,748.37				\$ 75,513	

DPS-Investigation Division
Agency 653
BA 3743

Department of Public Safety- Investigation Div. BA 3743		
Total RGL 4601 Authority	Total RGL 4602	
317,916.00	\$ 21,642.00	339,558.00

Methodology:

NEBS LO1 E673 and E674 information used to determine the actual cost of the grade and step increases for Sworn and cross referenced with the HRDW Budget Status YTD report to determine which PCN's were occupied. Based on that information, all 31 position have been occupied and therefore we are requesting the amount of \$317,916.00 for RGL 4601 and \$21,642.00 for RGL 4602

Fiscal Year	Fund	Department	Activity	Unit	DAWN Code	Description	YTD Actual	Work Program Difference
'2025	'101	'653	'3743	'3743	'4601	'GENERAL FUND SALARY ADJUSTMENT	0	\$317,916.00 -\$317,916.00
'2025	'101	'653	'3743	'3743	'4602	'HIGHWAY FUND SALARY ADJUSTMENT	0	\$21,642.00 -\$21,642.00
								\$339,558.00

E673-GF \$282,049.09
E673-HWY \$21,642.00
E674-GF \$26,852.53
\$330,543.62

****NOTE** The Highway amount was miscalculated and should be \$34,284 but only \$21,642 was budgeted in GL4602** The difference was added to GF**

PAYROLL ACCOUNTING - BSR RESEARCH
 Payments by Employee for Fiscal Year 2025
 Agency: 652 PAROLE AND PROBATION
 Organizational All

\$1,974,654	E673: 2-grade
\$164,003	E674: 1-grade
\$2,138,657	Total Salary Adjustment Request for Agency 652

Last Name		First Name	Posn #	Home Age	Home Org	Amount	Adjustment		Request	PCN	DU	Budget	Pay Periods Filled	Pay Periods Filled %
3				652	3740	\$87,580.74			\$8,286	000003	E673	\$8,286	27	100%
4				652	3740	\$122,754.24			\$9,415	000004	E673	\$9,415	27	100%
8				652	3740	\$134,701.26			\$10,955	000008	E673	\$10,955	27	100%
9				652	3740	\$156,248.02			\$7,528	000009	E674	7,528	27	100%
10				652	3740	\$110,427.90			\$9,472	000010	E673	\$9,472	27	100%
11				652	3740	\$101,696.96			\$8,973	000011	E673	\$8,973	27	100%
13				652	3740	\$114,675.85			\$8,946	000013	E673	\$8,946	27	100%
15				652	3740	\$0.00			\$0	000015	E673	\$8,212	-	0%
16				652	3740	\$139,721.22			\$6,828	000016	E674	6,828	27	100%
17				652	3740	\$92,571.51			\$3,035	000017	E674	6,828	12	44%
18				652	3740	\$104,403.75			\$9,472	000018	E673	\$9,472	27	100%
19				652	3740	\$143,463.06			\$6,828	000019	E674	6,828	27	100%
20				652	3740	\$75,609.02			\$5,059	000020	E673	\$11,383	12	44%
21				652	3740	\$151,002.88			\$7,215	000021	E674	7,215	27	100%
24				652	3740	\$152,917.13			\$5,403	000024	E674	5,403	27	100%
25				652	3740	\$133,499.96			\$6,692	000025	E674	7,528	24	89%
26				652	3740	\$15,639.28			\$3,346	000026	E673	\$8,212	11	41%
27				652	3740	\$0.00			\$0	000027	E673	\$8,212	-	0%
28				652	3740	\$119,585.46			\$8,973	000028	E673	\$8,973	27	100%
29				652	3740	\$55,307.50			\$3,793	000029	E674	6,828	15	56%
30				652	3740	\$139,943.74			\$6,828	000030	E674	6,828	27	100%
31				652	3740	\$44,472.84			\$6,258	000031	E673	\$8,046	21	78%
34				652	3740	\$123,763.85			\$10,955	000034	E673	\$10,955	27	100%
35				652	3740	\$0.00			\$0	000035	E673	\$8,212	-	0%
36				652	3740	\$136,682.47			\$12,044	000036	E673	\$12,044	27	100%
37				652	3740	\$100,404.63			\$8,925	000037	E673	\$8,925	27	100%
40				652	3740	\$49,138.74			\$3,793	000040	E674	6,828	15	56%
41				652	3740	\$129,279.90			\$12,044	000041	E673	\$12,044	27	100%
43				652	3740	\$121,345.26			\$11,614	000043	E673	\$11,614	27	100%
44				652	3740	\$129,010.80			\$12,044	000044	E673	\$12,044	27	100%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay Periods Filled	Pay Periods Filled %
45			652	3740	\$21,856.57	\$4,869	000045	E673	\$10,955	12	44%
48			652	3740	\$97,220.56	\$8,263	000048	E673	\$8,263	27	100%
49			652	3740	\$97,437.76	\$9,177	000049	E673	\$9,177	27	100%
50			652	3740	\$112,362.71	\$11,149	000050	E673	\$11,149	27	100%
57			652	3740	\$98,395.09	\$11,152	000057	E673	\$12,044	25	93%
59			652	3740	\$113,646.13	\$9,220	000059	E673	\$9,220	27	100%
60			652	3740	\$135,082.46	\$12,044	000060	E673	\$12,044	27	100%
61			652	3740	\$100,339.60	\$11,115	000061	E673	\$11,115	27	100%
62			652	3740	\$69,007.45	\$8,987	000062	E673	\$8,987	27	100%
66			652	3740	\$142,871.51	\$6,083	000066	E673	\$8,212	27	100%
68			652	3740	\$0.00	\$8,212	000068	E673	\$8,212	20	74%
70			652	3740	\$125,316.48	\$12,044	000070	E673	\$12,044	27	100%
71			652	3740	\$124,531.36	\$11,567	000071	E673	\$11,567	27	100%
77			652	3740	\$85,225.53	\$8,879	000077	E673	\$9,220	26	96%
79			652	3740	\$0.00	\$0	000079	E673	\$8,212	-	0%
80			652	3740	\$87,310.95	\$7,878	000080	E673	\$7,878	27	100%
89			652	3740	\$108,071.11	\$9,472	000089	E673	\$9,472	27	100%
90			652	3740	\$87,623.68	\$8,212	000090	E673	\$8,212	27	100%
91			652	3740	\$109,900.33	\$9,515	000091	E673	\$9,515	27	100%
92			652	3740	\$121,782.77	\$8,212	000092	E673	\$8,212	27	100%
93			652	3740	\$99,368.02	\$8,212	000093	E673	\$8,212	27	100%
94			652	3740	\$90,078.57	\$8,212	000094	E673	\$8,212	27	100%
95			652	3740	\$116,675.86	\$6,086	000095	E673	\$10,955	15	56%
97			652	3740	\$121,877.58	\$10,955	000097	E673	\$10,955	27	100%
98			652	3740	\$0.00	\$0	000098	E673	\$8,212	-	0%
103			652	3740	\$154,289.96	\$7,528	000103	E674	7,528	27	100%
108			652	3740	\$90,312.50	\$8,212	000108	E673	\$8,212	27	100%
111			652	3740	\$106,823.76	\$8,709	000111	E673	\$8,709	27	100%
115			652	3740	\$100,628.14	\$8,751	000115	E673	\$8,751	27	100%
122			652	3740	\$0.00	\$0	000122	E673	\$8,212	-	0%
124			652	3740	\$130,231.84	\$10,238	000124	E673	\$10,238	27	100%
125			652	3740	\$0.00	\$0	000125	E673	\$12,044	-	0%
129			652	3740	\$0.00	\$0	000129	E673	\$8,212	-	0%
131			652	3740	\$113,599.78	\$9,660	000131	E673	\$9,660	27	100%
133			652	3740	\$0.00	\$0	000133	E673	\$8,212	-	0%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay	Pay
										Periods Filled	Periods Filled %
134			652	3740	\$96,714.85	\$9,142	000134	E673	\$9,142	27	100%
136			652	3740	\$124,760.56	\$10,955	000136	E673	\$10,955	27	100%
138			652	3740	\$0.00	\$0	000138	E673	\$9,660	-	0%
146			652	3740	\$92,857.74	\$7,997	000146	E673	\$7,997	27	100%
147			652	3740	\$128,326.17	\$11,451	000147	E673	\$11,451	27	100%
148			652	3740	\$0.00	\$0	000148	E673	\$8,212	-	0%
152			652	3740	\$105,604.53	\$9,142	000152	E673	\$9,142	27	100%
153			652	3740	\$77,837.52	\$6,995	000153	E673	\$8,212	23	85%
155			652	3740	\$0.00	\$0	000155	E673	\$8,212	-	0%
157			652	3740	\$119,005.07	\$10,955	000157	E673	\$10,955	27	100%
161			652	3740	\$117,525.47	\$9,455	000161	E673	\$9,455	27	100%
163			652	3740	\$96,865.72	\$8,212	000163	E673	\$8,212	27	100%
165			652	3740	\$76,489.71	\$10,278	000165	E673	\$10,278	27	100%
167			652	3740	\$98,707.00	\$9,515	000167	E673	\$9,515	27	100%
169			652	3740	\$131,964.18	\$11,348	000169	E673	\$11,348	27	100%
170			652	3740	\$140,908.49	\$7,232	000170	E674	7,232	27	100%
179			652	3740	\$140,838.43	\$6,828	000179	E674	6,828	27	100%
181			652	3740	\$107,767.08	\$10,465	000181	E673	\$10,465	27	100%
185			652	3740	\$142,086.40	\$6,995	000185	E673	\$8,212	23	85%
187			652	3740	\$116,041.52	\$9,660	000187	E673	\$9,660	27	100%
191			652	3740	\$132,080.37	\$10,465	000191	E673	\$10,465	27	100%
195			652	3740	\$97,499.48	\$8,474	000195	E673	\$8,474	27	100%
203			652	3740	\$101,124.67	\$8,709	000203	E673	\$8,709	27	100%
211			652	3740	\$149,760.53	\$10,955	000211	E673	\$10,955	27	100%
212			652	3740	\$3,729.57	\$2,737	000212	E673	\$8,212	9	33%
214			652	3740	\$127,777.45	\$10,955	000214	E673	\$10,955	27	100%
224			652	3740	\$88,732.16	\$8,212	000224	E673	\$8,212	27	100%
228			652	3740	\$131,382.99	\$12,044	000228	E673	\$12,044	27	100%
230			652	3740	\$128,892.18	\$8,212	000230	E673	\$8,212	27	100%
231			652	3740	\$115,203.25	\$10,366	000231	E673	\$10,366	27	100%
233			652	3740	\$47,184.24	\$6,083	000233	E673	\$8,212	20	74%
234			652	3740	\$122,950.12	\$8,212	000234	E673	\$8,212	27	100%
240			652	3740	\$140,823.00	\$6,828	000240	E674	6,828	27	100%
242			652	3740	\$143,022.38	\$6,828	000242	E674	6,828	27	100%
244			652	3740	\$138,339.37	\$8,973	000244	E673	\$8,973	27	100%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay	Pay
										Periods Filled	Periods Filled %
245			652	3740	\$112,632.52	\$10,465	000245	E673	\$10,465	27	100%
250			652	3740	\$103,579.40	\$8,709	000250	E673	\$8,709	27	100%
251			652	3740	\$120,656.13	\$10,476	000251	E673	\$10,476	27	100%
252			652	3740	\$105,781.06	\$8,751	000252	E673	\$8,751	27	100%
254			652	3740	\$86,204.96	\$8,212	000254	E673	\$8,212	27	100%
257			652	3740	\$123,213.70	\$7,303	000257	E673	\$10,955	18	67%
258			652	3740	\$114,149.15	\$10,278	000258	E673	\$10,278	27	100%
259			652	3740	\$142,690.11	\$10,955	000259	E673	\$10,955	27	100%
260			652	3740	\$0.00	\$0	000260	E673	\$8,212	-	0%
269			652	3740	\$3,686.63	\$2,727	000269	E673	\$8,182	9	33%
270			652	3740	\$117,872.71	\$8,407	000270	E673	\$8,407	27	100%
272			652	3740	\$119,895.91	\$10,955	000272	E673	\$10,955	27	100%
285			652	3740	\$104,237.55	\$8,636	000285	E673	\$8,636	27	100%
286			652	3740	\$129,199.29	\$10,926	000286	E673	\$10,926	27	100%
287			652	3740	\$109,101.94	\$11,602	000287	E673	\$11,602	27	100%
288			652	3740	\$133,683.20	\$8,973	000288	E673	\$8,973	27	100%
291			652	3740	\$123,946.87	\$11,065	000291	E673	\$11,065	27	100%
292			652	3740	\$100,743.25	\$8,212	000292	E673	\$8,212	27	100%
294			652	3740	\$133,900.96	\$6,575	000294	E674	6,828	26	96%
310			652	3740	\$134,886.88	\$6,541	000310	E674	6,541	27	100%
315			652	3740	\$15,818.33	\$4,907	000315	E673	\$12,044	11	41%
317			652	3740	\$108,432.28	\$6,492	000317	E673	\$10,955	16	59%
318			652	3740	\$107,207.44	\$8,212	000318	E673	\$8,212	27	100%
322			652	3740	\$11,773.55	\$892	000322	E673	\$8,027	3	11%
324			652	3740	\$105,846.59	\$10,955	000324	E673	\$10,955	27	100%
325			652	3740	\$79,301.29	\$8,115	000325	E673	\$10,955	20	74%
326			652	3740	\$93,137.75	\$8,474	000326	E673	\$8,474	27	100%
329			652	3740	\$97,671.40	\$8,709	000329	E673	\$8,709	27	100%
330			652	3740	\$98,774.67	\$9,415	000330	E673	\$9,415	27	100%
331			652	3740	\$150,254.38	\$11,602	000331	E673	\$11,602	27	100%
333			652	3740	\$145,069.14	\$11,602	000333	E673	\$11,602	27	100%
337			652	3740	\$115,020.73	\$10,476	000337	E673	\$10,476	27	100%
338			652	3740	\$10,446.75	\$0	000338	E673	\$8,263	-	0%
342			652	3740	\$104,816.11	\$6,926	000342	E673	\$9,842	19	70%
343			652	3740	\$77,312.96	\$4,862	000343	E673	\$8,751	15	56%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay	Pay
										Periods Filled	Periods Filled %
		344	652	3740	\$43,250.17	\$2,790	000344	E673	\$9,415	8	30%
		349	652	3740	\$0.00	\$0	000349	E673	\$12,044	-	0%
		352	652	3740	\$153,107.72	\$5,992	000352	E674	5,992	27	100%
		362	652	3740	\$158,664.77	\$11,602	000362	E673	\$11,602	27	100%
		363	652	3740	\$144,008.71	\$6,828	000363	E674	6,828	27	100%
		364	652	3740	\$106,787.61	\$8,007	000364	E673	\$8,007	27	100%
		366	652	3740	\$6,353.36	\$3,041	000366	E673	\$8,212	10	37%
		367	652	3740	\$65,723.62	\$5,437	000367	E673	\$8,155	18	67%
		377	652	3740	\$110,686.33	\$11,152	000377	E673	\$12,044	25	93%
		381	652	3740	\$0.00	\$0	000381	E673	\$8,709	-	0%
		383	652	3740	\$98,787.16	\$8,474	000383	E673	\$8,474	27	100%
		398	652	3740	\$0.00	\$0	000398	E673	\$10,955	-	0%
		399	652	3740	\$91,279.12	\$9,332	000399	E673	\$10,955	23	85%
		403	652	3740	\$109,084.27	\$8,946	000403	E673	\$8,946	27	100%
		404	652	3740	\$82,644.26	\$10,476	000404	E673	\$10,476	27	100%
		410	652	3740	\$141,492.81	\$6,828	000410	E674	6,828	27	100%
		411	652	3740	\$136,625.65	\$6,828	000411	E674	6,828	27	100%
		414	652	3740	\$139,049.55	\$10,476	000414	E673	\$10,476	27	100%
		415	652	3740	\$0.00	\$0	000415	E673	\$8,407	-	0%
		423	652	3740	\$0.00	\$2,057	000423	E673	\$9,257	6	22%
		429	652	3740	\$0.00	\$0	000429	E673	\$8,263	-	0%
		430	652	3740	\$62,196.53	\$8,212	000430	E673	\$8,212	27	100%
		433	652	3740	\$114,963.68	\$11,567	000433	E673	\$11,567	27	100%
		436	652	3740	\$76,526.72	\$10,476	000436	E673	\$10,476	27	100%
		437	652	3740	\$91,890.08	\$5,628	000437	E673	\$7,997	19	70%
		501	652	3740	\$148,697.94	\$10,324	000501	E673	\$10,324	27	100%
		506	652	3740	\$27,903.58	\$4,956	000506	E673	\$7,872	17	63%
		509	652	3740	\$138,852.45	\$12,044	000509	E673	\$12,044	27	100%
		550	652	3740	\$0.00	\$0	000550	E673	\$11,471	-	0%
		551	652	3740	\$0.00	\$0	000551	E673	\$8,212	-	0%
		552	652	3740	\$53,151.84	\$3,650	000552	E673	\$8,212	12	44%
		553	652	3740	\$108,951.32	\$9,515	000553	E673	\$9,515	27	100%
		599	652	3740	\$0.00	\$1,784	000599	E673	\$8,027	6	22%
		602	652	3740	\$34,267.03	\$5,544	000602	E673	\$7,878	19	70%
		603	652	3740	\$40,332.69	\$5,171	000603	E673	\$8,212	17	63%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay	Pay
										Periods Filled	Periods Filled %
604			652	3740	\$106,180.08	\$8,709	000604	E673	\$8,709	27	100%
605			652	3740	\$114,585.41	\$10,238	000605	E673	\$10,238	27	100%
606			652	3740	\$135,351.02	\$6,828	000606	E674	6,828	27	100%
608			652	3740	\$0.00	\$0	000608	E673	\$9,965	-	0%
609			652	3740	\$76,640.52	\$8,212	000609	E673	\$8,212	27	100%
611			652	3740	\$50,491.35	\$0	000611	E673	\$10,955	-	0%
612			652	3740	\$97,289.51	\$8,263	000612	E673	\$8,263	27	100%
614			652	3740	\$72,609.47	\$5,455	000614	E673	\$8,182	18	67%
618			652	3740	\$48,841.11	\$6,083	000618	E673	\$8,212	20	74%
620			652	3740	\$97,707.70	\$8,407	000620	E673	\$8,407	27	100%
621			652	3740	\$94,635.40	\$8,212	000621	E673	\$8,212	27	100%
627			652	3740	\$102,883.87	\$10,417	000627	E673	\$10,417	27	100%
701			652	3740	\$127,727.59	\$12,044	000701	E673	\$12,044	27	100%
704			652	3740	\$12,717.57	\$1,521	000704	E673	\$8,212	5	19%
708			652	3740	\$0.00	\$0	000708	E673	\$10,476	-	0%
710			652	3740	\$120,851.59	\$11,598	000710	E673	\$12,044	26	96%
713			652	3740	\$131,131.79	\$11,602	000713	E673	\$11,602	27	100%
714			652	3740	\$155,988.23	\$5,692	000714	E674	5,692	27	100%
715			652	3740	\$163,099.26	\$7,232	000715	E674	7,232	27	100%
720			652	3740	\$112,335.85	\$9,633	000720	E673	\$9,633	27	100%
721			652	3740	\$162,285.07	\$5,403	000721	E674	5,403	27	100%
802			652	3740	\$110,953.22	\$10,955	000802	E673	\$10,955	27	100%
803			652	3740	\$113,545.77	\$8,212	000803	E673	\$8,212	27	100%
809			652	3740	\$101,949.97	\$10,955	000809	E673	\$10,955	27	100%
810			652	3740	\$127,490.99	\$10,955	000810	E673	\$10,955	27	100%
811			652	3740	\$133,853.20	\$11,602	000811	E673	\$11,602	27	100%
813			652	3740	\$93,561.29	\$8,925	000813	E673	\$8,925	27	100%
817			652	3740	\$26,736.39	\$5,475	000817	E673	\$8,212	18	67%
818			652	3740	\$0.00	\$0	000818	E673	\$8,263	-	0%
819			652	3740	\$0.00	\$0	000819	E673	\$10,955	-	0%
820			652	3740	\$34,899.13	\$5,171	000820	E673	\$8,212	17	63%
821			652	3740	\$105,012.82	\$9,415	000821	E673	\$9,415	27	100%
853			652	3740	\$108,235.95	\$8,263	000853	E673	\$8,263	27	100%
905			652	3740	\$0.00	\$0	000905	E673	\$9,660	-	0%
911			652	3740	\$12,268.87	\$3,251	000911	E673	\$7,979	11	41%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request
		939	652	3740	\$79,994.35	\$8,921
		975	652	3740	\$116,672.99	\$10,417
		976	652	3740	\$117,458.96	\$10,907
		982	652	3740	\$61,221.07	\$5,171
		1000	652	3740	\$0.00	\$0
		1001	652	3740	\$122,335.62	\$10,955
		1002	652	3740	\$92,539.01	\$8,212
		1200	652	3740	\$99,909.31	\$8,212
		1201	652	3740	\$107,384.12	\$8,636
		1202	652	3740	\$105,003.51	\$0
		1203	652	3740	\$94,759.02	\$8,212
		1204	652	3740	\$0.00	\$0
		1205	652	3740	\$88,237.07	\$8,212
		1206	652	3740	\$119,389.09	\$10,955
		1208	652	3740	\$82,886.07	\$8,096
		1209	652	3740	\$61,171.11	\$3,041
		1210	652	3740	\$111,124.66	\$9,975
		1211	652	3740	\$114,249.05	\$10,417
		1212	652	3740	\$129,387.52	\$10,955
		1213	652	3740	\$0.00	\$0
		1214	652	3740	\$10,496.26	\$992
		1215	652	3740	\$101,353.21	\$8,212
		1217	652	3740	\$109,002.78	\$9,883
		1218	652	3740	\$0.00	\$0
		1221	652	3740	\$0.00	\$0
		1222	652	3740	\$0.00	\$0
		1223	652	3740	\$91,788.60	\$6,492
		1224	652	3740	\$0.00	\$0
		1225	652	3740	\$0.00	\$0
		1227	652	3740	\$102,625.61	\$8,263
		1228	652	3740	\$122,241.46	\$12,758
		1229	652	3740	\$105,439.66	\$8,751
		1230	652	3740	\$0.00	\$0
		1231	652	3740	\$123,233.54	\$10,955
		1232	652	3740	\$101,404.28	\$8,263

PCN	DU	Budget	Pay Periods Filled	Pay Periods Filled %
000939	E673	\$12,044	20	74%
000975	E673	\$10,417	27	100%
000976	E673	\$10,907	27	100%
000982	E673	\$8,212	17	63%
001000	E673	\$7,878	-	0%
001001	E673	\$10,955	27	100%
001002	E673	\$8,212	27	100%
001200	E673	\$8,212	27	100%
001201	E673	\$8,636	27	100%
001202	E673	\$8,212	-	0%
001203	E673	\$8,212	27	100%
001204	E673	\$8,407	-	0%
001205	E673	\$8,212	27	100%
001206	E673	\$10,955	27	100%
001208	E673	\$8,407	26	96%
001209	E673	\$8,212	10	37%
001210	E673	\$9,975	27	100%
001211	E673	\$10,417	27	100%
001212	E673	\$10,955	27	100%
001213	E673	\$8,212	-	0%
001214	E673	\$8,925	3	11%
001215	E673	\$8,212	27	100%
001217	E673	\$9,883	27	100%
001218	E673	\$10,073	-	0%
001221	E673	\$8,212	-	0%
001222	E673	\$8,212	-	0%
001223	E673	\$10,955	16	59%
001224	E673	\$8,212	-	0%
001225	E673	\$9,600	-	0%
001227	E673	\$8,263	27	100%
001228	E673	\$12,758	27	100%
001229	E673	\$8,751	27	100%
001230	E673	\$8,212	-	0%
001231	E673	\$10,955	27	100%
001232	E673	\$8,263	27	100%

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request		PCN	DU	Budget	Pay Periods Filled	Pay Periods Filled %
1233		652	3740	\$129,666.90	\$8,973	001233	E673	\$8,973	27	100%		
1234		652	3740	\$42,747.70	\$6,245	001234	E673	\$12,044	14	52%		
1235		652	3740	\$0.00	\$0	001235	E673	\$0	-	0%		
1236		652	3740	\$86,415.11	\$5,217	001236	E673	\$8,286	17	63%		
1238		652	3740	\$14,720.35	\$1,275	001238	E673	\$11,471	3	11%		
1239		652	3740	\$0.00	\$0	001239	E673	\$8,407	-	0%		
1240		652	3740	\$89,946.81	\$8,407	001240	E673	\$8,407	27	100%		
1241		652	3740	\$0.00	\$0	001241	E673	\$0	-	0%		
1321		652	3740	\$118,912.31	\$10,955	001321	E673	\$10,955	27	100%		
1322		652	3740	\$119,858.79	\$9,799	001322	E673	\$9,799	27	100%		
1323		652	3740	\$0.00	\$0	001323	E673	\$9,515	-	0%		
1324		652	3740	\$112,196.63	\$9,842	001324	E673	\$9,842	27	100%		
1328		652	3740	\$101,283.69	\$8,407	001328	E673	\$8,407	27	100%		
1329		652	3740	\$11,940.12	\$3,278	001329	E673	\$8,046	11	41%		
1330		652	3740	\$94,714.06	\$8,407	001330	E673	\$8,407	27	100%		
1331		652	3740	\$73,744.60	\$7,908	001331	E673	\$8,212	26	96%		
1332		652	3740	\$87,982.65	\$7,908	001332	E673	\$8,212	26	96%		
1334		652	3740	\$124,342.49	\$8,521	001334	E673	\$10,955	21	78%		
1335		652	3740	\$91,322.77	\$7,997	001335	E673	\$7,997	27	100%		
1336		652	3740	\$15,874.96	\$1,217	001336	E673	\$8,212	4	15%		
1337		652	3740	\$93,630.42	\$7,997	001337	E673	\$7,997	27	100%		
1338		652	3740	\$31,163.59	\$5,171	001338	E673	\$8,212	17	63%		
1339		652	3740	\$105,530.30	\$9,883	001339	E673	\$9,883	27	100%		
1340		652	3740	\$94,106.65	\$8,212	001340	E673	\$8,212	27	100%		
1341		652	3740	\$75,932.23	\$8,212	001341	E673	\$8,212	27	100%		
1342		652	3740	\$117,346.16	\$9,883	001342	E673	\$9,883	27	100%		
1345		652	3740	\$0.00	\$0	001345	E673	\$8,212	-	0%		
1346		652	3740	\$112,356.56	\$10,324	001346	E673	\$10,324	27	100%		
1347		652	3740	\$130,137.43	\$8,475	001347	E673	\$12,044	19	70%		
1348		652	3740	\$92,853.82	\$10,322	001348	E673	\$12,668	22	81%		
1349		652	3740	\$123,680.04	\$11,098	001349	E673	\$11,098	27	100%		
1350		652	3740	\$157,526.95	\$6,069	001350	E674	6,828	24	89%		
1354		652	3740	\$0.00	\$0	001354	E673	\$9,883	-	0%		
1355		652	3740	\$109,305.79	\$10,762	001355	E673	\$10,762	27	100%		
1356		652	3740	\$105,847.77	\$8,407	001356	E673	\$8,407	27	100%		

Last Name	First Name	Posn #	Home Age	Home Org	Amount	Request	PCN	DU	Budget	Pay Periods Filled	Pay Periods Filled %
1357			652	3740	\$48,841.10	\$6,083	001357	E673	\$8,212	20	74%
1358			652	3740	\$96,283.14	\$8,212	001358	E673	\$8,212	27	100%
1359			652	3740	\$98,517.46	\$9,415	001359	E673	\$9,415	27	100%
1360			652	3740	\$0.00	\$0	001360	E673	\$8,212	-	0%
1361			652	3740	\$103,438.68	\$9,472	001361	E673	\$9,472	27	100%
1362			652	3740	\$0.00	\$0	001362	E673	\$8,212	-	0%
1365			652	3740	\$126,041.81	\$12,044	001365	E673	\$12,044	27	100%
1403			652	3740	\$0.00	\$0	001403	E673	\$8,212	-	0%
1404			652	3740	\$0.00	\$0	001404	E673	\$8,286	-	0%
1405			652	3740	\$0.00	\$0	001405	E673	\$9,842	-	0%
1406			652	3740	\$48,240.01	\$6,083	001406	E673	\$8,212	20	74%
1407			652	3740	\$89,477.06	\$8,212	001407	E673	\$8,212	27	100%
1408			652	3740	\$100,314.37	\$9,472	001408	E673	\$9,472	27	100%
1409			652	3740	\$115,731.64	\$9,842	001409	E673	\$9,842	27	100%
1410			652	3740	\$102,878.69	\$8,597	001410	E673	\$8,597	27	100%
1411			652	3740	\$96,012.24	\$8,263	001411	E673	\$8,263	27	100%
1413			652	3740	\$76,213.88	\$5,779	001413	E673	\$8,212	19	70%
1414			652	3740	\$99,012.46	\$9,515	001414	E673	\$9,515	27	100%
1415			652	3740	\$102,101.85	\$8,709	001415	E673	\$8,709	27	100%
1416			652	3740	\$0.00	\$0	001416	E673	\$11,602	-	0%
1417			652	3740	\$118,014.93	\$8,742	001417	E673	\$8,742	27	100%
1418			652	3740	\$6,701.57	\$4,015	001418	E673	\$12,044	9	33%
1424			652	3740	\$38,619.52	\$5,455	001424	E673	\$8,182	18	67%
1425			652	3740	\$76,263.46	\$8,212	001425	E673	\$8,212	27	100%
1430			652	3740	\$0.00	\$0	001430	E673	\$9,472	-	0%
1431			652	3740	\$92,205.22	\$8,407	001431	E673	\$8,407	27	100%
1432			652	3740	\$1,934.80	\$1,217	001432	E673	\$8,212	4	15%
1437			652	3740	\$5,746.37	\$4,461	001437	E673	\$12,044	10	37%
1445			652	3740	\$128,333.95	\$12,044	001445	E673	\$12,044	27	100%
1617			652	3740	\$105,248.91	\$9,883	001617	E673	\$9,883	27	100%
1618			652	3740	\$119,756.42	\$10,955	001618	E673	\$10,955	27	100%
2000			652	3740	\$49,849.16	\$4,562	002000	E673	\$8,212	15	56%
2001			652	3740	\$0.00	\$0	002001	E673	\$8,212	-	0%
2002			652	3740	\$10,079.80	\$912	002002	E673	\$8,212	3	11%
2003			652	3740	\$65,679.88	\$5,779	002003	E673	\$8,212	19	70%

Last Name First Name Posn # 2004 Home Age 652 Home Org 3740 Amount \$0.00

Request \$0

PCN 002004 DU E673

Budget \$8,212

Pay Periods Filled - Pay Periods Filled % 0%

LEASES SUMMARY

BOE #	LESSEE		LESSOR	AMOUNT
1.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF CHILD AND FAMILY SERVICES		CHARLES F BAKER	\$383,689
	This is an amendment.			
		Term of Lease:	02/01/2023 – 01/31/2028	Located in Fallon
2.	DEPARTMENT OF HEALTH AND HUMAN SERVICES- DIVISION OF PUBLIC HEALTH AND BEHAVIOR HEALTH, RURAL CLINICS		MARIANNE & CHARLES LAKAMP	\$319,767
	This is an amendment.			
		Term of Lease:	09/01/2024 – 08/31/2027	Located in Gardnerville
3.	DEPARTMENT OF PUBLIC SAFETY- HIGHWAY PATROL DIVISION		3130 FAIRVIEW, LLC	\$133,200
	This is an extension of an existing lease.			
		Term of Lease:	07/01/2025 – 06/30/2030	Located in Fernley
4.	DEPARTMENT OF SENTENCING POLICY		HUB GROUP, LLC	\$137,333
	This is a relocation.			
		Term of Lease:	05/01/2025 – 04/30/2030	Located in Carson City
5.	OFFICE OF THE ATTORNEY GENERAL		9790 GATEWAY, LLC DBA BRIDGEWOOD NORTH ASSOCIATES	\$1,976,916
	This is a relocation.			
		Term of Lease:	08/01/2025 – 07/31/2032	Located in Reno
6.	OFFICE OF THE MILITARY- NEVADA ARMY NATIONAL GUARD		CARSON CITY NV I SGF, LLC	\$103,788
	This is an extension of an existing lease.			
		Term of Lease:	01/01/2025 – 12/31/2027	Located in Carson City
7.	OFFICE OF THE MILITARY-NEVADA ARMY NATIONAL GUARD		CARSON CITY NV I SGF, LLC	\$542,569
	This is an extension of an existing lease.			
		Term of Lease:	01/01/2025 – 12/31/2027	Located in Carson City

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Child and Family Services 4126 Technology Way, 3rd Floor Carson City, Nevada 89706 Contact: Sharon Knigge T: 775 684-7952 E: sharon.knigge@dcfs.nv.gov						
Remarks:	This is a lease amendment to reflect new ownership from Ucelli Properties to Charles F Baker. Lease terms and rate were not affected.						
Exceptions/Special notes:							
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	Charles F Baker						
4. Address of Lessor:	1605 Westergard Rd Lovelock, Nevada 89419						
5. Property contact:	Charles F Baker T: (707)642-9903 E: rvstorage4u@aol.com						
6. Address of Lease property:	1735 Kaiser Street Fallon, Nevada 89407						
a. Square Footage:	☐ Rentable ☒ Usable 5 095						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Actual cost per square foot
	\$ 6,193.37	12	\$ 74,320.44	February 1, 2023 - January 31, 2024	\$0.00	\$0.00	\$1.22
	\$ 6,368.75	12	\$ 76,425.00	February 1, 2024 - January 31, 2026	\$0.00	\$0.00	\$1.25
3%	\$ 6,368.75	12	\$ 76,425.00	February 1, 2025 - January 31, 2026	\$0.00	\$0.00	\$1.25
2%	\$ 6,521.60	12	\$ 78,259.20	February 1, 2026 - January 31, 2027	\$0.00	\$0.00	\$1.28
0%	\$ 6,521.60	12	\$ 78,259.20	February 1, 2027 - January 31, 2028	\$0.00	\$0.00	\$1.28
c. Total Lease Consideration:	60		\$ 383,688.84				
d. Total Improvement Cost:				\$ 0.00			
e. Option to renew:	☒ Yes ☐ No		Renewal terms:		One (1) Identical Term		
f. Holdover notice:	# of Days required 30		Holdover terms:		5% - 90 Days		
g. Term:	5 Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant						
k. Repairs:	Major: ☐ Landlord ☐ Tenant Minor: ☐ Landlord ☐ Tenant						
l. Comparable Area Market Rate Average:	\$ 1.38						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3229						
7. This lease constitutes:	☐ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☐ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☒ Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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

RECEIVED

MAR 18 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Rev. 08/08/2023

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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

Marla McDade Williams 12/13/2024
Authorized Agency Signature Date

20

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☒ YES	☐ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
**If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☐ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	sole proprietor	
f. Nevada Business ID Number:	NV20243249915	Exp: 12/31/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T32017109	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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

[Signature]
Authorized Signature
Public Works Division

3.3.25
Date

GM

For Board of Examiners

☒ YES

☐ NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Public and Behavioral Health, Rural Clinics 4150 Technology Way, Third Floor Carson City, Nevada 89706 Contact: Becky McCabe T: 775.684.4058 E: bmccabe@health.nv.gov						
Remarks:	This is a lease amendment to reflect the change of ownership from Nakoma Investments to Marianne and Charles LaKamp. No lease terms have been changed.						
Exceptions/Special notes:							
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	Marianne & Charles LaKamp						
4. Address of Lessor:	13560 Terrace Drive Sonora, California 95370						
5. Property contact:	Alex Lauppe, Reno Property Management T: (775)329-7070						
6. Address of Lease property:	1528 Highway 395, Suite 100 Gardnerville, Nevada 89410						
a. Square Footage:	☐ Rentable ☒ Usable 5,280						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Actual cost per square foot
#REF!	\$ 8,759.20	12	\$ 105,110.40	September 1, 2024 - August 31, 2025	\$0.00	\$0.00	\$1.66
2%	\$ 8,917.60	12	\$ 107,011.20	September 1, 2025 - August 31, 2026	\$0.00	\$0.00	\$1.69
1%	\$ 8,970.40	12	\$ 107,644.80	September 1, 2026 - August 31, 2027	\$0.00	\$0.00	\$1.70
c. Total Lease Consideration:	36		\$ 319,766.40				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No		Renewal terms: One (1) Identical Term				
f. Holdover notice:	# of Days required 30		Holdover terms: 5%/90				
g. Term:	Original Five (5) Year Lease						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant						
k. Repairs:	Major: ☒ Landlord ☐ Tenant		Minor: ☒ Landlord ☐ Tenant				
l. Comparable Area Market Rate Average:							
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3648						
7. This lease constitutes:	☐ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☐ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☐ Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

RECEIVED

APR 01 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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



03/13/2025

Authorized Agency Signature

Date

13

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☐ YES	☒ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☐	INC ☐
e. Ownership Type (Domestic, Foreign, Government, etc.):	CORP ☐	LP ☐
f. Nevada Business ID Number:	NV20243230779	Exp: 11/30/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T32016304	
j. Is this an Arms Length Transaction (No Conflict of Interest)?	☒ YES	☐ NO
**If No, explain....		

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

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

Authorized Signature
Public Works Division

Date

gm

For Board of Examiners

☒ YES

☐ NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Public Safety Highway Patrol Division 555 Wright Way Carson City, Nevada 89701 Kasen Commesser T: 775.684.4869 E: k.commesser@dps.state.nv.us						
Remarks:	This is a five (5) year renewal for the Department of Public Safety, Highway Patrol Division. Terms have been approved by Director Grimmer. No tenant improvements are being requested at this time.						
Exceptions/Special notes:	NHP will continue to provide janitorial services.						
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	3130 Fairview, LLC						
4. Address of Lessor:	704 Canyon Road Boulder City, Nevada 89005						
5. Property contact:	R. Poltl and Associates, Inc. Shopping Center Development, Leasing and Management 1328 Madonna Road San Luis Obispo, California 93405 Randall P. Poltl T: 805.781.9100, ext. 14 F: 805.781.9101 E: randv@rpolti.com						
6. Address of Lease property:	1380 US Highway 95A North, Suite 2 Fernley, Nevada 89408						
a. Square Footage:	☐ Rentable ☒ Usable 1,200						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Actual cost per square foot
	\$ 2,100.00	12	\$ 25,200.00	July 1, 2025 - June 30, 2026	\$0.00	\$0.00	\$1.75
3%	\$ 2,160.00	12	\$ 25,920.00	July 1, 2026 - June 30, 2027	\$0.00	\$0.00	\$1.80
3%	\$ 2,220.00	12	\$ 26,640.00	July 1, 2027 - June 30, 2028	\$0.00	\$0.00	\$1.85
3%	\$ 2,280.00	12	\$ 27,360.00	July 1, 2028 - June 30, 2029	\$0.00	\$0.00	\$1.90
3%	\$ 2,340.00	12	\$ 28,080.00	July 1, 2029 - June 30, 2030	\$0.00	\$0.00	\$1.95
c. Total Lease Consideration:	60		\$ 133,200.00				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No		Renewal terms:		One (1) Identical Term		
f. Holdover notice:	# of Days required 30		Holdover terms:				
g. Term:	Five (5) Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☐ Landlord ☒ Tenant ☐ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☒ Other (see special notes)						
k. Repairs:	Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant						
l. Comparable Area Market Rate Average:	\$1.65						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	4713						
7. This lease constitutes:	☒ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☐ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☐ Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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

Pat J. Conroy 4-3-2025 
Authorized Agency Signature Date

6

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☐ YES	☐ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☒ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Foreign Limited-Liability Company	
f. Nevada Business ID Number:	NV20222490746	Exp: 6/30/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T27044888	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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

04/03/2025
Authorized Signature Date
Public Works Division
ZT
For Board of Examiners ☒ YES ☐ NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Sentencing Policy 625 Fairview Drive Suite 107-109 Carson City, Nevada 89701 Jorja Powers T: 775.684.7379 E: joriapowers@ndsp.nv.gov						
Remarks:	This is a full service five (5) year lease renewal for the Department of Sentencing Policy. Lease has been negotiated at \$1.50 a SF with a 3% increase every other year. Terms have been approved by Director Grimmer. Lessor will be patching walls around thermostats, clean windows, carpet, and repair blinds.						
Exceptions/Special notes:							
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	Hub Group, LLC						
4. Address of Lessor:	c/o John Uhart 301 West Washington Street, Suite 1 Carson City, Nevada 89701						
5. Property contact:	John Uhart T: 775.884.1896 E: john@nvcg.us						
6. Address of Lease property:	625 Fairview Drive, Suites 107-109 Carson City, Nevada 89701						
a. Square Footage:	☐ Rentable ☐ Usable 1,484						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	improvement cost per square foot	Base Rent cost per square foot	Approx. cost per square foot
	\$ 2,226.00	12	\$ 26,712.00	May 1, 2025 - April 30, 2026	\$0.00	\$0.00	\$1.50
0%	\$ 2,226.00	12	\$ 26,712.00	May 1, 2026 - April 30, 2027	\$0.00	\$0.00	\$1.50
3%	\$ 2,303.91	12	\$ 27,646.92	May 1, 2027 - April 30, 2028	\$0.00	\$0.00	\$1.55
0%	\$ 2,303.91	12	\$ 27,646.92	May 1, 2028 - April 30, 2029	\$0.00	\$0.00	\$1.55
3%	\$ 2,384.54	12	\$ 28,614.48	May 1, 2029 - April 30, 2030	\$0.00	\$0.00	\$1.61
c. Total Lease Consideration:		60	\$ 137,332.32				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No Renewal terms: One (1) Identical Term						
f. Holdover notice:	# of Days required 30 Holdover terms: 5%/90						
g. Term:	Five (5) Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant ☐ 3 day ☒ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)						
k. Repairs:	Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant						
l. Comparable Area Market Rate Average:	\$1.59						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1010						
7. This lease constitutes:	☒ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☐ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☐ Other						
a. Estimated Expenses:	Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00						

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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


 03/27/2025
 Authorized Agency Signature Date

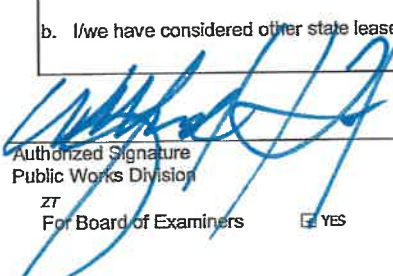
For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☒ YES	☐ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
**If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☒ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20141709685	Exp: 11/30/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T29042890	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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


 3.27.25
 Authorized Signature Date
 Public Works Division
 ZT For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.
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For Budget Division Use Only	
Reviewed by:	SP. AD. 4/11/22
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Office of the Attorney General 100 North Carson Street Carson City, Nevada 89701 Jessica Hoban T: 775.684.1116 E: jhoban@ag.nv.gov						
Remarks:	This is a new 7 year full-service lease for the Office of the Attorney General. Lease has been approved by Director Joy Grimmer. Lessor is covering the cost of the following TIs new carpet, paint, demolition, and construction of multiple private offices. RTW will cover the cost of moving and a small amount of data.						
Exceptions/Special notes:							
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	9790 Gateway, LLC, a Nevada Limited Liability Company dba Bridgewood North Associates						
4. Address of Lessor:	13424 Chalk Hill Road Healdsburg, California 95448						
5. Property contact:	Basin Street Properties 300 East 2nd Street, Suite 1401 Reno, Nevada 89509 Scott Stranzl T: 775-954-2900 E: scott@basin-street.com						
6. Address of Lease property:	9790 Gateway Drive, Suite 100 Reno, Nevada 89521						
a. Square Footage:	☐ Rentable ☒ Usable 10,400						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Approximate cost per square foot
	\$ 21,500.00	12	\$ 258,000.00	August 1, 2025 - July 31, 2026	\$0.00	\$0.00	\$2.07
3%	\$ 22,145.00	12	\$ 265,740.00	August 1, 2026 - July 31, 2027	\$0.00	\$0.00	\$2.13
3%	\$ 22,809.35	12	\$ 273,712.20	August 1, 2027 - July 31, 2028	\$0.00	\$0.00	\$2.19
3%	\$ 23,493.63	12	\$ 281,923.56	August 1, 2028 - July 31, 2029	\$0.00	\$0.00	\$2.26
3%	\$ 24,198.44	12	\$ 290,381.28	August 1, 2029 - July 31, 2030	\$0.00	\$0.00	\$2.33
3%	\$ 24,924.39	12	\$ 299,092.68	August 1, 2030 - July 31, 2031	\$0.00	\$0.00	\$2.40
3%	\$ 25,672.12	12	\$ 308,065.44	August 1, 2031 - July 31, 2032	\$0.00	\$0.00	\$2.47
c. Total Lease Consideration:	84	\$	1,976,915.16				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No		365	Renewal terms:	One (1) Identical Term		
f. Holdover notice:	# of Days required		30	Holdover terms:	5%/90		
g. Term:	Seven (7) Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant ☐ 3 day ☒ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)						
k. Repairs:	Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant						
l. Comparable Area Market Rate Average:	\$2.19						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	1030, 1033, 1038, 1031, 1047						
7. This lease constitutes:	☐ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☒ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☐ Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

STATEWIDE LEASE INFORMATION

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

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

Yes ☒ No ☐ Dec Unit _____

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

 4/11/25
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☐ YES	☒ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
**If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☒ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Domestic	
f. Nevada Business ID Number:	NV20151074145	Exp: 2/28/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T27034489	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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

 for Wilfred J. Lewis 04/11/2025
Authorized Signature Date
Public Works Division
For Board of Examiners ☒ YES ☐ NO

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Office of the Military Nevada Army National Guard 2460 Fairview Drive Carson City, Nevada 89701 Devin Earl T: 775.887.7280 E: devin.m.earl.nfg@army.mil						
Remarks:	This is a long term lease taking place of a current month-to-month agreement. Terms have been approved by Director Grimmer. No tenant improvements are needed at this time.						
Exceptions/Special notes:	Please note the additional 12,000 SF of lot space does not have comp data to include.						
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	Carson City I NV SGF, LLC ✓						
4. Address of Lessor:	One North Wacker Drive, Suite 4025, Chicago, IL 60606 Attn: Asset Management						
5. Property contact:	Nicolette Dixon T: (775) 954-0106 E: nicolette.dixon@cushwake.com						
6. Address of Lease property:	1070 East William Street (Warehouse) Carson City, Nevada 89701						
a. Square Footage:	☐ Rentable ☒ Usable 3,100 SF of Warehouse space and 12,000 SF of fenced yard						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvem ent cost per square foot	Base Rent cost per square foot	Actual cost per square foot
	\$ 2,790.00	12	\$ 33,480.00	January 1, 2025 - December 31, 2025	\$0.00	\$0.00	\$0.90
3%	\$ 2,883.00	12	\$ 34,596.00	January 1, 2026 - December 31, 2026	\$0.00	\$0.00	\$0.93
3%	\$ 2,976.00	12	\$ 35,712.00	January 1, 2027 - December 31, 2027	\$0.00	\$0.00	\$0.96
c. Total Lease Consideration:	36		\$ 103,788.00				
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No		Renewal terms:		One identical term		
f. Holdover notice:	# of Days required		Holdover terms:		5%/90		
g. Term:	Three (3) Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant		☐ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☐ Other (see special notes)				
k. Repairs:	Major: ☒ Landlord ☐ Tenant		Minor: ☒ Landlord ☐ Tenant				
l. Comparable Area Market Rate Average:	\$0.75						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3650						

7. This lease constitutes:
- ☒ An extension of an existing lease
 - ☐ An addition to current facilities (requires estimated expenses)
 - ☐ A relocation (requires estimated expenses)
 - ☐ A new location (requires estimated expenses)
 - ☐ Remodeling only
 - ☐ Other

a. Estimated Expenses: Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00

RECEIVED

MAR 18 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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

Cheryl Tyler

3/3/2025

Authorized Agency Signature

Date

Page 1 of 2

Rev. 08/08/2023

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☒ YES	☐ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☒ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Foreign	
f. Nevada Business ID Number:	NV20212071834	Exp: 4/30/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T32011479	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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

Authorized Signature
Public Works Division

ZT

For Board of Examiners

Date

3.3.25

☒ YES☐ NO

Joe Lombardo
Governor



Joy Grimmer
Director

Bob Ragar
Deputy Director

Wilfred J. Lewis, Jr.
Administrator

Carson City Office:
680 W. Nye Ln, Suite 103
Carson City, Nevada 89703
Phone: (775) 684-4141

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

Las Vegas Office:
7115 Amigo Street, Suite 100
Las Vegas, NV 89119
Phone: (702) 486-5115

Date: March 14, 2025

To: Lesley Volkov, Budget Analyst

From: Zuly Terrazas, Public Works Division, Leasing Services
z.terrazas@admin.nv.gov

Subject: Retroactive Memo for placement on May's 2025 BOE agenda

Projected BOE Date: May 13th, 2025

BOE Deadline Date: April 8th, 2025

Lessor: Carson City NV | SGF, LLC

Tenant: Office of the Military, Nevada Army National Guard

Property Location: 1070 East William Street, Carson City, Nevada 89701

This memo is a clarification for a retroactive start date of January 1, for the lease referenced above, which houses the Office of the Military, Nevada Army National Guard.

Per direction from leadership the previous lease agreement was allowed to go to a month-to-month agreement and was recently approved to be renewed for new a long-term lease. Due to an unanticipated delay with both legal teams not agreeing to language this created a delay for submittal to BOE prior to the January 1st start date.

This lease is for placement on the May 13th Board of Examiners meeting.

Thank You,

Zuly Terrazas

RECEIVED

MAR 18 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

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

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

STATEWIDE LEASE INFORMATION

1. Agency:	Office of the Military Nevada Army National Guard 2460 Fairview Drive Carson City, Nevada 89701 Devin Earl T: 775.887.7280 E: devin.m.earl.nfg@army.mil						
Remarks:	This is a long term lease to take over a month-to-month agreement. Comps in the area are limited due to low inventory. Terms have been approved by Director Grimmer. No tenant improvements are needed at this time.						
Exceptions/Special notes:							
2. Lessee:	Department of Administration, Public Works Division, Buildings and Grounds						
3. Name of Lessor:	Carson City NV I SGF, LLC						
4. Address of Lessor:	One North Wacker Drive, Suite 4025, Chicago, IL 60606 Attn: Asset Management						
5. Property contact:	Nicolette Dixon T: (775) 954-0106 E: nicollette.dixon@cushwake.com						
6. Address of Lease property:	1050 East William Street, Suite 100 (Office) Carson City, Nevada 89701						
a. Square Footage:	☐ Rentable ☒ Usable 10,115						
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Improvement cost per square foot	Base Rent cost per square foot	Actual cost per square foot
	\$ 14,666.75	12	\$ 176,001.00	January 1, 2025 - December 31, 2025	\$0.00	\$0.00	\$1.45
3%	\$ 15,071.35	12	\$ 180,856.20	January 1, 2026 - December 31, 2026	\$0.00	\$0.00	\$1.49
3%	\$ 15,475.95	12	\$ 185,711.40	January 1, 2027 - December 31, 2027	\$0.00	\$0.00	\$1.53
c. Total Lease Consideration:	36			\$ 542,568.60			
d. Total Improvement Cost:					\$0.00		
e. Option to renew:	☒ Yes ☐ No		Renewal terms:		One Identical Term		
f. Holdover notice:	30		Holdover terms:		5%/90		
g. Term:	Three (3) Years						
h. Pass-thrus/CAM/Taxes	☒ Landlord ☐ Tenant						
i. Utilities:	☒ Landlord ☐ Tenant						
j. Janitorial:	☒ Landlord ☐ Tenant						
k. Repairs:	Major: ☒ Landlord ☐ Tenant		Minor: ☒ Landlord ☐ Tenant				
l. Comparable Area Market Rate Average:	\$1.43						
m. Specific termination clause in lease:	Breach/Default lack of funding						
n. Lease will be paid for by Agency Budget Account Number:	3650						
7. This lease constitutes:	☒ An extension of an existing lease ☐ An addition to current facilities (requires estimated expenses) ☐ A relocation (requires estimated expenses) ☐ A new location (requires estimated expenses) ☐ Remodeling only ☐ Other						
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00		

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MAR 18 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

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

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

Yes _____ No _____ Dec Unit _____

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

Cheryl Tyler

3/3/2025

Authorized Agency Signature

Date

Page 1 of 2

Rev. 08/08/2023

For Public Works Information:

8. State of Nevada Business License Information:

a. Is the Lessor a Nevada based business?	☒ YES	☐ NO
b. Is the Lessor Exempt from obtaining a Business License?	☐ YES	☒ NO
*If Yes, explain....		
c. Does the Lessor have a current Nevada State Business License?	☒ YES	☐ NO
**If No, explain....		
d. The Lessor is registered with the Nevada Secretary of State's Office as a:	LLC ☒ INC ☐ CORP ☐ LP ☐	
e. Ownership Type (Domestic, Foreign, Government, etc.):	Foreign	
f. Nevada Business ID Number:	NV20212071834	Exp: 4/30/2025
g. Is the Lessor's Name the same as the Legal Entity Name?	☒ YES	☐ NO
**If No, explain....		
h. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	☒ YES	☐ NO
i. State of Nevada Vendor number:	T32011479	
j. Is this an Arms Length Transaction (No Conflict of Interest)	☒ YES	☐ NO
**If No, explain....		

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

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

Authorized Signature
Public Works Division

Date

ZT

For Board of Examiners

☒ YES

☐ NO

Joe Lombardo
Governor



Joy Grimmer
Director

Bob Ragar
Deputy Director

Wilfred J. Lewis, Jr.
Administrator

Carson City Office:
680 W. Nye Ln, Suite 103
Carson City, Nevada 89703
Phone: (775) 684-4141

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION

Las Vegas Office:
7115 Amigo Street, Suite 100
Las Vegas, NV 89119
Phone: (702) 486-5115

Date: March 14, 2025
To: Lesley Volkov, Budget Analyst
From: Zuly Terrazas, Public Works Division, Leasing Services
z.terrazas@admin.nv.gov
Subject: Retroactive Memo for placement on May's 2025 BOE agenda

Projected BOE Date: May 13th, 2025

BOE Deadline Date: April 8th, 2025

Lessor: Carson City NV | SGF, LLC
Tenant: Office of the Military, Nevada Army National Guard
Property Location: 1050 East William Street, Suite 100 Carson City, Nevada 89701

This memo is a clarification for a retroactive start date of January 1, for the lease referenced above, which houses the Office of the Military, Nevada Army National Guard.

Per direction from leadership the previous lease agreement was allowed to go to a month-to-month agreement and was recently approved to be renewed for new a long-term lease. Due to an unanticipated delay with both legal teams not agreeing to language this created a delay for submittal to BOE prior to the January 1st start date.

This lease is for placement on the May 13th Board of Examiners meeting.

Thank You,

Zuly Terrazas

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MAR 18 2025

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	014	GOVERNOR'S OFFICE - OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	TEL/LOGIC INC.	GENERAL	\$645,383	
	Contract Description:	This is the fourth amendment to the original contract which provides ongoing broadband technical support, project management, and consulting services to support the planning, mapping, and procurement of broadband services. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$2,531,532.00 to \$3,176,915.16 due to the continued need for these services.				
	Term of Contract:	07/13/2021 - 06/30/2027	Contract # 24507			
2.	030	ATTORNEY GENERAL'S OFFICE - CONSUMER ADVOCATE	ACADIAN CONSULTING GROUP, LLC	OTHER: REGULATORY ASSESSMENTS	\$100,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides expert witness and full litigation support on issues relating to class cost allocations, distribution of revenues across classes and rate design matters relating to utility ratemaking and cost recovery proposals. This amendment increases the maximum amount from \$199,400 to \$299,400 due to the increased need for these services.				
	Term of Contract:	05/10/2022 - 05/08/2026	Contract # 25918			
3.	030	ATTORNEY GENERAL'S OFFICE - CONSUMER ADVOCATE	RESOLVE UTILITY CONSULTING, L.L.C.	OTHER: REGULATORY ASSESSMENTS	\$250,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing expert witness, full litigation support services, and analyzing comments and testimony, developing strategies, and technical support related to legal pleadings.				
	Term of Contract:	05/02/2025 - 05/01/2027	Contract # 30327			
4.	040	SECRETARY OF STATE'S OFFICE - SECRETARY OF STATE	GARTNER, INC.	GENERAL	\$797,500	
	Contract Description:	This is the sixth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides procurement acquisition support services. This service agreement provides project oversight and quality assurance services for the enhancements and modifications to the business registration and filing system. This amendment increases the maximum amount from \$1,563,500 to \$2,361,000 due to the addition of a monthly risk assessment and a statewide business license activity report.				
	Term of Contract:	08/08/2023 - 09/28/2025	Contract # 27918			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	040	SECRETARY OF STATE'S OFFICE - HELP AMERICA VOTE ACT ELECTION REFORM	ELECTION SYSTEMS & SOFTWARE, LLC	GENERAL	\$337,124	Sole Source
	Contract Description:	This is a new contract to provide election project creation, equipment, and on-site support for two counties for the 2025 Nevada Mock Election.				
		Term of Contract:	04/11/2025 - 12/31/2025	Contract # 30314		
6.	070	DEPARTMENT OF ADMINISTRATION - HUMAN RESOURCE MANAGEMENT	SIMMONS GROUP NEVADA, LLC	OTHER: PERSONNEL ASSESSMENT	\$50,000	
	Contract Description:	This is the first amendment to the original service agreement under statewide contract #99SWC-NV24-21476 which provides workplace investigations services. This service agreement provides investigative services for discrimination complaints under Title VII of the Civil Rights Act. This amendment increases the maximum amount from \$95,000 to \$145,000 due to the increased volume of investigations.				
		Term of Contract:	07/01/2024 - 06/30/2025	Contract # 29193		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	XCEL MAINTENANCE SERVICES, INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$1,169,700	
	Contract Description:	This is the first amendment to the original contract which provides janitorial services for the Nevada, Washoe, Elko, Esmeralda, White Pine, Eureka, Mineral, Storey, Pershing, Humboldt, Douglas, Lyon, Lander, and Churchill buildings at the McCarran Center in Las Vegas. This amendment increases the maximum amount from \$8,553,816 to \$9,723,516 due to the increase in size of buildings and the addition of one new building.				
		Term of Contract:	11/01/2024 - 10/31/2028	Contract # 29667		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK	BONDS	(\$2,597,910)	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Administration Building - Kinkead Building Site: CIP Project No. 23-C30; SPWD Contract No. 115581. This amendment decreases the maximum amount from \$10,449,000.00 to \$7,851,090.09 due to a change in scope with the project.				
		Term of Contract:	08/08/2023 - 06/30/2027	Contract # 27906		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
9.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - TOURISM	TOURISM ECONOMICS, LLC	OTHER: LODGING TAX	\$231,934	
	Contract Description:	This is the first amendment to the original contract which provides ongoing modeling, data research, and analysis of economic impact data specific to the travel and tourism industry. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$218,621 to \$450,555 due to the continued need for these services.				
		Term of Contract:	07/01/2023 - 06/30/2027	Contract # 26049		
10.	300	DEPARTMENT OF EDUCATION - ASSESSMENTS AND ACCOUNTABILITY	CURRICULUM ASSOCIATES, LLC	GENERAL	\$6,031,517	
	Contract Description:	This is a new contract to provide an ongoing benchmark reading assessment for students in kindergarten through 3rd grade. Contract approval is contingent upon approval of the Nevada State Board of Education.				
		Term of Contract:	Upon Approval - 05/12/2029	Contract # 30370		
11.	300	DEPARTMENT OF EDUCATION - STUDENT AND SCHOOL SUPPORT	TRANSACT COMMUNICATIONS, LLC	FEDERAL	\$176,500	
	Contract Description:	This is the second amendment to the original contract which provides a statewide data management system for the collection of required student and program-level data for each 21st Century Community Learning Centers program site. This amendment increases the maximum amount from \$353,000 to \$529,500 to include the federally required Title IV-B data.				
		Term of Contract:	03/08/2022 - 06/30/2026	Contract # 25540		
12.	300	DEPARTMENT OF EDUCATION - INDIVIDUALS WITH DISABILITIES ACT	SPECIAL EDUCATION LAW ASSOCIATES, LLC	FEDERAL	\$1,862,000	
	Contract Description:	This is a new contract to provide a qualified neutral expert in special education law and maintain impartial special education alternative dispute resolution systems through ongoing oversight, monitoring, and technical assistance.				
		Term of Contract:	Upon Approval - 06/30/2029	Contract # 30375		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
13.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTER-GOVERNMENTAL TRANSFER PROGRAM	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	OTHER: REVENUE	\$1,571,006	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide funds for the non-federal share for an academic Medicaid partnership for Medicaid Clinical Advisors.				
		Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30382		
14.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - INTER-GOVERNMENTAL TRANSFER PROGRAM	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	OTHER: REVENUE	\$11,074,935	Exempt
	Contract Description:	This is the third amendment to the original revenue interlocal agreement which provides funds for the non-federal share for the Practitioner Upper Payment Limit supplemental payment program. This amendment increases the maximum amount from \$25,380,025 to \$36,454,960 due to the addition of a new participating hospital.				
		Term of Contract:	07/01/2022 - 06/30/2026	Contract # 25211		
15.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF PUBLIC AND BEHAVIORAL HEALTH	GENERAL 25% FEDERAL 75%	\$6,597,696	Exempt
	Contract Description:	This is a new interlocal agreement to provide reimbursement for Medicaid survey and certification activities.				
		Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30391		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
16.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	DEPARTMENT OF HEALTH AND HUMAN SERVICES, AGING AND DISABILITY SERVICES DIVISION	FEDERAL	\$1,128,550	Exempt
	Contract Description:	This is a new interlocal agreement to provide education, outreach, and advocacy to citizens who seek information regarding health care assistance and/or need assistance in completing the Medicaid and Nevada Check Up application process.				
	Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30341			
17.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	DEPARTMENT OF HEALTH AND HUMAN SERVICES, AGING AND DISABILITY SERVICES DIVISION	FEDERAL	\$6,216,199	Exempt
	Contract Description:	This is the second amendment to the original interlocal agreement which provides reimbursement for administration of home and community-based services waivers for frail elderly, persons with physical disabilities, and individuals with intellectual and developmental disabilities. This amendment extends the termination date from June 30, 2025 to December 31, 2025 and increases the maximum amount from \$524,672,834.98 to \$530,889,034.09 due to the inclusion of a new waiver program.				
	Term of Contract:	07/01/2021 - 12/31/2025	Contract # 24318			
18.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	MERCER HEALTH & BENEFITS LLC	GENERAL 50% FEDERAL 50%	\$479,000	
	Contract Description:	This is the seventh amendment to the original contract which provides actuarial services. This amendment increases the maximum amount from \$11,561,495 to \$12,040,495 due to the addition of ambulance tax actuarial services.				
	Term of Contract:	01/01/2020 - 12/31/2025	Contract # 22237			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	COMMUNITY CARE HEALTH PLAN OF NEVADA, INC.	GENERAL 20.8% FEDERAL 79.2%	\$12,060,376,094	
	Contract Description:	This is a new contract to provide managed care organization services in urban Clark and Washoe Counties.				
	Term of Contract:	01/01/2026 - 12/31/2030	Contract # 30429			
20.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	CARESOURCE NEVADA CO.	GENERAL 20.8% FEDERAL 79.2%	\$12,060,376,094	
	Contract Description:	This is a new contract to provide managed care organization services to urban Clark and Washoe Counties, and rural services areas throughout Nevada.				
	Term of Contract:	01/01/2026 - 12/31/2030	Contract # 30425			
21.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	HEALTH PLAN OF NEVADA, INC.	GENERAL 20.8% FEDERAL 79.2%	\$12,060,376,094	
	Contract Description:	This is a new contract to provide managed care organization services in urban Clark County.				
	Term of Contract:	01/01/2026 - 12/31/2030	Contract # 30428			
22.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	MOLINA HEALTHCARE OF NEVADA, INC.	GENERAL 20.8% FEDERAL 79.2%	\$12,060,376,094	
	Contract Description:	This is a new contract to provide managed care organization services in urban Clark and Washoe Counties.				
	Term of Contract:	01/01/2026 - 12/31/2030	Contract # 30427			
23.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	REGIONAL TRANSPORTATION COMMISSION OF WASHOE COUNTY	GENERAL 40.3% FEDERAL 59.7%	\$132,836	Exempt
	Contract Description:	This is a new interlocal agreement to provide eligibility assessments for paratransit services for Medicaid recipients eligible for non-emergency medical transportation services.				
	Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30251			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
24.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - MEDICAID	SILVERSUMMIT HEALTHPLAN, INC.	GENERAL 20.8% FEDERAL 79.2%	\$12,060,376,094	
	Contract Description:	This is a new contract to provide managed care organization services in urban Clark and Washoe Counties and rural services areas throughout Nevada.				
		Term of Contract:	01/01/2026 - 12/31/2030	Contract # 30426		
25.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	AITHENT, INC	FEDERAL	\$140,000	Sole Source
	Contract Description:	This is a new contract to provide web-based licensing and certification software, maintenance, support, and hosting services.				
		Term of Contract:	Upon Approval - 04/01/2028	Contract # 29428		
26.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - ENVIRONMENTAL HEALTH SERVICES	AITHENT, INC	FEE: MAMMOGRAPHY CERTIFICATION 80% OTHER: COUNTY REIMBURSEMENT 20%	\$123,750	Sole Source
	Contract Description:	This is a new contract to provide ongoing maintenance and support for the Environmental Health licensing and regulatory system.				
		Term of Contract:	07/01/2024 - 03/31/2028	Contract # 29577		
27.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - HEALTH CARE FACILITIES REGULATION	LONG-TERM CARE CONSULTANTS, LLC	OTHER: FEDERAL CIVIL MONEY PENALTIES FROM CENTER FOR MEDICARE AND MEDICAID SERVICES	\$104,580	
	Contract Description:	This is a new contract to provide clinical and in-service training for nursing home staff.				
		Term of Contract:	Upon Approval - 04/30/2028	Contract # 30077		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
28.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - HEALTH CARE FACILITIES REGULATION	NEVADA STATE BOARD OF NURSING	FEDERAL	\$926,100	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing program development to regulate nursing assistants employed in nursing facilities and home health agencies.				
	Term of Contract:	07/01/2025 - 06/30/2029		Contract # 30272		
29.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - HEALTH CARE FACILITIES REGULATION	SILVER KITE COMMUNITY ARTS CONSULTING, LLC	OTHER: CIVIL MONETARY PENALTY	\$104,556	
	Contract Description:	The is a new contract to provide art workshops for residents in nursing homes.				
	Term of Contract:	Upon Approval - 04/30/2026		Contract # 30018		
30.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - FAMILY SUPPORT PROGRAM	CARAHSOFT TECHNOLOGY CORPORATION	FEDERAL	\$102,216	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-13299 which provides cloud services. This service agreement provides platform access, planning, quality improvement, training, and support services for implementation of a child welfare motivational interviewing artificial intelligence tool to standardize service delivery and to provide continuous quality improvement and fidelity monitoring.				
	Term of Contract:	05/13/2025 - 05/12/2026		Contract # 30258		
31.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	EMBGRO	GENERAL	\$190,000	
	Contract Description:	This is a new contract to construct and develop a wellness program and mobile application for peer support.				
	Term of Contract:	Upon Approval - 06/30/2025		Contract # 30474		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
32.	651	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY GRANTS ACCOUNT	ITERIS, INC.	FEDERAL	\$101,590	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV22-12546 which provides grant related professional services. This service agreement provides professional services to support the administration of the Innovative Technology Deployment and Performance Registration Information System Management grant programs.				
		Term of Contract:	Upon Approval - 01/31/2027	Contract # 30389		
33.	655	DEPARTMENT OF PUBLIC SAFETY - RECORDS, COMMUNICATIONS AND COMPLIANCE	CONVERGEONE, INC.	GENERAL 28.5% OTHER: COST ALLOCATION 71.5%	\$1,646,652	
	Contract Description:	This is a new contract to provide a dispatch phone system to improve response to routine and emergency situations.				
		Term of Contract:	Upon Approval - 06/30/2029	Contract # 30436		
34.	655	DEPARTMENT OF PUBLIC SAFETY - CENTRAL REPOSITORY FOR NEVADA RECORDS OF CRIMINAL HISTORY	MANAGEMENT TECHNOLOGY GROUP, L.L.C.	GENERAL 10% FEE: PROGRAM 90%	\$321,532	
	Contract Description:	This is the second amendment to the original contract which provides change management, quality assurance and senior advisor services for the Nevada Criminal Justice Information System modernization solution. This amendment increases the maximum amount from \$4,980,266 to \$5,301,798 due to the increased need for consulting services.				
		Term of Contract:	07/01/2020 - 06/30/2026	Contract # 23187		
35.	658	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY PLAN AND ADMINISTRATION	KIMLEY-HORN AND ASSOCIATES, INC.	FEDERAL	\$220,000	
	Contract Description:	This is the first amendment to the original contract which provides consultant services in support of the development and maintenance of the Nevada Highway Safety Plan. This amendment increases the maximum amount of the contract from \$500,000 to \$720,000 due to the continued need for the consulting services.				
		Term of Contract:	10/12/2021 - 10/31/2025	Contract # 24936		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
36.	704	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	TAHOE REGIONAL PLANNING AGENCY	OTHER: REVENUE	\$120,000	Exempt
	Contract Description:	This is the first amendment to the original revenue interlocal agreement which provides ongoing personnel to support the Lake Tahoe Watercraft Inspection Program to prevent the introduction of aquatic invasive species. This amendment increases the maximum amount from \$421,936 to \$541,936 due to increased salaries approved by the 2023 Nevada Legislative session.				
		Term of Contract:	04/01/2024 - 04/01/2028	Contract # 29076		
37.	709	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT AND CORRECTIVE ACTION	BROADBENT & ASSOCIATES, INC.	FEDERAL	\$4,800,000	
	Contract Description:	This is a new contract to provide ongoing support services for the State Response Program by conducting site-specific assessment, cleanup, and other redevelopment activities at sites deemed eligible to receive Brownfields and State Response funding.				
		Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30340		
38.	709	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MATERIALS MANAGEMENT AND CORRECTIVE ACTION	NORTHERN NEVADA PUBLIC HEALTH	FEE: PETROLEUM FUND 50% FEDERAL 50%	\$600,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing underground storage tank tracking, monitoring, site visits, and reporting.				
		Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30153		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
39.	709	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - MINING REGULATION AND RECLAMATION	U.S. DEPARTMENT OF THE INTERIOR, BUREAU OF LAND MANAGEMENT	FEE: RECLAMATION	\$960,661	Exempt
	Contract Description:	This is a new interlocal agreement to provide ongoing liaison and technical expert services, including coordination of bond activities, review of reclamation cost estimates, engineering, site visits, and inspections.				
	Term of Contract:	07/01/2025 - 06/30/2033	Contract # 30317			
40.	709	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - SAFE DRINKING WATER PROGRAM	TERRAPHASE ENGINEERING INC.	FEDERAL	\$28,000	
	Contract Description:	This is the fourth amendment to the original contract which provides testing for lead in drinking water in charter schools. This amendment increases the maximum amount from \$98,778 to \$126,778 due to the continued need for these services.				
	Term of Contract:	11/16/2022 - 06/30/2025	Contract # 26808			
41.	742	DEPARTMENT OF BUSINESS AND INDUSTRY - INDUSTRIAL RELATIONS - OCCUPATIONAL SAFETY & HEALTH ENFORCEMENT	THE LAW OFFICES OF CHARLES R. ZEH, ESQ., LLC	OTHER: WORKERS' COMPENSATION & SAFETY FUND 50% FEDERAL 50%	\$192,000	
	Contract Description:	This is a new contract to provide ongoing legal services.				
	Term of Contract:	07/01/2025 - 06/30/2026	Contract # 30433			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
42.	742	DEPARTMENT OF BUSINESS AND INDUSTRY - INDUSTRIAL RELATIONS - SAFETY CONSULTATION AND TRAINING	KPS/3	OTHER: WORKERS' COMPENSATION ASSESSMENT FUND 74.3% FEDERAL 25.7%	\$147,821	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides ongoing strategic planning, account management, and website and digital services.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 30445		
43.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	WORKFORCE CONNECTIONS	OTHER: WAGE ASSESSMENT (CAREER ENHANCEMENT PROGRAM)	\$136,500	Exempt
	Contract Description:	This is a new contract to provide information technology related job training.				
		Term of Contract:	Upon Approval - 06/30/2026	Contract # 30305		
44.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	WOW CLEANING CORPORATION	OTHER: COST ALLOCATION	\$116,400	
	Contract Description:	This is a new contract to provide ongoing janitorial services at the Fallon EmployNV Hub facility.				
		Term of Contract:	07/01/2025 - 06/30/2029	Contract # 30395		
45.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - EMPLOYMENT SECURITY - SPECIAL FUND	CARAHSOFT TECHNOLOGY CORPORATION	OTHER: COST ALLOCATION 12% FEDERAL 88%	\$191,568	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV24-17504 which provides cloud services. This service agreement provides the development and implementation of an artificial intelligence invoice tracking and payment management system to streamline and enhance the tracking, processing, and distribution of vendor invoices.				
		Term of Contract:	Upon Approval - 09/15/2026	Contract # 30450		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
46.	920	DEPARTMENT OF ADMINISTRATION - DEFERRED COMPENSATION COMMITTEE	MORGAN STANLEY INSTITUTIONAL INVESTMENT ADVISORS LLC	OTHER: VENDOR REIMBURSEMENTS	\$294,500	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides ongoing investment consulting services. This amendment extends the termination date from May 31, 2025 to May 31, 2030 and increases the maximum amount from \$357,000 to \$651,500 due to the continued need for these services.				
		Term of Contract:	06/01/2020 - 05/31/2030	Contract # 23057		

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **24507**Amendment
Number: **4**Legal Entity
Name: **TEL/LOGIC INC.**Agency Name: **OFFICE OF SCIENCE, INNOVATION
AND TECHNOLOGY**Contractor Name: **TEL/LOGIC INC.**Agency Code: **014**Address: **DBA E-RATE CENTRAL**Appropriation Unit: **1003-11**Is budget authority
available?: **Yes**City/State/Zip **WESTBURY, NY 11590-2291**

If "No" please explain: Not Applicable

Contact/Phone: **ERIC FLOCK 516/801-7885**Vendor No.: **T29039669**NV Business ID: **NV20171445786**To what State Fiscal Year(s) will the contract be charged? **2022-2027**

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

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 # 01GO-S1463**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **07/13/2021**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2025**Contract term: **5 years and 353 days**4. Type of contract: **Contract**Contract description: **Broadband Consulting**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides ongoing broadband technical support, project management, and consulting services to support the planning, mapping, and procurement of broadband services. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$2,531,532 to \$3,176,915.16 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:	\$2,211,840.00	\$2,211,840.00	\$2,211,840.00	Yes - Action
a. Amendment 1:	\$159,100.00	\$159,100.00	\$159,100.00	Yes - Action
b. Amendment 2:	\$50,000.00	\$50,000.00	\$50,000.00	Yes - Info
c. Amendment 3:	\$110,592.00	\$110,592.00	\$160,592.00	Yes - Action
2. Amount of current amendment (#4):	\$645,383.16	\$645,383.16	\$645,383.16	Yes - Action
3. New maximum contract amount:	\$3,176,915.16			
and/or the termination date of the original contract has changed to:	06/30/2027			

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 223.610 requires OSIT to coordinate activities in the State relating to the planning, mapping, and procurement of broadband service

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? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #01GO-S1463 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: 04/14/2021 Anticipated re-bid date: 01/15/2025

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

OSIT, Agency satisfied

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	tbeaureg	02/28/2025 13:56:28 PM
Division Approval	nmann	03/25/2025 14:51:23 PM
Department Approval	nmann	03/25/2025 14:51:59 PM
Contract Manager Approval	ablak2	04/14/2025 14:24:20 PM
Budget Analyst Approval	vmilazz1	04/22/2025 13:40:07 PM
BOE Agenda Approval	vmilazz1	04/22/2025 13:40:13 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25918**Amendment Number: **1**Agency Name: **ATTORNEY GENERAL'S OFFICE**Legal Entity Name: **ACADIAN CONSULTING GROUP, LLC**Agency Code: **030**Contractor Name: **ACADIAN CONSULTING GROUP, LLC**Appropriation Unit: **1038-10**Address: **5800 ONE PERKINS PLACE DR
STE 5 F**Is budget authority available?: **Yes**City/State/Zip: **BATON ROUGE, LA 70808**

If "No" please explain: Not Applicable

Contact/Phone: **David E. Dismukes, Ph.D. 225-769-2603**Vendor No.: **T32012286**NV Business ID: **NV20222405431**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/10/2022**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **05/08/2026**Contract term: **3 years and 364 days**4. Type of contract: **Contract**Contract description: **Professional Service**

5. Purpose of contract:

This is the first amendment to the original contract which provides expert witness and full litigation support on issues relating to class cost allocations, distribution of revenues across classes and rate design matters relating to utility ratemaking and cost recovery proposals. This amendment increases the maximum amount from \$199,400 to \$299,400 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:	\$199,400.00	\$199,400.00	\$199,400.00	Yes - Action
2. Amount of current amendment (#1):	\$100,000.00	\$100,000.00	\$100,000.00	Yes - Action
3. New maximum contract amount:	\$299,400.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Specialized knowledge and testimony as an expert witness is required by the Bureau of Consumer Protection to assist in evaluating the filings as well as the particular requirements to represent consumers' interests.

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

Specialized knowledge and credentials of an experienced expert in the field which is not available in a State agency is needed in complex contested matters before the NV Public Utilities Commission.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

This vendor was chosen for their specialized expertise, availability and rates.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

In 2005 Acadian Consulting Group was contracted with the Bureau of Consumer Protection and all work performed was satisfactory.

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

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

Not Applicable

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

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	knowicki	04/02/2025 13:45:05 PM
Division Approval	jhoba2	04/02/2025 13:52:09 PM
Department Approval	jhoba2	04/02/2025 13:52:14 PM
Contract Manager Approval	pmcco1	04/02/2025 14:45:00 PM
Budget Analyst Approval	vmilazz1	04/22/2025 13:16:34 PM
BOE Agenda Approval	vmilazz1	04/22/2025 13:16:38 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30327**

Agency Name: ATTORNEY GENERAL'S OFFICE	Legal Entity Name: RESOLVE UTILITY CONSULTING, L.L.C.
Agency Code: 030	Contractor Name: RESOLVE UTILITY CONSULTING, L.L.C.
Appropriation Unit: 1038-10	Address: 5000 CARRINGTON PL
Is budget authority available?: Yes	City/State/Zip: OKLAHOMA CITY, OK 73131
If "No" please explain: Not Applicable	Contact/Phone: DAVID GARRETT 405/249-1050
	Vendor No.: T32012836
	NV Business ID: NV20171053680

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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

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

Agency Reference #: 24156

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/02/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **Yes**

If "Yes", please explain

The previous contract expired before an amendment could be requested.3. Termination Date: **05/01/2027**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Professional Service**

5. Purpose of contract:

This is a new contract to provide ongoing expert witness, full litigation support services, and analyzing comments and testimony, developing strategies, and technical support related to legal pleadings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00**

Payment for services will be made at the rate of \$140.00 per Hour

Other basis for payment: Upon submittal, review and approval of monthly invoices.

II. JUSTIFICATION

7. What conditions require that this work be done?

Statutory requirement to represent consumers' interests in matters before the Public Utilities Commission and any legislature, board or commission with jurisdiction over Nevada regulated public utilities.

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

Specialized expertise is required by our office to adequately protect the public interest.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

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

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

Resolve Utility Consulting was chosen in preference to others for their specialized expertise, availability and reasonable rate.

d. Last bid date:

Anticipated re-bid date:

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Resolve Utility Consulting LLC has provided services to the Bureau of Consumer Protection of the Office of the Attorney General since May 2017. All previous services have been 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:

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:

Michelle Badorine, Sr. Deputy Attorney General Ph: (775) 684-1164

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knowicki	04/02/2025 13:45:37 PM
Division Approval	jhoba2	04/02/2025 13:54:06 PM
Department Approval	jhoba2	04/02/2025 13:54:09 PM
Contract Manager Approval	pmcco1	04/02/2025 14:44:30 PM
Budget Analyst Approval	vmilazz1	04/22/2025 13:24:40 PM
BOE Agenda Approval	vmilazz1	04/22/2025 13:24:43 PM
BOE Final Approval	Pending	



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL
BUREAU OF CONSUMER PROTECTION

100 No. Carson Street
Carson City, Nevada 89701

AARON D. FORD
Attorney General

ERNEST D. FIGUEROA
*Consumer Advocate
Chief Deputy Attorney General*

INTEROFFICE MEMORANDUM

TO: Budd Milazzo, Executive Branch Budget Officer

FROM: Peggy McCoy, Accounting Assistant III

DATE: April 2, 2025

SUBJECT: Retroactive approval for contract # 30327 for Resolve Utility Consulting
May 13, 2025 BOE

We are requesting that this contract be retroactively approved to May 2, 2025, due to the continued need for services after the expiration of the original contract.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **27918**Amendment Number: **6**Agency Name: **SECRETARY OF STATE'S OFFICE**Legal Entity Name: **GARTNER, INC.**Agency Code: **040**Contractor Name: **GARTNER, INC.**Appropriation Unit: **1050-42**Address: **56 Top Gallant Road**Is budget authority available?: **Yes**City/State/Zip: **Stamford, CT 06902-7700**

If "No" please explain: Not Applicable

Contact/Phone: **Yvette Toledo 602-561-8599**Vendor No.: **T80976121A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2024-2026**

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

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

Agency Reference #: **040**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/08/2023**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/28/2025**Contract term: **2 years and 52 days**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **Project Oversight**

5. Purpose of contract:

This is the sixth amendment to the original service agreement under statewide contract #99SWC-NV22-9032 which provides procurement acquisition support services. This service agreement provides project oversight and quality assurance services for the enhancements and modifications to the business registration and filing system. This amendment increases the maximum amount from \$1,563,500 to \$2,361,000 due to the addition of a monthly risk assessment and a statewide business license activity report.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$811,000.00	\$811,000.00	\$811,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$182,500.00	\$182,500.00	\$182,500.00	Yes - Action
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
d. Amendment 4:	\$570,000.00	\$570,000.00	\$570,000.00	Yes - Action
e. Amendment 5:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#6):	\$797,500.00	\$797,500.00	\$797,500.00	Yes - Action
3. New maximum contract amount:	\$2,361,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Nearly 560,000 businesses in Nevada manage their state business licensing & renewals through the SilverFlume Business Portal. Last year alone, SilverFlume generated approximately \$200 million for the State General Fund. This is a critical tool for Nevada's business community and a vehicle for our economy, but there is a need to streamline & improve the user experience. The improvements will help the thousands of business owners that rely on SilverFlume, and drive more business to the State of Nevada. The Office requires a contractor to provide oversight to include project and program planning, readiness assessment, project health checks and technical assessments, vendor evaluation and recommendations and independent verification and validation.

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

State employees do not have the tools nor the expertise required to do this work.

9. Were quotes or proposals solicited? No

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

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

b. Solicitation Waiver: **Not Applicable**

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

PASS Agreement under NASPO contract.

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

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

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided services to other state agencies and has been satisfactory.

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dbowma1	03/12/2025 14:59:21 PM
Division Approval	dbowma1	03/12/2025 14:59:29 PM
Department Approval	dbowma1	03/12/2025 14:59:37 PM
Contract Manager Approval	jmckeeha	03/12/2025 15:02:17 PM
EITS Approval	ljea	03/13/2025 08:33:42 AM
Budget Analyst Approval	mranki1	03/17/2025 08:37:49 AM
BOE Agenda Approval	mranki1	03/17/2025 08:38:15 AM



**STATE OF NEVADA
OFFICE OF THE CHIEF INFORMATION OFFICER
WITHIN THE OFFICE OF THE GOVERNOR**

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

M E M O R A N D U M

TO: Gabriel Di Chiara, Chief Deputy Secretary of State, SOS
Shauna Bakkedahl, Deputy Sec. of State for Commercial Recordings, SOS
Tim Horgan, Chief IT Manager, SOS
Ashley Griffitts, Administrative Services Officer, SOS

CC: Tim Galluzi, State Chief Information Officer, OCIO-OG
Robert Dehnhardt, State Chief Information Security Officer, OCIO-OG
Sean Montierth, IT Chief, Computing Services Unit, OCIO-OG
David Axtell, Chief Enterprise Architect, OCIO-OG

FROM: Lisa Jean, TIN Administrator, OCIO-OG

SUBJECT: TIN Completion Memo – SOS – TIN 734 – *Project Orion* – BA 1050

DATE: July 3, 2023

We have completed our review for the Secretary of State's Office (SOS) – *Project Orion* – TIN 734.

The submitted TIN, for an estimated value of \$15,000,000.00 in the FY24/FY25 biennium, (100% General Fund), is to support a portfolio of projects and initiatives to improve the state business licensing and renewals processes managed through the SilverFlume Business Portal.

The SilverFlume Business Portal is a pivotal asset for Nevada's economic growth, with nearly 560,000 businesses utilizing its platform for their licensing and renewals. In 2022 alone, the platform contributed approximately \$200 million to the State General Fund. However, there remains substantial potential for further enhancement and streamlining of the user experience to ensure it is more accessible for the countless business owners who rely on SilverFlume. This initiative is intended to attract more businesses to the State of Nevada, thereby further stimulating economic growth.

Efficiency and user-friendliness are the guiding principles for this investment. The notion that a business owner should need a lawyer or an IT expert to navigate the licensing process is outdated, thus the

objective of this system overhaul is to create a more logical, efficient process flow, coupled with an enhanced customer service experience that uses technology such as chatbots and self-help tools to reduce the workload on state employees.

The solution will include 24/7 exception monitoring, enabling a swift response to any potential threats or system breaches. Additionally, the agency's disaster recovery plan will be meticulously tested and documented to ensure minimal disruption in the face of unforeseen incidents. Thus, while the SilverFlume Business Portal evolves to offer a more efficient, user-friendly experience, it will continue to prioritize the cybersecurity of the state and its users and the protection of their data. The Office of the CIO supports the agency's commitment to improved security. As the agency seeks to improve and streamline the user experience for Nevada's business owners and to maintain data security and integrity, the agency should implement advanced security protocols, including multi-factor authentication and encryption where possible, to protect sensitive user data.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30314**

Agency Name:	SECRETARY OF STATE'S OFFICE	Legal Entity Name:	ELECTION SYSTEMS & SOFTWARE, LLC
Agency Code:	040	Contractor Name:	ELECTION SYSTEMS & SOFTWARE, LLC
Appropriation Unit:	1051-31	Address:	11208 JOHN GALT BLVD
Is budget authority available?:	Yes	City/State/Zip	OMAHA, NE 68137-2320
If "No" please explain:	Not Applicable	Contact/Phone:	CHELSEA MACHADO 800-247-8683
		Vendor No.:	T32012761
		NV Business ID:	NV19971341563

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/11/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **Yes**

If "Yes", please explain

In the preparation of integrating the Clark County VREMS system with the State instance, testing of product enhancements, and the continuation of education for county personnel a series of Mock Elections will be held. These mock elections include the creation of Election Files, Print/Voice files and mail ballots as part of their scope. It is imperative that work began in March 2025, prior to the BOE meeting to ensure that schedule and tight timelines were not impacted.

3. Termination Date: **12/31/2025**Contract term: **264 days**4. Type of contract: **Contract**Contract description: **Mock Election - ES&S**

5. Purpose of contract:

This is a new contract to provide election project creation, equipment, and on-site support for two counties for the 2025 Nevada Mock Election.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$337,124.00**

Other basis for payment: As invoiced by the vendor and approved by the state.

II. JUSTIFICATION

7. What conditions require that this work be done?

The State must run mock elections in order to implement the Voter Registration and Elections Management System(VREMS) pursuant to AB422 (2021). Two counties (Lander and Carson) are using voting equipment (tabulators, voting machines, voter verifiable paper audit trails, mail ballot readers, etc.) which have been purchased through Election Systems and Software. For each election, this vendor is required to develop and modify the election data to appropriately program the voting equipment ensuring all candidates, contests, and voter data is appropriately coded for the equipment. There are options for on-site resources, ballot printing and supplies for the counties along with a mock specific laptop that may be used based on the scope of the mock election. In addition, there are also options for the State to rent equipment and supplies to simulate ES&S counties for process validation.

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

The equipment used by the counties is proprietary and is only able to be coded by Election Systems and Software.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 250402

Approval Date: 04/01/2025

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

The equipment used by the counties is proprietary and is only able to be coded by Election Systems and Software.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

VENDOR HAS DONE WORK WITH THE STATE AND IT HAS BEEN SATISFACTORY.

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

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

Not Applicable

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

LLC

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	adale	04/02/2025 11:20:53 AM
Division Approval	adale	04/02/2025 11:20:57 AM
Department Approval	adale	04/02/2025 11:21:06 AM
Contract Manager Approval	adale	04/02/2025 11:21:16 AM
Budget Analyst Approval	mranki1	04/04/2025 15:09:23 PM

BOE Agenda Approval
BOE Final Approval

mrarki1
Pending

04/04/2025 15:09:25 PM

To: Michael Rankin, Governor's Finance Office
From: Mark Wlaschin, Deputy Secretary for Elections *Mark Wlaschin*
CC: Miguel Camacho, Management Analyst 2
Date: March 24, 2025
Subj: Retroactive Request – Election Systems and Software

Enclosed for your consideration is a retroactive request for the contract between the Nevada Secretary of State and Election Systems and Software (ES&S). The Voter Registration and Election Management Solution (VREMS) project team is actively working on the second phase of the implementation process which includes the integration of Nevada's largest county, Clark County, with the system supporting the other 16 counties.

With approximately 72% of the electorate, the merging of Clark County will more than double the number of registered voters in the VREMS system and we will need to conduct multiple mock elections in order to ensure Clark County can effectively use the system without impairing the current counties workflow and daily operations.

It is crucial for this work to begin on April 11, 2025, prior to the Board of Examiners meeting to ensure the Clark County integration remains on track for completion prior to the start of the 2026 election cycle.

Please consider this memorandum as justification for approval of this retroactive amendment.

Should you have any questions, please contact me at 684-7156.

Thank you for your consideration.



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

Purchasing Use Only:	
Approval#:	256402 (9)

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

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

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:		Secretary of State
	Contact Name and Title	Phone Number	Email Address
	Jennifer McKeehan, Management Analyst 3	775-684-5735	McKeehanJ@sos.nv.gov
	Ashley Griffiths, Admin Services Officer 3	775-684-5738	AGriffitts@sos.nv.gov

1b	Vendor Information:	
	Vendor Name:	Elections Systems & Software
	Contact Name:	Chelsea Machado
	Complete Address:	11208 John Galt Blvd
	City, State, and Zip Code	Omaha, NE 68137
	Telephone Number:	877-377-8683
	Email Address:	Chelsea.Machado@essvote.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	X
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	X	No:
	If 'No' Enter Amendment Number:	#		
	Enter CETS Number:	# 30314		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No:
	Contract:	Start Date:	upon approval	End Date:
				x
				12/31/2029

1f	Funding:	
	State Appropriated:	General Fund BA 1051
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:

Approval #:

250402@

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase: \$337,124

2	Provide a description of work/services to be performed or services with goods to be purchased: <i>Provide creation and development of election data to be used in up to 4 mock elections for the implementation of the VREMS project. Election data is used to create ballots for the election consisting of all required office headings, candidates and contests. The data will also create various ballot styles to produce appropriate ballots for the county precincts. This data will enable the counties to develop and tabulate mail ballots as well. 2 of the 17 counties use Election Systems & Software election equipment and require the vendor to create election data, test decks, and provide additional support in troubleshooting any issues with the election data or voting equipment. Since the equipment is proprietary, Election Systems & Software is the only option to receive the data for mock elections. ***This contract is for one year with the option to extend up to three additional years. One year contract is $\\$337,124 \times 4 = \\$1,348,496$</i>

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor? <i>The counties are using voting equipment (tabulators, voting machines, voter verifiable paper audit trails, mail ballot readers, etc.) which has been purchased through Election Systems & Software. For each election, this vendor is required to develop and modify the election data to appropriately program the voting equipment ensuring all candidates, contests, and voter data is appropriately coded for the equipment. No other vendor is approved to code election data for Election Systems & Software equipment. This mock election is a vital step in the implementation of the VREMS project.</i>

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source: <i>The equipment used by the counties is proprietary and is only able to be coded by Elections Systems & Software.</i>

5	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
			X
	a. <u>If yes</u>, what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.		
	b. <u>If not</u>, why were alternatives not evaluated? <i>The counties using Election Systems & Software equipment are required to have updated election data coded which is only available by Election Systems & Software. The mock election must be conducted in the same manner as any other election and will need to be coded by Election Systems & Software.</i>		

Purchasing Use Only:

Approval #:

250402 @

	Has the agency purchased these services/services with goods in the past? Check One:					Yes	No
	NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>						
	a. <u>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for these services/services with goods, the following information must be provided along with the CETS contract number(s) associated with each:</u>						
6	Term		Value	Short Description	Provide Type of Procurement RFP#, RFQ#, Waiver #	CETS #	
	Start Date	End Date					
	04/01/24	12/31/24	\$114,000	Mock Election Support	Waiver #240401	29071	
			\$				
			\$				
			\$				
			\$				

	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
7	<i>If this waiver request is denied this will prevent the VREMS project from being able to develop and test the appropriate policies and procedures to meet the requirements mandated by AB422, as mock elections are a vital step in ensuring the implementation of the project meets all the requirements within the Nevada Revised Statutes 293 and 293B.</i>

	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?
8	<i>Counties that are contracted with Elections Systems & Software for software, maintenance, and licensing of their voting equipment. No other company is able to code election data for these pieces of equipment, and the equipment is proprietary.</i>

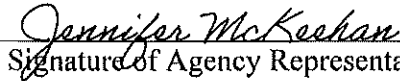
	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.		X
9	a. <i>If yes, please provide details regarding future obligations or needs.</i>		

Purchasing Use Only:

Approval #:

250402②

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



Signature of Agency Representative Initiating Request

Jennifer McKeehan

03/05/2025

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Mark Wlaschin

03/05/2025

Print Name of Agency Head Authorizing Request

Date

FOR PURCHASING USE ONLY – PLEASE NOTE: *In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.*

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at cstoeffler@admin.nv.gov.

NOTE: *If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.*

Approved by:



Administrator, Purchasing Division or Designee

4/1/25

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: **29193** Amendment Number: **1**

Agency Name: **ADMIN - DIVISION OF HUMAN RESOURCE MANAGEMENT** Legal Entity Name: **SIMMONS GROUP NEVADA, LLC**

Agency Code: **070** Contractor Name: **SIMMONS GROUP NEVADA, LLC**

Appropriation Unit: **1363-04** Address: **6841 S EASTERN AVE STE 103**

Is budget authority available?: **Yes** City/State/Zip: **LAS VEGAS, NV 89119**

If "No" please explain: Not Applicable Contact/Phone: **Ann Simmons Nicholson 702/493-5500**

Vendor No.: **T32009595**

NV Business ID: **NV20011005785**

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

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2024**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2025**Contract term: **364 days**4. Type of contract: **Contract**Contract description: **Investigated Service**

5. Purpose of contract:

This is the first amendment to the original service agreement under statewide contract #99SWC-NV24-21476 which provides workplace investigations services.. This service agreement provides investigative services for discrimination complaints under Title VII of the Civil Rights Act. This amendment increases the maximum amount from \$95,000 to \$145,000 due to the increased volume of investigations.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$95,000.00	\$95,000.00	\$95,000.00	Yes - Info
2. Amount of current amendment (#1):	\$50,000.00	\$50,000.00	\$145,000.00	Yes - Action
3. New maximum contract amount:	\$145,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

State of Nevada employees may submit a complaint regarding possible sexual harassment and discriminations. Some of the investigations of these complaints are related to Title VII and are sensitive and need to be completed by the Simmons Group.

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

Division of Human Resource Management staff do not have the necessary time to complete investigations due to workload.

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? Yes

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

b. Solicitation Waiver: **Not Applicable**

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

Statewide contract

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

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Since 2020 for Dept of Human Resource and service is satisfactory.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dcarlo4	02/24/2025 11:44:51 AM
Division Approval	jkidd	02/24/2025 13:37:32 PM
Department Approval	jkidd	02/24/2025 13:37:36 PM
Contract Manager Approval	ssands	03/27/2025 10:32:11 AM
Budget Analyst Approval	bmacke1	04/18/2025 11:16:02 AM
BOE Agenda Approval	bmacke1	04/18/2025 11:19:50 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **29667**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **XCEL MAINTENANCE SERVICES, INC.**Agency Code: **082**Contractor Name: **XCEL MAINTENANCE SERVICES, INC.**Appropriation Unit: **1349-12**Address: **7260 W. Azure Drive # 140
PMB 108**Is budget authority
available?: **Yes**City/State/Zip **Las Vegas, NV 89130-7999**

If "No" please explain: Not Applicable

Contact/Phone: **Kathia Winchell 702-341-9235**Vendor No.: **T81103343**NV Business ID: **NV20021426879**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rental Income

Agency Reference #: **08DOA-S2842 JS**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **11/01/2024**
Examiner's approval?Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **10/31/2028**
Termination Date:Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Janitorial**

5. Purpose of contract:

This is the first amendment to the original contract which provides janitorial services for the Nevada, Washoe, Elko, Esmeralda, White Pine, Eureka, Mineral, Storey, Pershing, Humboldt, Douglas, Lyon, Lander, and Churchill buildings at the McCarran Center in Las Vegas. This amendment increases the maximum amount from \$8,553,816 to \$9,723,516.00 due to the increase in size of buildings and the addition of one new building.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$8,553,816.00	\$8,553,816.00	\$8,553,816.00	Yes - Action
2. Amount of current amendment (#1):	\$1,169,700.00	\$1,169,700.00	\$1,169,700.00	Yes - Action
3. New maximum contract amount:	\$9,723,516.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Janitorial services are needed to provide a sanitary, and healthy environments as well as maintain the integrity of properties.

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

Lack of manpower

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #08DOA-S2842, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 07/24/2024 Anticipated re-bid date: 05/01/2028

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tbeaureg	03/20/2025 15:13:23 PM
Division Approval	jkidd	03/24/2025 13:40:44 PM
Department Approval	jkidd	03/24/2025 13:40:48 PM
Contract Manager Approval	ssands	03/24/2025 13:46:13 PM
Budget Analyst Approval	bmacke1	04/03/2025 17:08:00 PM
BOE Agenda Approval	bmacke1	04/03/2025 17:08:06 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **27906**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK**Agency Code: **082**Contractor Name: **TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK**Appropriation Unit: **1594-33**Address: **314 S. WATER ST.**Is budget authority available?: **Yes**City/State/Zip **HENDERSON, NV 89015-7311**

If "No" please explain: Not Applicable

Contact/Phone: **702-456-3000**Vendor No.: **T80883470**NV Business ID: **NV20212004081**To what State Fiscal Year(s) will the contract be charged? **2024-2027**

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

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

Agency Reference #: **115581**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/08/2023**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2027**Contract term: **3 years and 327 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 Administration Building - Kinkead Building Site: CIP Project No. 23-C30; SPWD Contract No. 115581. This amendment decreases the maximum amount from \$10,449,000.00 to \$7,851,090.09 due to a change in scope with the project.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$10,449,000.00	\$10,449,000.00	\$10,449,000.00	Yes - Action
2. Amount of current amendment (#1):	-\$2,597,909.91	-\$2,597,909.91	-\$2,597,909.91	Yes - Action
3. New maximum contract amount:	\$7,851,090.09			

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP

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

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

9. Were quotes or proposals solicited? No

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

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

Not Applicable

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

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

Demonstrated the required expertise for work on this project.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Yes. SPWD, and currently with satisfactory results.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	03/24/2025 10:15:30 AM
Division Approval	nmann	03/24/2025 10:15:33 AM
Department Approval	nmann	03/24/2025 10:15:37 AM
Contract Manager Approval	lwildes	03/24/2025 10:52:14 AM
Budget Analyst Approval	bmacke1	04/18/2025 11:02:17 AM
BOE Agenda Approval	bmacke1	04/18/2025 11:02:43 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **26049**Amendment
Number: **1**Agency Name: **DTCA - DIVISION OF TOURISM**Legal Entity
Name: **TOURISM ECONOMICS, LLC**Agency Code: **101**Contractor Name: **TOURISM ECONOMICS, LLC**Appropriation Unit: **1522-31**Address: **303 W LANCASTER AVE STE 2E**Is budget authority
available?: **Yes**City/State/Zip **WAYNE, PA 19087-3956**

If "No" please explain: Not Applicable

Contact/Phone: **ADAM SACKS 610/995-9600**Vendor No.: **T32005798**NV Business ID: **NV20181361674**To what State Fiscal Year(s) will the contract be charged? **2024-2027**

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

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % LODGING TAX**Agency Reference #: **RFP #10TCA-S1894 - AM**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/01/2023**
Examiner's approval?Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2025**
Termination Date:Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Economic Impact Study**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing modeling, data research, and analysis of economic impact data specific to the travel and tourism industry. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$218,621 to \$450,555 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:	\$218,621.00	\$218,621.00	\$218,621.00	Yes - Action
2. Amount of current amendment (#1):	\$231,934.00	\$231,934.00	\$231,934.00	Yes - Action
3. New maximum contract amount:	\$450,555.00			
and/or the termination date of the original contract has changed to:	06/30/2027			

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 231.160 through NRS 231.300 requires the Nevada Division of Tourism promote tourism in Nevada. The agency is also responsible for collecting statewide tourism statistics. This study will allow the agency to provide counties and regions with credible tourism statistics that show the impact the tourism industry has on their community.

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

The agency requires a specialized impact model and objective expertise of a reputable research firm to collect and analyze economic impact data specific to the travel and tourism industry.

9. Were quotes or proposals solicited? Yes

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

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

- b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #10TCA-S1894, 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: 02/16/2022 Anticipated re-bid date: 01/15/2027

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Division of Tourism, 2018-2022. The vendor is deemed satisfactory.

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

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

Not Applicable

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

sterr2

04/08/2025 08:03:58 AM

Division Approval	sterr2	04/08/2025 08:04:02 AM
Department Approval	sterr2	04/08/2025 08:04:07 AM
Contract Manager Approval	sterr2	04/08/2025 08:04:11 AM
Budget Analyst Approval	vmilazz1	04/22/2025 13:11:41 PM
BOE Agenda Approval	vmilazz1	04/22/2025 13:11:45 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30370**

Agency Name:	NDE - DEPARTMENT OF EDUCATION	Legal Entity Name:	Curriculum Associates, LLC
Agency Code:	300	Contractor Name:	Curriculum Associates, LLC
Appropriation Unit:	2697-11	Address:	153 Rangeway Road
Is budget authority available?:	Yes	City/State/Zip	North Billerica, MA 01862
If "No" please explain:	Not Applicable	Contact/Phone:	Erin Rush, VP, Adoptions & Proposals 614-721-9573
		Vendor No.:	T29037897
		NV Business ID:	NV20121607707

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

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 #: 30DOE-S3099 JW

2. Contract start date:

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

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/12/2029**Contract term: **4 years and 12 days**4. Type of contract: **Contract**Contract description: **READ BY GRADE 3 EXAM**

5. Purpose of contract:

This is a new contract to provide an ongoing benchmark reading assessment for students in kindergarten through 3rd grade.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,031,517.03**

Other basis for payment: As Invoiced by the Contractor and Approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

The current Read by Grade 3 assessment contract expires June 30, 2025. Effective July 1, 2023, Assembly Bill 400 (2023), Section 71.5 requires the Nevada Department of Education to prescribe by regulation a uniform examination for administration in kindergarten and grades 1, 2, and 3 to measure the proficiency of pupils in the subject area of reading. Nevada's Read by Grade 3: Nevada law, AB289 (2019), known as Read by Grade 3 states that each school district and governing body of each charter school shall prepare a plan to improve the literacy of pupils enrolled in an elementary school.

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

The State cannot maintain the number of required staff at the necessary levels of expertise required to develop, implement, and report an assessment of kindergarten through grade 3 reading. Contracting is not only cost effective, but vendors also provide the State with ready-to-administer solutions that are valid and reliable and have proven rostering and reporting systems.

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):

Amplify Education, Inc
Amira Learning, Inc
Curriculum Associates LLC
NWEA, a division of HMH

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 30DOE-S3099, 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: 02/14/2025 Anticipated re-bid date: 12/01/2028

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

Allison, Yvonne, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dboyter	04/01/2025 10:09:55 AM
Division Approval	psmorr1	04/01/2025 14:02:00 PM
Department Approval	carnol1	04/01/2025 14:14:10 PM
Contract Manager Approval	carnol1	04/01/2025 14:14:13 PM

Budget Analyst Approval
BOE Agenda Approval
BOE Final Approval

vfajota
mranki1
Pending

04/01/2025 15:28:37 PM
04/02/2025 10:38:36 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25540**Amendment Number: **2**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Legal Entity Name: **TransAct Communications, LLC**Agency Code: **300**Contractor Name: **TransAct Communications, LLC**Appropriation Unit: **2712-64**Address: **DBA Cayen Systems
5105 200th Street SW, Ste 200**Is budget authority available?: **Yes**City/State/Zip: **Lynnwood, WA 98036**If "No" please explain: **Not Applicable**Contact/Phone: **425-977-2113**Vendor No.: **T27041983**NV Business ID: **NV20171337464**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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

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

Agency Reference #: **RDP#30DOE-S1756**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/08/2022**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2026**Contract term: **4 years and 114 days**4. Type of contract: **Contract**Contract description: **Data Mgmt System**

5. Purpose of contract:

This is the second amendment to the original contract which provides a statewide data management system for the collection of required student and program-level data for each 21st Century Community Learning Centers program site. This amendment increases the maximum amount from \$353,000 to \$529,500 to include the federally required Title IV-B data.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$176,500.00	\$176,500.00	\$176,500.00	Yes - Action
a. Amendment 1:	\$176,500.00	\$176,500.00	\$176,500.00	Yes - Action
2. Amount of current amendment (#2):	\$176,500.00	\$176,500.00	\$176,500.00	Yes - Action
3. New maximum contract amount:	\$529,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Department of Education's (NDE) Title IV-B 21st Century Community Learning Center (21st CCLC) program serves over 17 sub-grantees which include local education agencies (LEAs), community-based organizations (CBOs), tribal organizations, charter and private schools, and faith based organizations (FBOs), among others, which serve over 100 individual community learning center site locations during out of school time hours. This project will require the set up and management of a statewide data management system for collection of required student and program level data for each 21st CCLC site.

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

Education employees do not have the required background knowledge and/or expertise.

9. Were quotes or proposals solicited? Yes

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

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #30DOE1756, and in accordance with NRS333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 11/29/2021 Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

03/12/13-06/30/2022, NDE, 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	psmorr1	03/25/2025 15:37:38 PM
Division Approval	psmorr1	03/25/2025 15:37:44 PM
Department Approval	carnol1	03/25/2025 15:48:31 PM
Contract Manager Approval	yalliso1	03/25/2025 15:51:04 PM
EITS Approval	ljean	03/26/2025 12:44:03 PM
Budget Analyst Approval	vfajota	04/11/2025 13:03:30 PM
BOE Agenda Approval	mranki1	04/11/2025 14:47:51 PM



**STATE OF NEVADA
GOVERNOR’S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Maria Sauter, Education Programs Director, NDE
Kaylene Hoyt, Management Analyst II, NDE
Glenn Meyer, IT Director, NDE
Nicholas Stanton, Contractor, NDE

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – NDE – TIN 261 – *21st Century Portal* – Update B
– BA 2712

DATE: May 15, 2024

We have completed our review for the Nevada Department of Education’s (NDE) – *21st Century Portal* – TIN 261, Update B.

The submitted TIN, for an estimated value of \$176,500.00 in the FY24/FY25 biennium and \$88,250.00 in the FY26/FY27 biennium (100% General Fund), is to amend the existing TransACT Communications contract to extend data management services for the 21st Century Community Learning Centers for two more years, thereby creating a 4-year contract.

This contract supports NDE’s Title IV-B 21st Century Community Learning Center (21st CCLC) program, which collaborates with over 17 sub-grantees, including local education agencies, community-

based organizations, tribal organizations, charter and private schools, and faith-based organizations. These sub-grantees collectively operate over 100 community learning center sites statewide during out-of-school hours.

The core component of this project is a statewide data management system designed to gather necessary student and program-level data from each 21st CCLC site. The purpose of the 21st Century Learning Center data collection portal—an online tool—is to ensure federal compliance while allowing NDE to provide focused technical support to its sub-grantees. The portal serves multiple functions, including the collection, maintenance, and monitoring of data across NDE and various educational and nonprofit organizations throughout Nevada. It supports the NDE's mandate to provide targeted technical assistance and conduct monitoring in accordance with federal and state educational laws, along with other regulatory requirements.

The investment is considered to have a moderate ongoing security risk due to the handling of Personal Identification Information, which is transported, stored, and processed through the system. The solution adheres to stringent federal and other relevant security standards.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30375**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Agency Code: **300**Appropriation Unit: **2715-17**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Special Education Law Associates, LLC

Contractor Name: **Special Education Law Associates, LLC**Address: **774 Mays Blvd., Suite 10-551**City/State/Zip: **Incline Village, NV 89451**

Contact/Phone: GAIL A. IMOBERSTEG 480/471-1151

Vendor No.: T29041593

NV Business ID: NV20243260532

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

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 #: 30DOE-S3127 JW

2. Contract start date:

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

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years and 61 days**4. Type of contract: **Contract**Contract description: **IDEA ADR OVERSIGHT**

5. Purpose of contract:

This is a new contract to provide a qualified neutral expert in special education law and maintain impartial special education alternative dispute resolution systems through ongoing oversight, monitoring, and technical assistance.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,862,000.00**

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?

NDE requires the assistance of a qualified neutral expert in special education law to fulfill its mandatory general education supervision responsibilities to maintain impartial alternative dispute resolution systems under IDEA and NRS/NDE, Chapter 388, and to ensure compliance and the effectiveness and efficiency of the systems through oversight, including providing impartial technical assistance to the special education Hearing Officers for the State of Nevada in a manner immune from influence.

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

The scope of work and qualifications require specialized expertise and non-employee status that cannot be met within the agency or other State Agency.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):

Inflexion
Pearson K12 Learning LLC
Crisis Prevention Institute, Inc.
Amplify Education, Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 30DOE-S3127, 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: 02/21/2025 Anticipated re-bid date: 12/01/2028

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	smill22	04/02/2025 11:23:23 AM
Division Approval	psmorr1	04/02/2025 13:23:15 PM
Department Approval	carnol1	04/02/2025 14:08:39 PM
Contract Manager Approval	carnol1	04/02/2025 14:08:42 PM
Budget Analyst Approval	vfajota	04/03/2025 08:24:51 AM
BOE Agenda Approval	mranki1	04/03/2025 14:07:11 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30382**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO
Agency Code:	403	Contractor Name:	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO
Appropriation Unit:	3157-00	Address:	1664 N. Virginia Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89557
If "No" please explain:	Not Applicable	Contact/Phone:	Phillip Clark 775-682-5425
		Vendor No.:	
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2026-2029**

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

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 **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Clinical Advisors**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide funds for the non-federal share for an academic Medicaid partnership for Medicaid Clinical Advisors.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,571,006.45****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmentally owned or operated hospitals. This agreement provides for receipt of the non-federal share of funds in order to secure federal funding for this program.

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

DHCFP does not have the staff or expertise required to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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:

Joseph Fillipi, Executive Director Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tilto1	03/21/2025 09:24:04 AM
Division Approval	aprasa1	03/21/2025 11:50:46 AM
Department Approval	staciew4	04/02/2025 08:38:37 AM
Contract Manager Approval	trya4	04/02/2025 10:31:32 AM
Budget Analyst Approval	dlenzner	04/20/2025 21:29:38 PM
BOE Agenda Approval	dlenzner	04/20/2025 21:29:41 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **25211**Amendment Number: **3**Legal Entity Name: **BOARD OF REGENTS, NEVADA
SYSTEM OF HIGHER EDUCATION -
OBO UNIVERSITY OF NEVADA, RENO**Agency Name: **DHHS - HEALTH CARE FINANCING
& POLICY**Contractor Name: **BOARD OF REGENTS, NEVADA
SYSTEM OF HIGHER EDUCATION -
OBO UNIVERSITY OF NEVADA, RENO**Agency Code: **403**Address: **Pennington Medical Education
Building 332**Appropriation Unit: **3157-00**Is budget authority available?: **Yes**City/State/Zip: **Reno, NV 89557**

If "No" please explain: Not Applicable

Contact/Phone: Jeffrey Felsted 775-682-8178

Vendor No.: D35000816B

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2023-2026**

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

General Funds	0.00 %	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 **07/01/2022**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2026**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Supplemental Pymt**

5. Purpose of contract:

This is the third amendment to the original revenue interlocal agreement which provides funds for the non-federal share for the Practitioner Upper Payment Limit supplemental payment program. This amendment increases the maximum amount from \$25,380,025 to \$36,454,960 due to the addition of a new participating hospital.**6. CONTRACT AMENDMENT**

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$6,672,000.00	\$6,672,000.00	\$6,672,000.00	Yes - Action
a. Amendment 1:	\$15,870,573.04	\$15,870,573.04	\$15,870,573.04	Yes - Action
b. Amendment 2:	\$2,837,451.96	\$2,837,451.96	\$2,837,451.96	Yes - Action
2. Amount of current amendment (#3):	\$11,074,935.00	\$11,074,935.00	\$11,074,935.00	Yes - Action
3. New maximum contract amount:	\$36,454,960.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Medicaid State Plan allows for payment of supplemental payments to non-state governmentally owned or operated hospitals. This agreement provides for receipt of the non-federal share of funds in order to secure federal funding for this program.

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

DHCFP does not have the staff or expertise required to provide these services.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

- b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP since 2016 - 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	ttlto1	03/05/2025 15:02:37 PM
Division Approval	aprasa1	03/06/2025 13:29:54 PM
Department Approval	staciew4	03/10/2025 09:47:41 AM
Contract Manager Approval	trya4	03/18/2025 13:10:53 PM
Budget Analyst Approval	dlenzner	04/18/2025 09:22:10 AM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30391**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Agency Code:	403	Contractor Name:	DEPARTMENT OF HEALTH AND HUMAN SERVICES, DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Appropriation Unit:	3158-11	Address:	4150 Technology Way, Ste 300
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89706
If "No" please explain:	Not Applicable	Contact/Phone:	Derek Castro, Contract Manager 775-684-4200
		Vendor No.:	
		NV Business ID:	Governmental Entity
To what State Fiscal Year(s) will the contract be charged?	2026-2029		

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

X	General Funds	25.00 %	Fees	0.00 %
X	Federal Funds	75.00 %	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 **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Survey&Certification**

5. Purpose of contract:

This is a new interlocal agreement to provide reimbursement for Medicaid survey and certification activities.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$6,597,696.00**

Other basis for payment: As invoiced per Attachment A and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract allows DHCFP as the "single state agency" for Medicaid to pass on federal funds to DPBH to reimburse for the Survey and Certification activities. All skilled nursing facilities and nursing facilities are subject to a standard survey that is completed not later than 15.9 months after the previous standard survey, with a statewide average between standard surveys of 12.9 months.

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

State employees are performing this work.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

Yes If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Multiple contracts with DHCFP and other state entities to current. Satisfactory.

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	tilto1	03/28/2025 09:05:06 AM
Division Approval	aprasa1	03/31/2025 16:11:05 PM
Department Approval	staciew4	04/02/2025 08:38:53 AM
Contract Manager Approval	trya4	04/02/2025 14:49:40 PM
Budget Analyst Approval	dlenzner	04/20/2025 22:00:42 PM
BOE Agenda Approval	dlenzner	04/20/2025 22:00:44 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30341**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Department of Health and Human Services, Aging and Disability Services Division
Agency Code:	403	Contractor Name:	Department of Health and Human Services, Aging and Disability Services Division
Appropriation Unit:	3158-11	Address:	3416 Goni Rd., Ste D-132
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89706
If "No" please explain:	Not Applicable	Contact/Phone:	Mariana Acevedo, CCM 775-687-4210
		Vendor No.:	
		NV Business ID:	Government Entity

To what State Fiscal Year(s) will the contract be charged? **2026-2029**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Consumer Health**

5. Purpose of contract:

This is a new interlocal agreement to provide education, outreach, and advocacy to citizens who seek information regarding health care assistance and/or need assistance in completing the Medicaid and Nevada Check Up application process.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,128,550.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This contract allows DHCFP, as the "single State agency" for Medicaid, to pass on federal funds to the Office for Consumer Health Assistance for Medicaid outreach, education, and assistance.

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

State employees are doing the work9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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	ttilto1	04/04/2025 12:24:15 PM
Division Approval	aprasa1	04/04/2025 12:28:04 PM
Department Approval	sruyball	04/04/2025 15:42:44 PM
Contract Manager Approval	trya4	04/04/2025 16:25:21 PM
Budget Analyst Approval	dlrenzner	04/20/2025 22:07:45 PM
BOE Agenda Approval	dlrenzner	04/20/2025 22:07:48 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **24318** Amendment Number: **2**

Legal Entity Name: Department of Health and Human Services, Aging and Disability Services Division

Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Contractor Name: **Department of Health and Human Services, Aging and Disability Services Division**

Agency Code: **403** Address: **3416 Goni Rd., Ste. D-132**

Appropriation Unit: **3158-11** City/State/Zip: **Carson City, NV 89706**

Is budget authority available?: **Yes** Contact/Phone: Mariana Acevedo 775-687-4210

If "No" please explain: Not Applicable Vendor No.: NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2021**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable

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

Contract term: **4 years and 184 days**

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

Contract description: **HCBS Waivers**

5. Purpose of contract:

This is the second amendment to the original interlocal agreement which provides reimbursement for administration of home and community-based services waivers for frail elderly, persons with physical disabilities, and individuals with intellectual and developmental disabilities. This amendment extends the termination date from June 30, 2025 to December 31, 2025 and increases the maximum amount from \$524,672,834.98 to \$530,889,034.09 due to the inclusion of a new waiver program.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$511,458,125.00	\$511,458,125.00	\$511,458,125.00	Yes - Action
a. Amendment 1:	\$13,214,709.98	\$13,214,709.98	\$13,214,709.98	Yes - Action
2. Amount of current amendment (#2):	\$6,216,199.11	\$6,216,199.11	\$6,216,199.11	Yes - Action
3. New maximum contract amount:	\$530,889,034.09			
and/or the termination date of the original contract has changed to:	12/31/2025			

II. JUSTIFICATION

7. What conditions require that this work be done?

Cost of institutional care in hospitals and nursing facilities for the elderly population compared to care that can be provided in homes and in the community.

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

State employees are performing the work.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

Pursuant to NRS 277.180 one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2015 to current. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttilto1	04/04/2025 09:33:13 AM
Division Approval	aprasa1	04/04/2025 10:07:36 AM
Department Approval	sruybal	04/04/2025 15:42:23 PM

Contract Manager Approval	trya4	04/04/2025 16:25:01 PM
Budget Analyst Approval	dlenzner	04/20/2025 22:14:28 PM
BOE Agenda Approval	dlenzner	04/20/2025 22:14:32 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT

1. Contract Number: **22237** Amendment Number: **7**

Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY** Legal Entity Name: **MERCER HEALTH & BENEFITS LLC**

Agency Code: **403** Contractor Name: **MERCER HEALTH & BENEFITS LLC**

Appropriation Unit: **3158-04** Address: **2325 E. Camelback Road Suite 600**

Is budget authority available?: **Yes** City/State/Zip: **Phoenix, AZ 85016**

If "No" please explain: Not Applicable Contact/Phone: **Frederick Gibison 602-522-6526**

Vendor No.: **T32007146**

NV Business ID: **NV20041250294**

To what State Fiscal Year(s) will the contract be charged? **2020-2026**

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

X	General Funds	50.00 %	Fees	0.00 %
X	Federal Funds	50.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP #40DHHS-S697**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2020**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **12/31/2025**Contract term: **6 years and 1 day**4. Type of contract: **Contract**Contract description: **Actuarial Services**

5. Purpose of contract:

This is the seventh amendment to the original contract which provides actuarial services. This amendment increases the maximum amount from \$11,561,495 to \$12,040,495 due to the addition of ambulance tax actuarial services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$5,085,000.00	\$5,085,000.00	\$5,085,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$0.00	\$0.00	\$0.00	No
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
d. Amendment 4:	\$5,854,995.00	\$5,854,995.00	\$5,854,995.00	Yes - Action
e. Amendment 5:	\$121,500.00	\$121,500.00	\$121,500.00	Yes - Action
f. Amendment 6:	\$500,000.00	\$500,000.00	\$500,000.00	Yes - Action
2. Amount of current amendment (#7):	\$479,000.00	\$479,000.00	\$479,000.00	Yes - Action
3. New maximum contract amount:	\$12,040,495.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Federal mandates for sound actuarial services pursuant to 42 CFR 438.6 for Medicaid payments made to Managed Care Organizations (MCO), Prepaid Inpatient Health Plan(PIHP) or Prepaid Ambulatory Health Plan (PAH)P.

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

State employees lack the skills and expertise for the complexity required to set actuarially sound rates.

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):

Mercer Health & Benefits
Milliman
Optumace

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHs-S697 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 07/17/2019 Anticipated re-bid date: 01/01/2023

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Multiple agencies/DHCFP 2020 to current. Satisfactory.

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

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

Not Applicable

15. The contractor is 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	ttilto1	03/20/2025 14:57:42 PM
Division Approval	aprasa1	03/20/2025 15:30:06 PM
Department Approval	staciew4	03/20/2025 17:02:27 PM
Contract Manager Approval	ltuttl1	03/21/2025 07:03:36 AM
Budget Analyst Approval	dlenzner	04/21/2025 13:20:54 PM
BOE Agenda Approval	dlenzner	04/21/2025 13:20:59 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30429**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Anthem Blue Cross and Blue Shield Healthcare Solutions

Contractor Name: **COMMUNITY CARE HEALTH PLAN OF NEVADA, INC.**Address: **9133 West Russell Road**City/State/Zip: **Las Vegas , NV 89148**

Contact/Phone: Joy Thomas 702-271-0648

Vendor No.: T27044530

NV Business ID: NV20051537996

To what State Fiscal Year(s) will the contract be charged? **2026-2031**

What is the source of funds that 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 **20.80 %** Fees 0.00 %**X** Federal Funds **79.20 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 40DHHS-S3037 RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2026**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2030**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Managed Care Org**

5. Purpose of contract:

This is a new contract to provide managed care organization services in urban Clark and Washoe Counties.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,060,376,094.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The state is required to provide risk-based capitated Managed Care Organization (MCO or Vendor) services designed in support of the Social Security Act Title XIX (Medicaid) and Title XXI State Childrens Health Insurance Program (CHIP, also known as Nevada Check Up) medical assistance programs.

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

State personnel cannot fulfill these specific duties and the state lacks the resources to initiate care coordination for care 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):

a list of solicited vendors available in nevadaepro.com bid 40DHHS-S3037

Selecthealth

Anthem

Molina

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S3037, this vendor was awarded coverage areas based on the requirements of the RFP.

d. Last bid date: 10/21/2024 Anticipated re-bid date: 01/03/2030

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

No b. If "No", please explain:

Vendor provides services to Nevada using a registered DBA.

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttilto1	04/03/2025 08:49:31 AM
Division Approval	aprasa1	04/04/2025 13:37:49 PM
Department Approval	sruybal	04/04/2025 15:44:36 PM
Contract Manager Approval	trya4	04/04/2025 16:22:16 PM
Budget Analyst Approval	dlenzner	04/20/2025 20:31:50 PM
BOE Agenda Approval	dlenzner	04/20/2025 20:31:52 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30425**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: CareSource Nevada Co.

Contractor Name: **CareSource Nevada Co.**Address: **2850 W. Horizon Ridge Parkway, STE 200**City/State/Zip: **Henderson, NV 89052**

Contact/Phone: Jayme Puu 725-332-8900

Vendor No.: Pending

NV Business ID: NV20253278366

To what State Fiscal Year(s) will the contract be charged? **2026-2031**

What is the source of funds that 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 **20.80 %** Fees 0.00 %**X** Federal Funds **79.20 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 40DHHS-S3037 RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2026**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2030**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Managed Care Org**

5. Purpose of contract:

This is a new contract to provide managed care organization services to urban Clark and Washoe Counties, and rural services areas throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,060,376,094.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The state is required to provide risk-based capitated Managed Care Organization (MCO or Vendor) services designed in support of the Social Security Act Title XIX (Medicaid) and Title XXI State Childrens Health Insurance Program (CHIP, also known as Nevada Check Up) medical assistance programs.

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

State personnel cannot fulfill these specific duties and the state lacks the resources to initiate care coordination for care 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):

Anthem
selecthealth
Molina
A list of solicited vendors available in nevadaepro.com bid 40DHHS-S3037

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S3037, this vendor was awarded coverage areas based on the requirements of the RFP.

d. Last bid date: 10/21/2024 Anticipated re-bid date: 01/03/2030

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Non-profit Corporation

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

Yes

17. Not Applicable

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ttlto1	04/03/2025 08:46:31 AM
Division Approval	aprasa1	04/04/2025 13:37:03 PM
Department Approval	sruyball	04/04/2025 15:43:03 PM
Contract Manager Approval	trya4	04/04/2025 16:23:40 PM
Budget Analyst Approval	dlenzner	04/20/2025 09:28:39 AM
BOE Agenda Approval	dlenzner	04/20/2025 09:28:42 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30428**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	HEALTH PLAN OF NEVADA, INC.
Agency Code:	403	Contractor Name:	HEALTH PLAN OF NEVADA, INC.
Appropriation Unit:	3243-12	Address:	2720 N. Tenaya Way
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89128
If "No" please explain:	Not Applicable	Contact/Phone:	Kevin LeClair 702-242-7300
		Vendor No.:	T80601000B
		NV Business ID:	NV19841007076

To what State Fiscal Year(s) will the contract be charged? **2026-2031**

What is the source of funds that 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	20.80 %	Fees	0.00 %
X	Federal Funds	79.20 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 40DHHS-S3037 RV

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2026**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2030**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Managed Care Org**

5. Purpose of contract:

This is a new contract to provide managed care organization services in urban Clark County.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,060,376,094.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The state is required to provide risk-based capitated Managed Care Organization (MCO or Vendor) services designed in support of the Social Security Act Title XIX (Medicaid) and Title XXI State Childrens Health Insurance Program (CHIP, also known as Nevada Check Up) medical assistance programs.

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

State personnel cannot fulfill these specific duties and the state lacks the resources to initiate care coordination for care 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):

Selecthelath
a list of solicited vendors available in nevadaepro.com bid 40DHHS-S3037
Anthem
Molina

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S3037, this vendor was awarded coverage areas based on the requirements of the RFP.

d. Last bid date: 10/21/2024 Anticipated re-bid date: 01/03/2025

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tilto1	04/03/2025 08:49:07 AM
Division Approval	aprasa1	04/04/2025 13:37:39 PM
Department Approval	sruybali	04/04/2025 15:44:05 PM
Contract Manager Approval	trya4	04/04/2025 16:22:50 PM
Budget Analyst Approval	dlenzner	04/20/2025 20:27:08 PM
BOE Agenda Approval	dlenzner	04/20/2025 20:27:11 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30427**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	MOLINA HEALTHCARE OF NEVADA, INC.
Agency Code:	403	Contractor Name:	MOLINA HEALTHCARE OF NEVADA, INC.
Appropriation Unit:	3243-12	Address:	8329 W. Sunset Rd., Ste 100
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89113
If "No" please explain:	Not Applicable	Contact/Phone:	Rob Baughman 562-542-2269
		Vendor No.:	T32011225
		NV Business ID:	NV20161415756

To what State Fiscal Year(s) will the contract be charged? **2026-2031**

What is the source of funds that 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	20.80 %	Fees	0.00 %
X	Federal Funds	79.20 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **40DHHS-S3037 RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2026**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2030**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Managed Care Org**

5. Purpose of contract:

This is a new contract to provide managed care organization services in urban Clark and Washoe Counties.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,060,376,094.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The state is required to provide risk-based capitated Managed Care Organization (MCO or Vendor) services designed in support of the Social Security Act Title XIX (Medicaid) and Title XXI State Childrens Health Insurance Program (CHIP, also known as Nevada Check Up) medical assistance programs.

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

State personnel cannot fulfill these specific duties and the state lacks the resources to initiate care coordination for care 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):

Selecthealth
Molina
A list of solicited vendors available in nevadaepro.com bid 40DHHS-S3037
Anthem

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S3037, this vendor was awarded coverage areas based on the requirements of the RFP.

d. Last bid date: 10/21/2024 Anticipated re-bid date: 01/03/2025

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tilto1	04/03/2025 08:47:18 AM
Division Approval	aprasa1	04/04/2025 13:37:26 PM
Department Approval	sruybali	04/04/2025 15:43:47 PM
Contract Manager Approval	trya4	04/04/2025 16:23:06 PM
Budget Analyst Approval	dlenzner	04/20/2025 20:29:58 PM
BOE Agenda Approval	dlenzner	04/20/2025 20:30:01 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30251**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Regional Transportation Commission of Washoe County**Contractor Name: **Regional Transportation Commission of Washoe County**Address: **1105 Terminal Way Suite 200**City/State/Zip: **Reno , NV 89520**Contact/Phone: **James Gee 775-348-2173**Vendor No.: **PUR0002452A**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2026-2029**

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

X	General Funds	40.30 %	Fees	0.00 %
X	Federal Funds	59.70 %	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 **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **RTC Assessments**

5. Purpose of contract:

This is a new interlocal agreement to provide eligibility assessments for paratransit services for Medicaid recipients eligible for non-emergency medical transportation services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$132,836.15**

Other basis for payment: As invoiced per Attachment A and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

42 CFR 431.53 mandate requires provision of necessary non-emergency transportation to and from medical appointments. Completion of ADS Complementary Paratransit Eligibility evaluations will help assess Medicaid recipients' ability to use fixed route services.

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

State employees do not provide these services. The regional transportation commission is responsible for transportation of its passengers and therefore can assess the applicants' ability to use fixed route services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

DHCFP 2014 to current. Satisfactory.

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

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

Not Applicable

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

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Kirsten Coulombe, Social Services Chief III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tilto1	02/11/2025 14:15:49 PM
Division Approval	aprasa1	02/12/2025 16:33:33 PM
Department Approval	staciew4	02/19/2025 14:46:10 PM
Contract Manager Approval	trya4	03/18/2025 10:12:07 AM
Budget Analyst Approval	dlenzner	04/17/2025 18:13:26 PM
BOE Agenda Approval	dlenzner	04/17/2025 18:13:28 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 CONTRACT1. Contract Number: **30426**Agency Name: **DHHS - HEALTH CARE FINANCING & POLICY**Agency Code: **403**Appropriation Unit: **3243-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SILVERSUMMIT HEALTHPLAN, INC.**Contractor Name: **SILVERSUMMIT HEALTHPLAN, INC.**Address: **2500 N. Buffalo Drive,
STE 205**City/State/Zip: **Las Vegas, NV 89128**Contact/Phone: **Eric Schmacker 844-366-2880**Vendor No.: **T27043423**NV Business ID: **NV20061600559**To what State Fiscal Year(s) will the contract be charged? **2026-2031**

What is the source of funds that 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 **20.80 %** Fees 0.00 %**X** Federal Funds **79.20 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **40DHHS-S3037 RV**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2026**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2030**Contract term: **5 years**4. Type of contract: **Contract**Contract description: **Managed Care Org**

5. Purpose of contract:

This is a new contract to provide managed care organization services in urban Clark and Washoe Counties and rural services areas throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,060,376,094.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The state is required to provide risk-based capitated Managed Care Organization (MCO or Vendor) services designed in support of the Social Security Act Title XIX (Medicaid) and Title XXI State Children's Health Insurance Program (CHIP, also known as Nevada Check Up) medical assistance programs.

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

State personnel cannot fulfill these specific duties and the state lacks the resources to initiate care coordination for care 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):

a list of solicited vendors is available in nevadaepro.com bid 40DHHS-S3037

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 40DHHS-S3037, this vendor was awarded coverage areas based on the requirements of the RFP.

d. Last bid date: 10/21/2024 Anticipated re-bid date: 01/03/2030

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tilto1	04/03/2025 08:46:21 AM
Division Approval	aprasa1	04/04/2025 13:37:14 PM
Department Approval	sruybal	04/04/2025 15:43:30 PM
Contract Manager Approval	trya4	04/04/2025 16:23:22 PM
Budget Analyst Approval	dlenzner	04/20/2025 20:52:24 PM
BOE Agenda Approval	dlenzner	04/20/2025 20:52:27 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **29428**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	AITHENT, INC
Agency Code:	406	Contractor Name:	AITHENT, INC
Appropriation Unit:	3170-28	Address:	19 FULTON ST STE 408
Is budget authority available?:	Yes	City/State/Zip	NEW YORK, NY 10038-2126
If "No" please explain:	Not Applicable	Contact/Phone:	Allister Yu 212/725-7646
		Vendor No.:	T32002745
		NV Business ID:	NV20141059063
To what State Fiscal Year(s) will the contract be charged?	2025-2028		

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

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %
Agency Reference #:	C 18334		

2. Contract start date:

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

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/01/2028**Contract term: **2 years and 336 days**4. Type of contract: **Contract**Contract description: **Certifications**

5. Purpose of contract:

This is a new contract to provide web-based licensing and certification software, maintenance, support, and hosting services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$140,000.00**

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?

Aithent created the Alis software that is used by the Bureau of Behavioral Health Wellness and Prevention to issue state certifications for Prevention and Treatment Providers.

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

Aithent has existing knowledge of operational functions and procedures of the Alis software system. A new system would not be cost efficient and would delay the state certification process.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 240503

Approval Date: 05/21/2024

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

Sole Source Waiver

d. Last bid date:

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 servicing this contract since 2014 and providing satisfactory work.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Istidha1	03/12/2025 13:54:05 PM
Division Approval	dcastro	03/17/2025 08:46:55 AM
Department Approval	dcastro	03/17/2025 08:46:58 AM
Contract Manager Approval	dcastro	03/17/2025 08:47:00 AM
EITS Approval	ljea	03/19/2025 14:13:50 PM
Budget Analyst Approval	pokeefe	04/18/2025 10:09:16 AM
BOE Agenda Approval	nrezaie	04/18/2025 10:43:06 AM
BOE Final Approval	Pending	



**STATE OF NEVADA
GOVERNOR'S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Stephanie Cook, Deputy Bureau Chief, DHHS
Jennifer Gamroth, Administrative Services Officer I, DHHS
Lorraine McMullen, IT Manager I/PMO Manager, DPBH, DHHS

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DPBH – TIN 394 – *Aithent, Inc. contract for Maintenance of Support Service Agreement – Update C – BA 3170*

DATE: June 7, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health's (DPBH) – *Aithent, Inc. contract for Maintenance of Support Service Agreement – TIN 394, Update C.*

The submitted TIN, for an estimated value of \$90,000 in the FY24/FY25 biennium and \$95,000 in the FY26/FY27 biennium (100% Federal Grant), is to update cost information for a renewed service agreement with Aithent to support ALiS for web-based licensing & certification software services, support, and hosting services through March 31, 2028.

ALiS is catered software aligned to the requirements of the Bureau of Behavioral Health and Wellness - Substance Abuse Prevention and Treatment team.

The agency considers the investment and final implementation to have an ongoing low security risk.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.



**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

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

Purchasing Use Only:

Approval#: 240503

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

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

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:		<i>Division of Public and Behavioral Health Bureau of Behavioral Health Wellness and Prevention</i>
	Contact Name and Title	Phone Number	Email Address
	<i>Shannon Bennett, BBHWP-Bureau Chief</i>	<i>775-684-4077</i>	<i>sbennett@health.nv.gov</i>
	<i>Michele Silzell, Admin-ASO3</i>	<i>775-684-4052</i>	<i>msilzell@health.nv.gov</i>

1b	Vendor Information:	
	Vendor Name:	<i>Aithent, Inc</i>
	Contact Name:	<i>Allister Yu</i>
	Complete Address: City, State, and Zip Code	<i>19 Fulton St. Ste. 408, New York, New York, 10038</i>
	Telephone Number:	<i>212.725.7646</i>
	Email Address:	<i>ayu@aithent.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>Sole Source</i>
	Professional Service Exemption:	

1d	Contract Information:				
	Is this a new Contract? Check One:	Yes:	<i>X</i>	No:	
	If 'No' Enter Amendment Number:	#			
	Enter CETS Number:	#			

1e	Term:				
	One (1) Time Purchase? Check One:	Yes:		No:	<i>X</i>
	Contract:	Start Date:	<i>4/1/24</i>	End Date:	<i>3/31/28</i>

1f	Funding:	
	State Appropriated:	
	Federal Funds:	<i>Substance Abuse Block Grant – Category 44 (Treatment) Substance Abuse Block Grant – Category 28 (Treatment & Prevention)</i>

Grant Funds:	
Other (Explain):	

Purchasing Use Only:	
Approval #:	240503

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$185,000

2	Provide a description of work/services to be performed or services with goods to be purchased: <i>Aithent will provide support to DPBH/BBHWP designated representatives, provide support for trouble shooting and resolving problems when it is determined that Alis software is not operating as defined in software requirements. Provides upgrades to Alis software as necessary for it to work with current versions as supportive browsers. As requested, provide guidance by resolving issues and responding to queries from designated representees for use of Alis software, perform necessary analysis to identify the cause of reported issues and identify/report solutions as listed to Alis software. Additionally, apply timely software releases, regular backups of data, provide technical assistance (TA) and written systematic extraction procedure manual and written systematic Alis navigation steps.</i>

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor? <i>Aithent created the Alis software for web-based licensing and certification for the Bureau of Behavioral Health Wellness and Prevention and have pre-existing knowledge of operational procedures.</i>

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source: <i>Aithent created the Alis software for web-based licensing and certification for the Bureau of Behavioral Health Wellness and Prevention and have the pre-existing knowledge of operational procedures. Aithent currently handles ongoing required NAC 458 and NRS 458 treatment and prevention certifications and a new system would not be cost efficient.</i>

5	Check One:					
	Were alternative services or commodities evaluated?	<table border="1"> <tr> <td>Yes</td> <td>No</td> </tr> <tr> <td></td> <td>X</td> </tr> </table>	Yes	No		X
	Yes	No				
		X				
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.					
b. <u>If not</u> , why were alternatives not evaluated?						
<i>Other services were not evaluated due to DPBH using specific software designed by Aithent. See Sole Source Solicitation Waiver #220605, Approved 6/14/2022.</i>						

Purchasing Use Only:

Approval #:

240503

	Has the agency purchased these services/services with goods in the past? Check One:				Yes	No
	NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				X	
6	a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u>					
	Term		Value	Short Description	Provide Type of Procurement RFP#, RFQ#, Waiver #	CETS #
	Start Date	End Date				
	4/1/2022	3/31/2024	\$80,000.00	Maintenance of support service agreement for certification	Waiver# 220605	26239
	4/1/2020	3/31/2022	\$80,000.00	Maintenance of support service agreement for certification (MA#17633)	Maintenance Agreement	
			\$			
			\$			
7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?					
	Level of treatment services will not be provided to community members placing the public at risk and DPBH will not be in compliance with NAC 458 and NRS 458. DPBH will incur cost with no legal document to support the needed scope of work deliverables; exposing the agency to risk and legal liabilities.					
8	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?					
	The Bureau of Behavioral Health Wellness and Prevention previously conducted an RFP which identified Aithent as the provider that can perform the requested activities for a reasonable and fair price as determined by the requirements in the previous RFP. The Division of Public and Behavioral Health will be researching the feasibility on completing either a division wide RFI/RFP for the services currently being provided by Aithent or if the services become too specific that the bureaus will require individual RFPs.					
9	Will this purchase obligate the State to this vendor for future purchases? Check One:				Yes	No

NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.

X

a. If yes, please provide details regarding future obligations or needs.

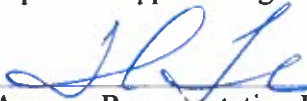
The Bureau of Behavioral Health Wellness and Prevention may exercise the right to request an additional extension if business needs are identified that may impact the overall need for conducting state business. The overall intent is to align the Division of Public and Behavioral Health with one vendor that will meet the needs of the division. Allowing the waiver to be approved through 2028 brings all the bureaus in line with one end date and gives the division the time needed to complete the RFI/RFP process to ensure the state is using the vendor that meets the divisions future needs.

Purchasing Use Only:

Approval #:

240503

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.


Signature of Agency Representative Initiating Request

THOMAS T. HOW NATV
Print Name of Agency Representative Initiating Request

5/24/2024
Date


Signature of Agency Head Authorizing Request

Michele A Silzell ASO3
Print Name of Agency Head Authorizing Request

5/20/24
Date

FOR PURCHASING USE ONLY – PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, **State Purchasing** may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. ***This signature does not exempt your agency from any other processes that may be required.***

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at cstoeffler@admin.nv.gov.

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.



Approved by:

Administrator, Purchasing Division or Designee

5/21/2024

Date

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **29577**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	AITHENT, INC
Agency Code:	406	Contractor Name:	AITHENT, INC
Appropriation Unit:	3194-26	Address:	19 FULTON ST STE 408
Is budget authority available?:	Yes	City/State/Zip	NEW YORK, NY 10038-2126
If "No" please explain:	Not Applicable	Contact/Phone:	Alister Yu 212/725-7646
		Vendor No.:	T32002745
		NV Business ID:	NV20141059063

To what State Fiscal Year(s) will the contract be charged? **2025-2028**

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

General Funds	0.00 %	X	Fees	80.00 % Mammography Certification
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	20.00 % County Reimbursement

Agency Reference #: 18374

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2024**

Anticipated BOE meeting date 02/2025

Retroactive? **Yes**

If "Yes", please explain

Staffing shortages to identify needs but also discussions with Purchasing on moving forward through the RFP process to align all division programs that use these services.

3. Termination Date: **03/31/2028**Contract term: **3 years and 274 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **Web-based software**

5. Purpose of contract:

This is a new contract to provide ongoing maintenance and support for the Environmental Health licensing and regulatory system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$123,750.00**

Other basis for payment: Upon receipt of invoices and approval of services by the agency.

II. JUSTIFICATION

7. What conditions require that this work be done?

Aithent maintains and hosts the online licensing & regulatory web-based system supported by the vendor. This system enables us to track permits, issue renewals, complete inspection reports and track complaints.

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

There are no agency employees available, nor have the experience to do the required work needed to maintain this software.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 240709

Approval Date: 07/30/2024

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

Developer of proprietary software platform for existing licensing software application

d. Last bid date:

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Vendor has been contracted to perform these services in the past for the division. 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	ijanssen	12/13/2024 11:53:40 AM
Division Approval	Istidha1	02/14/2025 13:29:41 PM
Department Approval	Istidha1	02/14/2025 13:29:53 PM
Contract Manager Approval	msilzell	02/14/2025 14:35:54 PM
EITS Approval	ljea	02/20/2025 14:18:53 PM
Budget Analyst Approval	pokeefe	04/18/2025 09:18:49 AM
BOE Agenda Approval	nrezaie	04/18/2025 09:44:41 AM
BOE Final Approval	Pending	



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M E M O R A N D U M

TO: Huy Trinh, Chief IT Manager, DPBH, DHHS
Lorraine McMullen, OIT PMO IT Manager I, DPBH, DHHS
Teresa Hayes, Health Program Manager III, DPBH, DHHS
Nicole Kemp, Accounting Assistant II, DPBH, DHHS

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DPBH – TIN 953 – *Environmental Health Services ALiS System* – BA 3194

DATE: July 5, 2024

We have completed our review for the Department of Health and Human Services (DHHS), Division of Public and Behavioral Health's (DPBH) – *Environmental Health Services ALiS System* – TIN 953.

The submitted TIN, for an estimated value of \$66,000.00 in the FY24/FY25 biennium, \$66,000.00 in the FY26/FY27 biennium, and \$38,000.00 in FY28 (100% State Fees), is to change from a maintenance agreement to a contract for ongoing services.

The ALiS system is integral for creating and updating forms, applications, and certifications necessary for Environmental Health Services (EHS) regulatory program requirements. Aithent will continue to provide

second-level support to the customer's designated representatives. This support includes troubleshooting and resolving issues when the ALiS software does not operate according to defined software requirements. Aithent will also ensure the software is updated to work with current versions of supported browsers and offer guidance and assistance in resolving issues and responding to queries from designated representatives regarding the use of ALiS software.

As part of the investment, Aithent will perform ongoing analysis to identify the causes of reported issues and propose solutions within the agreed software requirements. They will apply timely software updates with minimal direction during business hours, ensuring the uptime and availability of the hosted server. Related services include regular data backups, technical assistance, and the provision of written systematic extraction procedure manuals and navigation steps for ALiS.

ALiS is tailored to meet the requirements of the Environmental Health Services certification process and is based on pre-existing knowledge of operational procedures. The agency considers this investment and its implementation to have a moderate ongoing security risk, as the solution handles the transportation, storage, and processing of Personal Identification Information (PII). Consequently, the solution is subject to federal security and other relevant security standards.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Helping people. It's who we are and what we do.



Cody Phinney
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical Officer

MEMORANDUM

DATE: December 12, 2024

TO: Crystal Novotny, Executive Budget Officer 1
Governors Finance Office

THROUGH: Kyle Devine
DPBH, Deputy Administrator Regulatory and Planning

FROM: Teresa Hayes
DPBH, Environmental Health Program Manager

SUBJECT: REQUEST FOR RETROACTIVE APPROVAL Aithent, Inc. Contract – SA 18374 (CETS# 29577)

This memorandum requests that the following Service Agreement be approved for a retroactive start.

The following information is required:

- Name of Provider: Aithent, Inc.
- Services to be provided: Aithent, Inc. created ALiS, a proprietary software, developed for DPBH. The software provides for web-based licensing and certification for not only the Environmental Health Services but also to many of the bureaus within DPBH including Radiation Control and Health Care Quality and Compliance
- Funding source and expenditure category: 3194 - CAT 26; Fees and County Assessments
- Requested start date of work: 7/1/2024
- Expected execution date of agreement: Upon Approval
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely: The delay in submitting the service agreement timely was caused by programmatic staffing shortages in identifying the need for the service agreement. Additional delays occurred as the division was in discussions with State of Nevada Purchasing on how to move forward for these services as multiple solicitation waivers were being completed within the division.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: Environmental Health will not have a program to track permits, issue renewals, conduct inspections or record complaints.
 - Explain how the program/bureau will prevent future retroactive requests: The Division of Public and Behavioral Health is intending to align all programs with one vendor that will meet the needs of the division. The waivers have only been approved with the assurances DPBH will be moving forward with the RFP process for these services. Approval of the retro memo allows the division to focus on moving forward to meet the future procurement requirements while not interrupting the daily needs of this division program.

If you have any questions, please contact Tera Hayes at (775) 546-5530 or thayes@health.nv.gov.

cc: Contract Unit
Division of Public and Behavioral Health

Purchasing Use Only:
Approval #: 240709 @

** Note: Purchasing Administrator revisions at #8, #9 **



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

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

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED: DHHS/DPBH/Environmental Health Section (EHS)		
	Contact Name and Title	Phone Number	Email Address
	Teresa Hayes, Health Program Manager 3	775-546-5530	thayes@health.nv.gov
	Michele A Silzell, Admin Services Officer 3	775-684-4052	msilzell@health.nv.gov

1b	Vendor Information:	
	Vendor Name:	Aithent, Inc.
	Contact Name:	Atul Mathur
	Complete Address:	19 Fulton Street, Suite 408, New York, New York 10038
	City, State, and Zip Code	
	Telephone Number:	1-212-725-7646
	Email Address:	atulm@del.aithent.com

1c	Type of Waiver Requested - Check the appropriate type:	
	Sole or Single Source:	Sole Source
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract? Check One:	Yes:	X	No:
	If 'No' Enter Amendment Number:	#		
	Enter CETS Number:	#		

1e	Term:			
	One (1) Time Purchase? Check One:	Yes:		No: X
	Contract:	Start Date:	April 1, 2024	End Date: March 31, 2028

1f	Funding:	
	State Appropriated:	\$132,000 State Fees

Purchasing Use Only:	
Approval #:	246709 (A)

Federal Funds:	
Grant Funds:	
Other (Explain):	

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$132,000.00

2	Provide a description of work/services to be performed or services with goods to be purchased: <i>Aithent will provide support to DPBH/EHS designated representatives, support for trouble shooting and resolving problems when it is determined that Alis software is not operating as defined in software requirements. Provides upgrades to Alis software as necessary for it to work with current versions as supportive browsers. As requested, provide guidance by resolving issues and responding to queries from designated representatives for use of Alis software, perform necessary analysis to identify the cause of reported issues and identify/report solutions as listed to Alis software. Additionally, apply timely software releases, regular backups of data, provide technical assistance (TA) and written systematic extraction procedure manual and written systematic Alis navigation steps.</i>

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor? <i>Aithent created the Alis software for web-based licensing and certification for the Environmental Health Services Bureau and have pre-existing knowledge of operational procedures.</i>

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source: <i>Aithent created the Alis software for web-based licensing and certification for the Environmental Health Services Bureau and have the pre-existing knowledge of operational procedures. Aithent currently handles ongoing required NAC 458 and NRS 458 treatment and prevention certifications and a new system would not be cost efficient.</i>

5	Were alternative services or commodities evaluated?	Check One:		
		Yes	No	
				X
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.			
	b. <u>If not</u> , why were alternatives not evaluated?			
	<i>Other services were not evaluated due to DPBH using specific software designed by Aithent that is proprietary to the vendor.</i>			

6	Has the agency purchased these services/services with goods in the past? Check One:				Yes	No
	NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>				x	
	a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u>					
	Term		Value	Short Description	Provide Type of Procurement RFP#, RFQ#, Waiver #	CETS #
	Start Date	End Date				
4/1/2020	3/31/2024	\$132,000	Maintenance Agreement for web-based licensing & regulatory system	MA17651	N/A	
03/29/18	03/31/2020	\$60,000.00	Maintenance Agreement for web-based licensing & regulatory system	MA 16493	N/A	
03/11/2014	12/31/2018	\$2,142,850.00	New contract, one-stop system for web-based licensing and regulatory system for Health Facilities, Clinical Laboratories, Child Care Facilities, Food Handling Establishments, Dietitians, Music Therapists, Emergency Medical Services, Med Marijuana registry for entities within DPBH	RFP 3079/ DPBH C14294, DPBH C14294-1, DPBH C14294-2, DPBH C14294-3, DPBH C14294-4, DPBH C14294-5, DPBH C14294-6	15307, 15307-1, 15307-2, 15307-3, 15307-4, 15307-5, 15307-6	

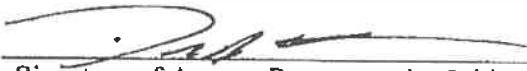
7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
	Keeping the Aithent contract in place is critical for EHS to meet its statutory and regulatory licensing requirements and to perform its regulatory duties per NAC 458 and NRS 458, effectively and efficiently, in addition to being customer focused and allowing for secure payment processing not only for EHS but multiple programs within DPBH, (Environmental Health Services, Healthcare Quality and Compliance, Radiation Control, Emergency Medical Services, and Behavioral Health and Wellness Prevention).

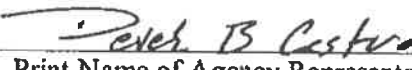
8	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?
	ALiS is a proprietary software developed by Aithent for DPBH. The Division of Public and Behavioral Health will be researching the feasibility on completing either a division wide ~~RFP~~ RFP for the services currently being provided by Aithent or if the services become too specific that the bureaus will require individual RFPs.

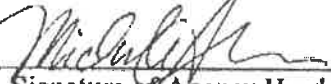
Purchasing Use Only:
Approval #: 2407090

9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions. a. If yes, please provide details regarding future obligations or needs. The Environmental Health Services Bureau may exercise the right to request an additional extension if business needs are identified that may impact the overall need for conducting state business. The overall intent is to align the Division of Public and Behavioral Health with one vendor that will meet the needs of the division. Allowing the waiver to be approved through 2028 brings all the bureaus in line with one end date that provides the division the time needed to complete a RFP process and ensure the state is using the vendor that meets the divisions future needs.	X	O

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.


 Signature of Agency Representative Initiating Request


 Print Name of Agency Representative Initiating Request 7-29-2024
Date


 Signature of Agency Head Authorizing Request

Michelle A. Silzell
 Print Name of Agency Head Authorizing Request 7/29/24
Date

FOR PURCHASING USE ONLY – PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

 Name of agency or entity who provided information or review:

 Representative Providing Review

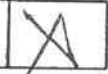
 Print Name of Representative Providing Review _____
Date

Purchasing Use Only:
Approval #: 240709 @

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at cstoeffler@admin.nv.gov.

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.



Approved by:

Administrator, Purchasing Division or Designee

7/30/24

Date

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30077**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	LONG-TERM CARE CONSULTANTS, LLC
Agency Code:	406	Contractor Name:	LONG-TERM CARE CONSULTANTS, LLC
Appropriation Unit:	3216-17	Address:	5962 LA PLACE COURT STE 240
Is budget authority available?:	Yes	City/State/Zip	CARLSBAD, CA 92008
If "No" please explain:	Not Applicable		
To what State Fiscal Year(s) will the contract be charged?	2025-2028		
What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.			
General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Federal civil money penalties from Center for Medicare and Medicaid Services

Agency Reference #: C18416

2. Contract start date:

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

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2028**Contract term: **3 years and 60 days**4. Type of contract: **Contract**Contract description: **Training**

5. Purpose of contract:

This is a new contract to provide clinical and in-service training for nursing home staff.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$104,580.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Written approval from CMS per submitted applications for use of Civil Money Penalties funds.

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

Federal CMP funds are only authorized for CMS-approved projects that benefit recipients of care from Skilled Nursing Facilities. CMS issues an approval letter for the vendor specified in the letter to carry out the CMP approved project.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicableb. Solicitation Waiver: **Not Applicable**

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

CMS issues an approval letter for a specified vendor to carry out the CMP approved project. There is no RFP associated with these CMS CMP contracts but a CMS application process for selection.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Other

Foreign Limited-Liability Company

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

Yes

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

Yes

18. 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	msilzell	12/19/2024 17:07:52 PM
Division Approval	msilzell	12/19/2024 17:07:57 PM
Department Approval	msilzell	12/19/2024 17:08:00 PM
Contract Manager Approval	lstidha1	02/04/2025 12:55:34 PM
Budget Analyst Approval	cdavis	04/09/2025 13:58:44 PM
BOE Agenda Approval	klay0	04/17/2025 11:43:12 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30272**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	NEVADA STATE BOARD OF NURSING
Agency Code:	406	Contractor Name:	NEVADA STATE BOARD OF NURSING
Appropriation Unit:	3216-12	Address:	6005 Plumas St. Suite 100
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89519
If "No" please explain:	Not Applicable	Contact/Phone:	775-687-7734
		Vendor No.:	
		NV Business ID:	Government Agency
To what State Fiscal Year(s) will the contract be charged?	2026-2029		

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

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 #:	18504		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **Program Development**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing program development to regulate nursing assistants employed in nursing facilities and home health agencies.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$926,100.00**

Other basis for payment: \$231,525.00 per Each State Fiscal Year (SFY26, SFY27, SFY28, SFY29)

II. JUSTIFICATION

7. What conditions require that this work be done?

The Health Division is obligated to implement and determine compliance with the provisions of public Law 100-203 (Omnibus Budget Reconciliation Act of 1987) including amendments to, and regarding P.L. 100-203, with respect to the development of a program to regulate nursing assistants employed in nursing facilities and home health agencies in the state. The contractor is qualified to perform these duties efficiently and in a timely manner

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

Agreement with another State Agency

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

Exempt per NRS 277.180

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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	msilzell	03/26/2025 17:54:52 PM
Division Approval	msilzell	03/26/2025 17:54:54 PM
Department Approval	Istidha1	04/07/2025 17:08:51 PM
Contract Manager Approval	Istidha1	04/07/2025 17:08:53 PM
Budget Analyst Approval	cdavis	04/09/2025 15:45:35 PM
BOE Agenda Approval	klay0	04/17/2025 12:04:58 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30018**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Silver Kite Community Arts Consulting, LLC
Agency Code:	406	Contractor Name:	Silver Kite Community Arts Consulting, LLC
Appropriation Unit:	3216-17	Address:	5508 35th Ave NE Suite 100
Is budget authority available?:	Yes	City/State/Zip	Seattle , WA 98105
If "No" please explain:	Not Applicable	Contact/Phone:	Jennifer Kulik, PhD 360-218-4884
		Vendor No.:	T29049595
		NV Business ID:	NV20243199837

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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

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

Agency Reference #: C18462

2. Contract start date:

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

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2026**Contract term: **1 year and 59 days**4. Type of contract: **Contract**Contract description: **Art Program**

5. Purpose of contract:

The is a new contract to provide art workshops for residents in nursing homes.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$104,556.24****II. JUSTIFICATION**

7. What conditions require that this work be done?

Written approval from CMS per submitted applications for use of the Civil Money Penalties funds.

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

Federal CMP funds are only authorized for CMS-approved projects that benefit recipients of care from Skilled Nursing Facilities. CMS issues an approval letter for the vendor specified in the letter to carry out the CMP approved project.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicableb. Solicitation Waiver: **Not Applicable**

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

CMS issues an approval letter for a specified vendor to carry out the CMP approved project. There is no RFP associated with these CMS CMP contracts but a CMS application process for selection.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Other

Foreign Limited-Liability Company

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

Yes

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

Yes

18. 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	msilzell	12/10/2024 17:10:52 PM
Division Approval	msilzell	12/10/2024 17:10:55 PM
Department Approval	msilzell	12/19/2024 17:09:36 PM
Contract Manager Approval	Istidha1	02/05/2025 09:49:40 AM
Budget Analyst Approval	pokeefe	04/14/2025 11:34:26 AM
BOE Agenda Approval	nrezaie	04/18/2025 09:15:50 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30258**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Carahsoft Technology Corporation
Agency Code:	409	Contractor Name:	Carahsoft Technology Corporation
Appropriation Unit:	3146-34	Address:	1860 Michael Faraday Drive Ste. 100
Is budget authority available?:	No	City/State/Zip	Reston, VA 20190
If "No" please explain: Pending approval of non-IFC WP 25AR314601.		Contact/Phone:	Bethany Blackwell 703-230-7435
		Vendor No.:	PUR0004357
		NV Business ID:	NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/13/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/12/2026**Contract term: **364 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **Motivational Int AI**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-13299 which provides cloud services. This service agreement provides platform access, planning, quality improvement, training, and support services for implementation of a child welfare motivational interviewing artificial intelligence tool to standardize service delivery and to provide continuous quality improvement and fidelity monitoring.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$102,216.00**

Other basis for payment: In accordance with Attachment BB: Contractor's Quote

II. JUSTIFICATION

7. What conditions require that this work be done?

Nevada's three child welfare agencies are implementing Motivational Interviewing under the Family First Prevention Services Act (FFPSA). Any evidence-based programs implemented under this act require Continuous Quality Improvement (CQI) and fidelity monitoring of the services delivered to claim Title IV-E funding for the service. Nevada is going to provide Motivational Interviewing as a Family First prevention service and needs to implement fidelity monitoring and evaluation of caseworkers practice of Motivational Interviewing in Nevada.

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

State employees are not trained in, nor do they have the capacity to provide expert evaluation of the use of Motivational Interviewing by other staff.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

d. Last bid date:

Anticipated re-bid date:

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

b. Is the contract part of an IT investment project over \$50,000? 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:

Beverly Brown, Social Services Chief II Ph: 775-684-4244

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	02/20/2025 11:24:01 AM
Division Approval	kmccann	02/20/2025 11:47:27 AM
Department Approval	mwillia9	03/04/2025 09:30:01 AM
Contract Manager Approval	dfrohlic	03/19/2025 16:28:16 PM
EITS Approval	ljea	03/20/2025 08:05:04 AM
Budget Analyst Approval	pokeefe	04/15/2025 17:06:17 PM
BOE Agenda Approval	klay0	04/18/2025 16:35:05 PM
BOE Final Approval	Pending	



**STATE OF NEVADA
GOVERNOR'S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Marla McDade Williams, Administrator, DCFS, DHHS
Kelsey McCann Navarro, Admin. Services Officer IV, DCFS, DHHS
Beverly Brown, Social Services Chief II, DCFS, DHHS
Srinivas Bokka, IT Manager II, DCFS, DHHS

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
Adam Miller, Administrator, OCDC
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DCFS – TIN 906 – *DCFS - Lyssn - Motivational Interviewing - AI Platform* – Update A – BA 3146

DATE: February 21, 2025

We have completed our review for the Department of Health and Human Services (DHHS), Division of Child and Family Services (DCFS) – *DCFS - Lyssn - Motivational Interviewing - AI Platform* – TIN 906, Update A.

The submitted TIN, for an estimated value of \$102,216.00 in the FY24/FY25 biennium (100% Federal Grant funding), is to update cost and funding information for Lyssn, an Artificial Intelligence solution that supports training, supervision, and quality improvement, specifically providing automated feedback on Motivational Interviewing fidelity.

Under the Family First Prevention Services Act (FFPSA), Nevada's three child welfare agencies are adopting Motivational Interviewing, necessitating Continuous Quality Improvement (CQI) and fidelity monitoring of services delivered. To address this requirement, the agencies are investing in Lyssn, an Artificial Intelligence platform uniquely designed for this purpose. Lyssn, with exclusive rights to its proprietary software, offers a clinically validated AI tool that provides automated feedback on the fidelity of Motivational Interviewing.

Lyssn transforms the conventional, labor-intensive process of quality monitoring in child welfare and behavioral health into an efficient, scalable, and cost-effective system. Unlike traditional methods, which are manual, inconsistent, and incapable of handling every interaction, Lyssn's AI evaluates every communication—whether text, call, or video. It ensures high-quality, consistent feedback akin to that of an expert human evaluator but delivered swiftly and affordably. The system captures each conversation, providing high-fidelity transcriptions and structured clinical notes, followed by expert analysis for actionable feedback.

This technological advancement not only enhances the quality and engagement of Motivational Interviewing but also streamlines documentation and management of the practice. Importantly, the implementation of Lyssn's AI will aid the state in maximizing Title IV-E funding reimbursement for these services and reduce the costs associated with the federally mandated CQI and fidelity monitoring. The investment includes the integration of custom-developed software, hosted via cloud-based services, ensuring no impact on the current server environment or network infrastructure. This strategic investment represents a significant advancement in the application of technology within child welfare services, aligning with federal requirements and enhancing service delivery effectiveness.

Leveraging sophisticated encryption technologies and secure cloud-based environments, the platform claims to meet stringent standards for personal and sensitive information. The AI component of the system is specifically designed to handle large volumes of data securely, with continuous security monitoring and regular system audits to promptly identify and address potential vulnerabilities. This comprehensive security framework ensures that AI technology not only enhances service delivery and efficiency but also maintains the highest standards of data security and privacy, aligning with federal mandates for Continuous Quality Improvement and fidelity monitoring under the Family First Prevention Services Act.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30474**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3710-30**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: EmbGro

Contractor Name: **EmbGro**Address: **543 Plumas Street**City/State/Zip **Reno, NV 89509**

Contact/Phone: Steven Wood Nicholas 775-335-5746

Vendor No.: T29047765

NV Business ID: NV20211982778

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

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

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

2. Contract start date:

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

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **60 days**4. Type of contract: **Contract**Contract description: **Wellness Program/APP**

5. Purpose of contract:

This is a new contract to construct and develop a wellness program and mobile application for peer support.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$190,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This is needed for the mental health and support of Nevada Department of Correction personnel.

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

No state agency offers this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

ITR Training Institute
EmbGro
Grio
Benchmark Analytics

b. Solicitation Waiver: **Not Applicable**

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

Vendor was chosen in response to RFP 44DOC-S321- AM

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jgiesle2	04/12/2025 20:05:41 PM
Division Approval	jgiesle2	04/12/2025 20:05:43 PM
Department Approval	jgiesle2	04/12/2025 20:05:46 PM
Contract Manager Approval	blewalle	04/14/2025 07:24:02 AM
Budget Analyst Approval	vyoungb	04/14/2025 11:56:58 AM
BOE Agenda Approval	nrezaie	04/17/2025 12:49:51 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 CONTRACT1. Contract Number: **30389**Agency Name: **DPS-HIGHWAY PATROL**Agency Code: **651**Appropriation Unit: **4721-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ITERIS, INC.**Contractor Name: **ITERIS, INC.**Address: **1700 CARNEGIE AVENUE**City/State/Zip: **SANTA ANA, CA 92705-5551**Contact/Phone: **DELAINE ADKINS 208-419-0122**Vendor No.: **T27038232**NV Business ID: **NV20041687546**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

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

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

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/31/2027**Contract term: **1 year and 275 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **ITD/PRISM Prog Supp**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV22-12546 which provides grant related professional services. This service agreement provides professional services to support the administration of the Innovative Technology Deployment and Performance Registration Information System Management grant programs.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$101,590.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Highway Patrol (NHP) is an active participant in the Federal Motor Carrier Safety Administration (FMCSA) Innovative Technology Deployment (ITD) Program. The purpose of the ITD program is to advance the technological capability and promote the deployment of intelligent transportation system applications for commercial vehicle operations (CVO), including commercial motor vehicle (CMV), commercial driver, and carrier-specific information systems and networks.

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

There are not any State employees qualified to perform these duties.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

Iteris Inc. has a current statewide contract, #99SWC-NV22-12546.

d. Last bid date:

Anticipated re-bid date:

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

NHP. 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:

Kasen Cornmesser, Contract Manager - NHP Ph: 775-684-4869

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bsalisbu	03/25/2025 17:22:09 PM
Division Approval	thick2	03/28/2025 11:23:14 AM
Department Approval	kdefe1	04/01/2025 16:36:00 PM
Contract Manager Approval	mcosenti	04/02/2025 10:42:38 AM
Budget Analyst Approval	jhelto1	04/08/2025 09:25:56 AM
BOE Agenda Approval	bmacke1	04/16/2025 17:53:29 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30436**Agency Name: **DPS-RECORDS,
COMMUNICATIONS, AND
COMPLIANCE**Agency Code: **655**Appropriation Unit: **4702-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CONVERGEONE, INC.**Contractor Name: **CONVERGEONE, INC.**Address: **10900 NESBITT AVENUE SOUTH**City/State/Zip: **BLOOMINGTON, MN 55437**Contact/Phone: **BRIAN KELLY 720-279-5812**Vendor No.: **T32004231A**NV Business ID: **NV20011490185**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

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

X	General Funds	28.50 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	X Other funding	71.50 % COST ALLOCATION

Agency Reference #: **65DPS-S3091/HM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **06/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Dispatch Phone Sys**

5. Purpose of contract:

This is a new contract to provide a dispatch phone system to improve response to routine and emergency situations.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,646,651.97****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Communications Bureau provides the department's dispatch services and is responsible for dispatching and facilitating officer responses in routine and emergency situations and answering phone calls from 911 primary public safety answering points (PSAP). A robust phone system will improve the division's response to routine and emergency situations. The bureau has dispatch centers in Carson City and Las Vegas and is a secondary PSAP.

The current phone system is antiquated and does not meet the needs of a modern PSAP. With Nevada's vast geography, oftentimes individuals calling into the DPS PSAP don't know which roadway they are on, or which mile marker they may be near in order for the dispatchers to facilitate assistance, whether it be routine or emergency; non-English-speaking callers are placed on hold in order for dispatch staff to facilitate a third party company to provide translation services; the current phone system disconnects callers if the call is not answered within a certain number of rings. This opens the state to liabilities if the call is an emergency and the caller is disconnected. Further, call recordings are dropped, which impacts government transparency when recordings are requested for court proceedings and/or public records requests.

There is modern dispatch call handling solutions on the market that can enhance public and officer safety. These solutions provide a myriad of enhancements from what is available to the Communications Bureau today. Further, the enhancements that the solutions will provide to the state will allow the dispatchers to react and respond more quickly and efficiently than the current system allows.

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

The Communications Bureau is reliant on a functional phone system to perform their duties. The goal is to locate a solution that will benefit the Communications Bureau as a PSAP and to provide enhanced public safety services to the state's police officers and constituents.

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):

CentralSquare
General Security and Response Services
NGA 911

- b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #65DPS-S3091, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 12/19/2024 Anticipated re-bid date: 12/01/2029

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

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

Not Applicable

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

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

Not Applicable

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

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes
17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes
18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes
19. Agency Field Contract Monitor:
KAMI THOMPSON, Management Analyst II Ph: 775-684-6259

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhevener	04/08/2025 16:58:59 PM
Division Approval	thick2	04/09/2025 09:51:41 AM
Department Approval	mcosenti	04/09/2025 10:10:35 AM
Contract Manager Approval	mcosenti	04/09/2025 10:10:39 AM
EITS Approval	ljean	04/09/2025 12:22:09 PM
Budget Analyst Approval	jhelto1	04/11/2025 12:43:58 PM
BOE Agenda Approval	bmacke1	04/16/2025 17:54:11 PM
BOE Final Approval	Pending	



**STATE OF NEVADA
GOVERNOR'S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Eric Souza, Administrator, DPS
Jason Kolenut, Administrative Services Officer III, DPS
Tom Dorsey, IT Manager III, DPS
Brett Patterson, Business Process Analyst III, DPS

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
Sean Montierth, Computing Services Unit, OCIO
Cameron Carey, Network Services Unit, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DPS – TIN 918 – *Dispatch Phone Solution* – BA 4702

DATE: April 24, 2024

We have completed our review for the Department of Public Safety's (DPS) – *Dispatch Phone Solution* – TIN 918.

The submitted TIN, for an estimated value of \$1,000,000.00 in the FY26/FY27 biennium (100% General Fund), is to support a Request for Information/Proposal (RFI/RFP) to enhance the capabilities of the Communications Bureau through the integration of advanced technologies into the existing Computer-Aided Dispatch (CAD) system.

The solution is anticipated to leverage artificial intelligence to triage incoming phone calls, streamline location services, and facilitate rapid and precise location identification for dispatchers. Additionally, the system is expected to support video feeds, with the caller's consent, which can be directly linked to field units.

This technological enhancement is needed to assuage the stressful and intense workload on Public Safety Dispatchers (PSDs) who are crucial in maintaining officer and public safety around the clock. Given the historical staffing challenges and high vacancy rates within the bureau, this solution is intended to reduce the stress and dissatisfaction among the dispatchers and to enhance the overall efficiency and safety of operations.

The system must adhere to stringent federal and other relevant security standards to manage risks associated with the handling and processing of personal identification information. The planned upgrades include a transition to cloud-based server hosting, which is expected to reduce the need for physical server maintenance and associated costs. Additionally, new telecommunications and LAN equipment will be installed, including Power over Ethernet switches, to support the upgraded infrastructure.

Overall, this investment is critical for improving the operational efficiency of the Communications Bureau, which handled over 1.4 million calls in the previous year alone and aligns with broader goals to modernize public safety communications infrastructure while ensuring high security and reliability.

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

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **23187**Amendment
Number: **2**Agency Name: **DPS-RECORDS,
COMMUNICATIONS, AND
COMPLIANCE**Legal Entity
Name: **MANAGEMENT TECHNOLOGY
GROUP, L.L.C.**Contractor Name: **MANAGEMENT TECHNOLOGY
GROUP, L.L.C.**Agency Code: **655**Address: **dba MTG Management Consultants**Appropriation Unit: **4709-22**Is budget authority
available?: **Yes**City/State/Zip **Port Matilda, PA 16870**

If "No" please explain: Not Applicable

Contact/Phone: Robert Kaelin 206-689-2218

Vendor No.: T29025149

NV Business ID: NV20041240020

To what State Fiscal Year(s) will the contract be charged? **2021-2026**

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

X	General Funds	10.00 %	X	Fees	90.00 % Program
	Federal Funds	0.00 %		Bonds	0.00 %
	Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: RFP #65DPS-SA1080

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **07/01/2020**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2026**Contract term: **6 years**4. Type of contract: **Contract**Contract description: **NCJIS Mod/QA-ChgMgr**

5. Purpose of contract:

This is the second amendment to the original contract which provides change management, quality assurance and senior advisor services for the Nevada Criminal Justice Information System modernization solution. This amendment increases the maximum amount from \$4,980,266 to \$5,301,798 due to the increased need for consulting services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$4,478,632.00	\$4,478,632.00	\$4,478,632.00	Yes - Action
a. Amendment 1:	\$501,634.00	\$501,634.00	\$501,634.00	Yes - Action
2. Amount of current amendment (#2):	\$321,532.00	\$321,532.00	\$321,532.00	Yes - Action
3. New maximum contract amount:	\$5,301,798.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Change Management, Quality Assurance and Senior Advisor services are required as part of the successful implementation of the Nevada Criminal Justice Information System (NCJIS) Modernization solution and for optimum success are provided from a vendor separate than the solution vendor.

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

State employees do not have the skill set to complete the tasks for this level of modernization project.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? Yes

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

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP #65DPS-S1080, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

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

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

MTG has performed work for various State agencies since 2010 and specifically with DPS since 2011, all of which has been satisfactory.

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

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

Not Applicable

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

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

Budget Account Approval

User

jkolenut

Signature Date

03/12/2025 16:26:59 PM

Division Approval	thick2	03/12/2025 16:36:21 PM
Department Approval	mcosenti	03/13/2025 14:54:38 PM
Contract Manager Approval	mcosenti	03/13/2025 14:54:44 PM
Budget Analyst Approval	khawkin1	03/17/2025 08:57:47 AM
BOE Agenda Approval	bmacke1	03/20/2025 18:13:17 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: **24936** Amendment Number: **1**

Agency Name: **DPS-TRAFFIC SAFETY** Legal Entity Name: **KIMLEY-HORN AND ASSOCIATES, INC.**

Agency Code: **658** Contractor Name: **KIMLEY-HORN AND ASSOCIATES, INC.**

Appropriation Unit: **4688-13** Address: **6671 Las Vegas Boulevard South Suite 320**

Is budget authority available?: **Yes** City/State/Zip: **Las Vegas, NV 89119**

If "No" please explain: Not Applicable Contact/Phone: **Mike Colety 702-862-3609**

Vendor No.: **T81098457A**

NV Business ID: **NV19911015458**

To what State Fiscal Year(s) will the contract be charged? **2022-2026**

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

General Funds	0.00 %	Fees	0.00 %
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 **10/12/2021**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **10/31/2025**

Termination Date:

Contract term: **4 years and 20 days**4. Type of contract: **Contract**Contract description: **HSP Coordinator**

5. Purpose of contract:

This is the first amendment to the original contract which provides consultant services in support of the development and maintenance of the Nevada Highway Safety Plan. This amendment increases the maximum amount of the contract from \$500,000 to \$720,000 due to the continued need for the consulting services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$500,000.00	\$500,000.00	\$500,000.00	Yes - Action
2. Amount of current amendment (#1):	\$220,000.00	\$220,000.00	\$220,000.00	Yes - Action
3. New maximum contract amount:	\$720,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Office of Traffic Safety has been tasked with the Nevada Highway Safety Plan, and they administer programs that address traffic safety behavioral considerations. In 2010, the Zero Fatalities Campaign was adopted and incorporated in the NHSP to further improve highway safety. The Division requires assistance in providing statistical data and analysis to incorporate into the NHSP, as well as aligning data with strategic planning, and coordinating with Nevada DOTs Strategic Highway Safety Plan.

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

No State employee has the expertise to complete the scope of work required.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Not Applicable**

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

This was a joint RFP through Nevada Department of Transportation, RFP#542-19-816. This was the most qualified vendor.

d. Last bid date: 10/19/2019 Anticipated re-bid date: 10/19/2023

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

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

III. OTHER INFORMATION

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

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

194.46%

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

Yes If "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 was under contract with the Department of Public Safety, Office of Traffic Safety and service has been satisfactory.

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

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

Not Applicable

15. The contractor is 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	dbanda	04/08/2025 14:11:53 PM
Division Approval	thick2	04/08/2025 14:12:55 PM
Department Approval	mcosenti	04/08/2025 14:45:20 PM
Contract Manager Approval	mcosenti	04/08/2025 14:45:25 PM
Budget Analyst Approval	bmacke1	04/18/2025 15:10:36 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **29076**Amendment
Number: **1**Agency Name: **DCNR - PARKS DIVISION**Legal Entity
Name: **TAHOE REGIONAL PLANNING
AGENCY**Agency Code: **704**Contractor Name: **TAHOE REGIONAL PLANNING
AGENCY**Appropriation Unit: **4162-00**Address: **PO BOX 5310**Is budget authority
available?: **Yes**City/State/Zip **STATELINE, NV 89449-5310**

If "No" please explain: Not Applicable

Contact/Phone: **775-588-4547**Vendor No.: **T80989419**NV Business ID: **governmental entity**To what State Fiscal Year(s) will the contract be charged? **2024-2028**

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

General Funds	0.00 %	Fees	0.00 %
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 **04/01/2024**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **04/01/2028**Contract term: **4 years and 1 day**4. Type of contract: **Interlocal Agreement**Contract description: **AIS Boat Inspections**

5. Purpose of contract:

This is the first amendment to the original revenue interlocal agreement which provides ongoing personnel to support the Lake Tahoe Watercraft Inspection Program to prevent the introduction of aquatic invasive species. This amendment increases the maximum amount from \$421,936 to \$541,936 due to increased salaries approved by the 2023 Nevada Legislative session.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$421,936.00	\$421,936.00	\$421,936.00	Yes - Action
2. Amount of current amendment (#1):	\$120,000.00	\$120,000.00	\$120,000.00	Yes - Action
3. New maximum contract amount:	\$541,936.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Lake Tahoe Watercraft Inspection Program was formed to prevent the introduction of aquatic invasive species in 2007.

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

State Parks does not have adequate staff to manage this program.

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? No

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

TRPA Interlocal Contract has been in place since 2016 while operating the AIS program at Lake Tahoe State Parks. The agreement 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	ethick1	04/02/2025 08:04:10 AM
Division Approval	ethick1	04/02/2025 08:04:18 AM
Department Approval	ethick1	04/02/2025 08:04:25 AM
Contract Manager Approval	ethick1	04/09/2025 13:57:49 PM
Budget Analyst Approval	31400	04/09/2025 14:36:10 PM
BOE Agenda Approval	bmacke1	04/18/2025 12:02:14 PM

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30340**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3187-52**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Broadbent & Associates, Inc.

Contractor Name: **Broadbent & Associates, Inc.**Address: **5450 Louie Lane, # 101**City/State/Zip **Reno, NV 89511-1832**

Contact/Phone: Joshua P. Fortmann, C.E.M. 775/322-7969

Vendor No.: T80989610B

NV Business ID: NV19891031637

To what State Fiscal Year(s) will the contract be charged? **2026-2029**

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

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 #: 70CNR-S3119 NF

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **St Response Program**

5. Purpose of contract:

This is a new contract to provide ongoing support services for the State Response Program by conducting site-specific assessment, cleanup, and other redevelopment activities at sites deemed eligible to receive Brownfields and State Response funding.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,800,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The small Business Liability Relief and Brownsfields Revitalization Act (1-11-2002) set initiatives and provisions to aid in the identification, assessment, and remediation of properties where expansion, reuse, or redevelopment has been complicated due to the presence, or potential presence of a hazardous substance, pollutant, or contaminant. US EPA provides Grants to NDEP to assist in meeting Federal and State requirements to address correction at sites where groundwater or soil is affected by hazardous substance contamination.

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

The State of Nevada does not have the staffing capacity, technical expertise, or resources to fulfill this work.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

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

The Fehling Group
TruePani
Terraphase Engineering Inc.

b. Solicitation Waiver: **Not Applicable**

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

Pursuant to RFP 70CNR-S3119, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by the independently appointed evaluation committee.

d. Last bid date: Anticipated re-bid date: 01/01/2029

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

No If "Yes", please explain

Not Applicable

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

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

This vendor has provided other contract and support services to the State of Nevada and NDEP, NDEP has been satisfied with this vendor's performance and quality of work.

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

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

Not Applicable

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

Nevada Corporation

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

Yes

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

Yes

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

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mfrien1	03/14/2025 10:24:57 AM
Division Approval	jcollin5	03/14/2025 10:38:31 AM
Department Approval	jcollin5	03/14/2025 10:38:37 AM
Contract Manager Approval	kvalde1	03/14/2025 10:55:15 AM
Budget Analyst Approval	31400	03/14/2025 11:57:50 AM
BOE Agenda Approval	vmilazz1	03/29/2025 11:05:09 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 CONTRACT1. Contract Number: **30153**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Agency Code: **709**Appropriation Unit: **3187-08**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Northern Nevada Public Health

Contractor Name: **Northern Nevada Public Health**Address: **1001 E 9TH St., Bldg B.**City/State/Zip: **RENO, NV 89512-2845**

Contact/Phone: Chad Kingsley 775/328-2416

Vendor No.: T40283400Q

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2026-2029**

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

General Funds 0.00 % **X** Fees **50.00 % Petroleum Fund****X** Federal Funds **50.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: DEP 25-044

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Interlocal Agreement**Contract description: **UST Program NNPH**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing underground storage tank tracking, monitoring, site visits, and reporting.

6. NEW CONTRACT

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

Payment for services will be made at the rate of \$150,000.00 per Fiscal Year

II. JUSTIFICATION

7. What conditions require that this work be done?

Regulated Underground Storage Tank Systems require periodic compliance inspections to prevent and or discover leaks in a timely manner. Enforcement activities at facilities, and with owners/operators, may be required if non-compliant. When a regulated Underground Storage Tank System has a release, repair and appropriate corrective action will be taken.

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

NDEP does not have the staff to perform all compliance and oversight services in Northern Nevada.

9. Were quotes or proposals solicited?

No

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

No

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NRS 277.180 authorizes one or more public agencies to contract with another public agency to perform governmental functions.

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

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

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

III. OTHER INFORMATION

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

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

Not Applicable

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

No

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

No

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

Yes If "Yes", please explain

Northern Nevada Public Health is a political subdivision of the State of Nevada.

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

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

DCNR- NDEP- BCA has contracted for the same services with NNPH, formerly WCHD, for over 25 years.

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

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

Not Applicable

15. The contractor is 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	mfrien1	04/07/2025 14:16:37 PM
Division Approval	jcollin5	04/07/2025 15:44:53 PM
Department Approval	jcollin5	04/07/2025 15:44:59 PM
Contract Manager Approval	kvalde1	04/07/2025 15:46:40 PM
Budget Analyst Approval	31400	04/08/2025 08:53:28 AM
BOE Agenda Approval	bmacke1	04/18/2025 14:15:11 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

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

I. DESCRIPTION OF CONTRACT1. Contract Number: **30317**

Agency Name:	DCNR - ENVIRONMENTAL PROTECTION	Legal Entity Name:	U.S. DEPARTMENT OF THE INTERIOR, BUREAU OF LAND MANAGEMENT
Agency Code:	709	Contractor Name:	U.S. DEPARTMENT OF THE INTERIOR, BUREAU OF LAND MANAGEMENT
Appropriation Unit:	3188-04	Address:	1340 Financial Blvd
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89502-7147
If "No" please explain:	Not Applicable	Contact/Phone:	775-861-6538
		Vendor No.:	T80964941
		NV Business ID:	Government Entity
To what State Fiscal Year(s) will the contract be charged?	2026-2033		

What is the source of funds that will be used to 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 % Reclamation
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **DEP25-038**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2033**Contract term: **8 years and 1 day**4. Type of contract: **Interlocal Agreement**Contract description: **Bonding Liaison**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing liaison and technical expert services, including coordination of bond activities, review of reclamation cost estimates, engineering, site visits, and inspections.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$960,661.13****II. JUSTIFICATION**

7. What conditions require that this work be done?

State and Federal regulations require operators of mining operations and/or exploration projects to provide updated reclamation cost estimates to ensure that operators have adequate surety filed so that reclamation activities can be completed. The current staffing level cannot keep up with the workload. The state statutes and regulations require all projects, including those whose lands are administered by the Bureau of Land Management (BLM) to obtain a reclamation permit, provide a surety and provide periodic updates to the reclamation cost estimate to ensure the project is adequately bonded. Our current workload is 272 projects, of which 216 of these projects are mixed land projects which include BLM administered land, and require review and approval from both NDEP and BLM. Therefore NDEP and BLM propose to fund a position that will perform the review for both agencies. This position will prevent duplication of effort, streamline the process for the operators and enable NDEP to meet regulatory requirements.

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

This is a contract position is for a Bureau of Land Management (BLM) liaison to coordinate with the Bureau of Mining Regulations and Reclamation (BMRR)-Reclamation Branch staff. This coordination is agreed upon in the MOU signed between the 2 agencies.

The coordination assists in establishing BLM staff contacts and BMRR staff contacts to concurrently facilitate submittal reviews and determining adequate financial assurance for both exploration and mine projects .

In addition, the liaison position also assists in resolving submittal discrepancies between BLM and BMRR.

9. Were quotes or proposals solicited? No

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

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

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

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

NAC 519A.380 (2)(a)

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

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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:

Ashley Taylor, Bureau Chief Ph: null
null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mfrien1	04/01/2025 06:53:41 AM
Division Approval	sfontai1	04/01/2025 11:50:21 AM
Department Approval	jkinde1	04/02/2025 07:31:26 AM
Contract Manager Approval	scairo19	04/02/2025 07:39:06 AM

Budget Analyst Approval
BOE Agenda Approval
BOE Final Approval

31400
bmacke1
Pending

04/02/2025 09:57:58 AM
04/18/2025 15:08:32 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **26808** Amendment Number: **4**

Agency Name: **DCNR - ENVIRONMENTAL PROTECTION** Legal Entity Name: **TERRAPHASE ENGINEERING INC.**

Agency Code: **709** Contractor Name: **TERRAPHASE ENGINEERING INC.**

Appropriation Unit: **3197-20** Address: **PO BOX 102399**

Is budget authority available?: **Yes** City/State/Zip: **PASADENA, CA 91189-0117**

If "No" please explain: Not Applicable Contact/Phone: **Mark Gookin 775-331-8890**

Vendor No.: **T27042197**

NV Business ID: **NV20181232189**

To what State Fiscal Year(s) will the contract be charged? **2023-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **#3197 Bureau of Safe Drinking Water**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/16/2022**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2025**Contract term: **2 years and 226 days**4. Type of contract: **Contract**Contract description: **Lead Testing Schools**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides testing for lead in drinking water in charter schools. This amendment increases the maximum amount from \$98,778 to \$126,778 as well as reallocating task amounts, due to the continued need of these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$98,778.00	\$98,778.00	\$98,778.00	Yes - Info
a. Amendment 1:	\$0.00	\$0.00	\$98,778.00	No
b. Amendment 2:	\$0.00	\$0.00	\$98,778.00	No
c. Amendment 3:	\$0.00	\$0.00	\$98,778.00	No
2. Amount of current amendment (#4):	\$28,000.00	\$28,000.00	\$126,778.00	Yes - Action
3. New maximum contract amount:	\$126,778.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

No previous state wide testing program for Charter Schools currently exist for the testing of lead in drinking water.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This activity exceeds the capacity of current NDEP staff to complete this work.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

- a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

- c. Why was this contractor chosen in preference to other?

Pursuant to RFP #70CNR-S2028 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

- d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

May 2018 to present

Department of Environmental Protection Bureau of Corrective Actions

Very satisfactory quality of service per reference Jon Zittel formerly of Bureau of Corrective Actions

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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

ahanso1

03/19/2025 14:22:35 PM

Division Approval	mfrien1	03/19/2025 14:22:51 PM
Department Approval	jcarr	03/19/2025 14:25:03 PM
Contract Manager Approval	rbetanco	03/21/2025 10:03:19 AM
Budget Analyst Approval	31400	03/21/2025 10:10:27 AM
BOE Agenda Approval	bmacke1	04/18/2025 14:16:57 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30433**

Agency Name:	B&I - INDUSTRIAL RELATIONS DIV	Legal Entity Name:	THE LAW OFFICES OF CHARLES R. ZEH, ESQ., LLC
Agency Code:	742	Contractor Name:	THE LAW OFFICES OF CHARLES R. ZEH, ESQ., LLC
Appropriation Unit:	4682-04	Address:	CHARLES R ZEH ESQ 6900 S McCarran Blvd Ste 2040
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89501-1979
If "No" please explain:	Not Applicable	Contact/Phone:	Charles R Zeh, Esq 775/323-5700
		Vendor No.:	T29021118
		NV Business ID:	NV19951011050

To what State Fiscal Year(s) will the contract be charged? **2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	50.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	50.00 % Workers' Compensation & Safety Fund

Agency Reference #: 4682-04

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **364 days**4. Type of contract: **Contract**Contract description: **Legal Services OSH**

5. Purpose of contract:

This is a new contract to provide ongoing legal services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$192,000.00**

Other basis for payment: Payment per Attachment AA (page 4 of 5) Vendor Rate Schedule

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 618.585(2) states that "The Occupational Safety and Health (OSH) Review Board may employ legal counsel to advise it concerning matters which come before it." Independent counsel is required in order to avoid potential conflict of interest.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The OSH Review Board is required to hold hearings on written appeals or notices of contest under NRS 618.585 and NRS 618.605. There is a conflict of interest since Division Counsel represents Occupational Safety and Health Administration (OSHA) in each contested matter. Therefore, outside counsel must be used.

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 Law Offices of Charles R. Zeh, Esq LLC
Terry Johnson, Chtd.

Joseph G. Went PC
Platt Law Group

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Qualification and experience in these areas selected by OSH Review Board members.

d. Last bid date: 01/30/2025 Anticipated re-bid date: 06/30/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Division of Industrial Relations, 07/1/24 - 06/30/25. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jkirkpat	04/08/2025 11:56:09 AM
Division Approval	jkirkpat	04/08/2025 11:56:13 AM
Department Approval	jkirkpat	04/08/2025 11:56:16 AM
Contract Manager Approval	jkirkpat	04/08/2025 11:56:21 AM
Budget Analyst Approval	khawkin1	04/09/2025 09:01:01 AM
BOE Agenda Approval	nrezaie	04/17/2025 15:50:36 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30445**

Agency Name: B&I - INDUSTRIAL RELATIONS DIV	Legal Entity Name: KPS/3
Agency Code: 742	Contractor Name: KPS/3
Appropriation Unit: 4685-15	Address: 500 RYLAND ST STE 300
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89502-1662
If "No" please explain: Not Applicable	Contact/Phone: 775/686-7439
	Vendor No.: PUR0004720
	NV Business ID: NV19941094961
To what State Fiscal Year(s) will the contract be charged?	2025-2026

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	25.70 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	74.30 % Workers' Compensation Assessment Fund

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **1 year and 29 days**4. Type of contract: **Contract**Contract description: **Multimedia services**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17886 which provides consulting, marketing, and education services. This service agreement provides ongoing strategic planning, account management, and website and digital services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$147,821.00**

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?

NRS 618.353 requires the Division of Industrial Relations to conduct workplace safety and health education and informational programs in Nevada to promote safe practices and increase the recognition, avoidance and prevention of unsafe and unhealthy work conditions. This contract also supports our 21(d) federal cooperative agreement grant.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise to provide these services. Our marketing campaigns include search engine optimization and Google AdWords. The contract also supports development of pamphlets, handouts, newspaper adds, and other multimedia and online advertising.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to Solicitation 99SWC-S2340, this vendor was selected because they have been used by multiple state agencies in the past and are deemed satisfactory

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Attorney General, 2019-Pres
Nevada Division of Environmental Protection, 2014-Pres
Nevada Division of Health and Human Services, 2010-Pres
Division of Industrial Relations, 1994-Present
Governor's Office of Economic Development, 2012-Pres
Nevada Public Employees Benefit Program, 2015-2021
Silver State Health Insurance Exchange, 2013-Present

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

No b. If "No", is an exemption on file with the Nevada Secretary of State's Office?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jkirkpat	04/08/2025 13:13:59 PM
Division Approval	jkirkpat	04/08/2025 13:14:02 PM
Department Approval	jkirkpat	04/08/2025 13:14:05 PM
Contract Manager Approval	jkirkpat	04/08/2025 13:14:09 PM
Budget Analyst Approval	khawkin1	04/11/2025 12:49:42 PM

BOE Agenda Approval
BOE Final Approval

nrezaie
Pending

04/17/2025 15:43:28 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30305**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4770-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WORKFORCE CONNECTIONS**Contractor Name: **WORKFORCE CONNECTIONS**Address: **6330 W CHARLESTON BLVD STE 150****6330 W CHARLESTON BLVD STE 150**City/State/Zip: **LAS VEGAS, NV 89146-1183**Contact/Phone: **Jim Kostecki 702/638-8750**Vendor No.: **T81079028**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Wage Assessment (Career Enhancement Program)

Agency Reference #: **3943-26-WISS**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **1 year and 60 days**4. Type of contract: **Interlocal Agreement**Contract description: **Tech Impact**

5. Purpose of contract:

This is a new contract to provide information technology related job training.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$136,500.00**

Payment for services will be made at the rate of \$136,500.00 per null

Other basis for payment: As invoiced by vendor and approved for payment by the State. Total contract not to exceed: \$136,500.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

Per NRS 612, CEP funding was implemented to assist unemployed, underemployed and employed individuals in the public and/or private sectors for specialized training projects for occupational categories determined to be in high growth, high demand occupations, and emerging industries in Nevada. Tech Impact/IT Works prepare disconnected young adults for a technologically sophisticated workplace by teaching PC configuration and networking skills, troubleshooting, customer service and communication skills, and provides professional work environment experience.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Agency does not have skill or expertise necessary for this project.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 - Interlocal Contract

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

2.5%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to DETR since May 2001 and other state agencies since January 2001.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kwoodwar	03/17/2025 06:41:18 AM
Division Approval	cjacob	03/17/2025 09:26:00 AM
Department Approval	cjacob	03/17/2025 09:26:05 AM
Contract Manager Approval	wcune1	03/18/2025 07:43:21 AM
Budget Analyst Approval	Iramire7	03/19/2025 10:01:55 AM
BOE Agenda Approval	mranki1	03/25/2025 10:49:17 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 CONTRACT1. Contract Number: **30395**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4770-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Wow Cleaning Corporation

Contractor Name: **Wow Cleaning Corporation**Address: **52 Glen Carran Cir**City/State/Zip: **Sparks, NV 89431**

Contact/Phone: Michelle Quero 775-322-4787

Vendor No.: T27041430

NV Business ID: NV20141289535

To what State Fiscal Year(s) will the contract be charged? **2026-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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

Agency Reference #: 90DETR-S3104 tb/3957-29-OM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2029**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Janitorial Fallon**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services at the Fallon EmployNV Hub facility.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$116,400.00**

Other basis for payment: As invoiced by the Contractor and approved by the State. Contract not to exceed \$116,400.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

Janitorial services are required to ensure maintenance and cleanliness of the interior of the building.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State Employees do not possess the training or the equipment to conduct this work.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Peggy's Cleaning Service
Able Janitorial Service
Wow Cleaning Corporation

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #90DETR-S3104, and in accordance with NRS 333, the selected vendor was one of the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 01/16/2025 Anticipated re-bid date: 01/16/2029

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory service to Buildings and Grounds since July 2017 and DETR since October 2019.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Miles Bruinekool, Facilities Manager Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cedlefse	04/02/2025 09:16:40 AM
Division Approval	cedlefse	04/02/2025 09:16:45 AM
Department Approval	cedlefse	04/02/2025 09:16:48 AM
Contract Manager Approval	wcune1	04/02/2025 09:32:57 AM
Budget Analyst Approval	Iramire7	04/03/2025 10:35:56 AM
BOE Agenda Approval	mranki1	04/04/2025 14:30:20 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 CONTRACT1. Contract Number: **30450**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4771-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Carahsoft Technology Corporation

Contractor Name: **Carahsoft Technology Corporation**Address: **11493 Sunset Hills Rd****Suite 100**City/State/Zip: **Reston, VA 20191**

Contact/Phone: Jacki Riedel 703-889-9706

Vendor No.: T27011089

NV Business ID: NV20151127305

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **88.00 %** Bonds 0.00 %Highway Funds 0.00 % **X** Other funding **12.00 % COST ALLOCATION**

Agency Reference #: 3960-27-DETR

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/15/2026**Contract term: **1 year and 137 days**4. Type of contract: **Other (include description): SWA**Contract description: **AI Invoice Project**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV24-17504 which provides cloud services. This service agreement provides the development and implementation of an artificial intelligence invoice tracking and payment management system to streamline and enhance the tracking, processing, and distribution of vendor invoices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$191,568.00**

Other basis for payment: As invoiced by contractor and approved for payment by the State. Total contract not to exceed: \$192,230.40.

II. JUSTIFICATION

7. What conditions require that this work be done?

DETR needs to increase the speed and accuracy of its invoice processing.

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 skills 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):

Ignyte
Cloudwick
Blue Vector
Arisant

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

State-Wide Agreement 99SWC-NV24-17504

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to various state agencies since July 2008 and DETR since July 2020.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Marcos Coronado, IT Professional II Ph: 775-687-1990

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cjacob	04/08/2025 07:41:14 AM
Division Approval	cjacob	04/08/2025 07:41:38 AM
Department Approval	zhoeffin	04/08/2025 11:06:21 AM
Contract Manager Approval	wcune1	04/08/2025 12:16:22 PM
EITS Approval	ljeane	04/09/2025 12:22:57 PM
Budget Analyst Approval	Iramire7	04/10/2025 14:30:29 PM
BOE Agenda Approval	mranki1	04/10/2025 14:31:40 PM
BOE Final Approval	Pending	



**STATE OF NEVADA
GOVERNOR'S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Josh Marhevka, Deputy Director, DETR
Zachary Hoefling, Chief Financial Officer, DETR
Jacob Council, Deputy Chief Financial Officer, DETR
Laxmi Bokka, IT Chief Manager, DETR

CC: Tim Galluzi, State Chief Information Officer, OCIO
Darla Dodge, Deputy CIO - Chief Operations Officer, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO
Adam Miller, Administrator, OCDC
Sean Montierth, Computing Services Unit, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DETR – TIN 1111 – *Invoice Tracking and Payment Management System* – BA 3272, 1004, 2580, 2666, 3253, 3254, 3265, 3268, 3269, 3270, 3272, 3273, 3274, 4770, 4772, 4773

DATE: April 3, 2025

We have completed our review for the Department of Employment, Training, and Rehabilitation's (DETR) – *Invoice Tracking and Payment Management System* – TIN 1111.

The submitted TIN, for an estimated value of \$125,104.00 in the FY24/FY25 biennium, \$22,800.00 in the FY26/FY27 biennium, \$45,600.00 in the FY28/FY29 biennium, and \$22,800.00 in FY30 (100% Federal Grant funding), is to implement an Invoice Tracking and Payment Management System that uses artificial intelligence (AI).

This initiative is designed to streamline invoice handling, ensure timely payments, and enhance financial transaction accuracy. Arisant Business Solutions (Arisant) will spearhead the project by utilizing Oracle Cloud Infrastructure (OCI) and Oracle Document Understanding (ODU) technologies for system development and deployment.

The investment focuses on centralizing invoice tracking through an email-based intake system integrated with DETR's internal processes. It will enable tracking of payment due dates as specified by vendors, monitoring payment statuses via the NV state DAWN/Core.NV system and facilitating digital distribution of invoices to staff. The solution will incorporate role-based access for approximately 36 users across Admin, Manager, and User roles, ensuring secure and efficient operations. With this system, DETR expects to improve payment processing efficiency, targeting a success rate of 90% for payments completed within five working days. Additionally, the system will generate detailed invoice tracking reports to support operational transparency.

DETR processes over 19,000 invoices annually and manages more than 300 contracts simultaneously. Timely payments for invoices, purchase orders, and contract obligations are critical to avoiding stale claims and maintaining operational efficiency. While future integration with Core.NV is under consideration, the initial implementation will rely on nightly batch processing within DETR's infrastructure.

The investment includes custom-developed software tailored to DETR's needs. Although changes or additions to the current server environment may be required, OCIO-supported server hosting is expected to remain unchanged as part of this initiative. This solution represents a pivotal step in enhancing DETR's financial operations and ensuring effective vendor management.

This solution relies on OCI and AI technologies which introduces several cybersecurity risks, including sophisticated social engineering attacks enabled by generative AI, which can craft highly targeted phishing campaigns or business email compromises to manipulate payment approvals. Additionally, AI can help attackers develop more sophisticated malware, increasing the speed and complexity of attacks. The system's integration with OCI also poses risks, as past vulnerabilities like the "AttachMe" flaw have shown that cloud isolation can be compromised, allowing unauthorized access to storage volumes across tenants. Furthermore, the use of black-box AI models complicates compliance with financial auditing standards due to a lack of transparency in transaction decisions. To mitigate these risks, proactive measures such as implementing AI explainability frameworks, rigorous encryption of OCI-hosted data, and continuous monitoring for adversarial AI activity are essential. The shared responsibility model in cloud environments underscores the importance of client-side configuration and security practices to complement Oracle's infrastructure security measures.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **23057**Amendment Number: **1**Agency Name: **ADMIN - DEFERRED
COMPENSATION**Legal Entity Name: **Morgan Stanley Institutional Investment
Advisors LLC**Agency Code: **920**Contractor Name: **Morgan Stanley Institutional
Investment Advisors LLC**Appropriation Unit: **1017-04**Address: **dba HYAS GROUP**Is budget authority available?: **Yes****1585 Broadway
New York, NY 10036**If "No" please explain: **Not Applicable**City/State/Zip: **New York, NY 10036**Contact/Phone: **Rausch Cousineau 971-634-1514**Vendor No.: **T32016805**NV Business ID: **NV20232723067**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 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Vendor Reimbursements

Agency Reference #: **RFP 08DOA-S395**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/01/2020**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **05/31/2025**Contract term: **10 years and 1 day**4. Type of contract: **Contract**Contract description: **Deferred Comp Invest**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing investment consulting services. This amendment extends the termination date from May 31, 2025 to May 31, 2030 and increases the maximum amount from \$357,000 to \$651,500 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:	\$357,000.00	\$357,000.00	\$357,000.00	Yes - Action
2. Amount of current amendment (#1):	\$294,500.00	\$294,500.00	\$294,500.00	Yes - Action
3. New maximum contract amount:	\$651,500.00			
and/or the termination date of the original contract has changed to:	05/31/2030			

II. JUSTIFICATION

7. What conditions require that this work be done?

Deferred Compensation needs an Investment Consultant Service.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a Specialized Service.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: 12/01/2020 Anticipated re-bid date: 12/01/2024

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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	mmellow	03/18/2025 09:06:55 AM
Division Approval	jkidd	04/03/2025 16:14:20 PM
Department Approval	jkidd	04/03/2025 16:14:25 PM
Contract Manager Approval	ssands	04/04/2025 11:02:48 AM
Budget Analyst Approval	vmilazz1	04/22/2025 14:15:29 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval #:	5890

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information: Note: Approved copy will be sent to <u>only</u> to the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED: NV Deferred Compensation		
	Contact Name and Title	Phone Number	Email Address
	Rob Boehmer	775-531-3201	rboehmer@defcomp.nv.gov

2	Contractor Information:	
	Contractor Name:	Hyas Group
	Contact Name:	Rasch Cousineau
	Complete Address: City, State and Zip Code	9755 SW Barnes Road, Suite 660, Portland, OR, 97225
	Phone Number:	725-252-0335
	Email Address:	rcousineau@hyasgroup.com

3	List <u>all previous</u> Contract Information for which the agency has contracted with this vendor (contract history):				
	Solicitation Type, if applicable:		Professional Services- Investment Consulting	#:	23057
	Enter CETS Number:	#23057			
	Contract Amount:	\$357,000.00			
	Contract Term:	Start Date:	06/01/2020	End Date:	05/31/2025

Rec'd 01/10/25//12:56PM

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PAGE

Purchasing Use Only:	
Approval #:	58900

4	Current Contract Information:				
	Solicitation Type, if applicable:	<i>Professional Services- Investment Consulting</i>		#:	23057
	Enter CETS Number:	#23057			
	Initial Contract Amount:	\$357,000.00			
	Contract Term:	Start Date:	06/01/2020	End Date:	05/31/2025

5	Amendment Information – List <u>all previously</u> approved amendments:			
	<i>Amd #:</i>	<i>Brief Synopsis of What Amendment Accomplished:</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	N/A	N/A	N/A	N/A

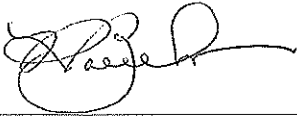
6	<u>Proposed</u> Amendment Information:			
	<i>Amd #:</i>	<i>Brief Synopsis of What the Requested Amendment will Accomplish</i>	<i>Dollar Change in Contract Amount</i>	<i>Change in End Date</i>
	1	Maintaining Value and continued service guarantees	\$357,000.00	05/31/2030

7	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338)?
	<i>Based on my recent experiences participating on solicitation evaluation committees over the past year for multiple different States/Cities across the Country, the pool of companies that meet the minimum qualifications for providing Professional Services in Investment Consulting for Government/Institutional Plan Sponsors is significantly narrow and the cost and services proposed in these recent solicitations reflected significantly higher cost and narrowed service guarantees. Given my recent experiences, it is likely in the best interest to the State of Nevada and more particularly the NDC Participant base to consider extending at the current contract rates and maintaining the current Service Guarantees. Given my recent experiences and evaluation of this marketplace it seems we may potentially realize increased costs.</i>

8	What are the potential consequences to the State if the contract extension request is denied?
	<i>We have done market research based on my participation on multiple evaluation committees that these services seem to be driving higher cost and less value due to consolidation in the industry.</i>

Purchasing Use Only:	
Approval #:	589 (2)

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



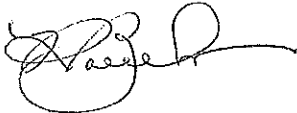
Signature of Agency Representative Initiating Request

Rob Boehmer, Executive Officer/Administrator

01/10/2025

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Rob Boehmer, Executive Officer/Administrator

01/10/2025

Print Name of Agency Head Authorizing Request

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135(5) and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.

Signed:



Administrator, Purchasing Division or Designee

1/14/25

Date

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.		VARIOUS STATE AGENCIES	1 INSIGHT, INC.	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing assisted living, behavioral support, case management, community work experience programs, disabilities support, educational tutoring and support, group home, marriage and family therapy, psychiatry, psychology, senior care, social worker, and substance abuse counseling services.				
	Term of Contract:	Upon Approval - 04/30/2029		Contract # 30257		
2.		VARIOUS STATE AGENCIES	ABUNDANT LIFE HOME CARE, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing case management, disabilities support, home health care, personal care, respite care, and senior care services.				
	Term of Contract:	Upon Approval - 04/30/2029		Contract # 30329		
3.		VARIOUS STATE AGENCIES	BURNBOT, INC.	OTHER: VARIOUS AGENCIES	\$10,638,000	
	Contract Description:	This is a new contract to provide forest management hand crews, forestry equipment, and controlled fire services.				
	Term of Contract:	Upon Approval - 07/07/2028		Contract # 30342		
4.		VARIOUS STATE AGENCIES	COMPASSIONATE HANDS ADULT DAY SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$7,700,000	
	Contract Description:	This is a new contract to provide ongoing adult daycare, community work experience programs, educational tutoring and education support, employment support, and job development services.				
	Term of Contract:	Upon Approval - 04/30/2029		Contract # 30369		
5.		VARIOUS STATE AGENCIES	EMPOWER ABILITY CENTER	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing adult daycare, case management, disabilities support, employment support, job development, and supportive living arrangement services.				
	Term of Contract:	Upon Approval - 04/30/2029		Contract # 28716		
6.		VARIOUS STATE AGENCIES	FRONTLINE THERAPY SOLUTIONS, LLC	OTHER: VARIOUS AGENCIES	\$7,400,000	
	Contract Description:	This is a new contract to provide ongoing behavioral support, early intervention, medical, mental health, occupational therapy, physical therapy, rehabilitation, speech pathology, therapy, and counseling services.				
	Term of Contract:	Upon Approval - 04/30/2029		Contract # 30256		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
7.		VARIOUS STATE AGENCIES	HIS * HOME LP	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangement services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30353		
8.		VARIOUS STATE AGENCIES	LOLA'S LEGACY, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing assisted living, behavioral support, disabilities support, group home, home health care, residential provider, respite care, senior care, and supportive living arrangement services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30355		
9.		VARIOUS STATE AGENCIES	NORTHERN NEVADA CENTER FOR BEHAVIORAL SERVICES, LLC	OTHER: VARIOUS AGENCIES	\$500,000	
	Contract Description:	This is a new contract to provide ongoing autism treatment assistance program services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30368		
10.		VARIOUS STATE AGENCIES	NULLI SECUNDUS HEALTH, INC.	OTHER: VARIOUS AGENCIES	\$1,800,000	
	Contract Description:	This is a new contract to provide ongoing counseling, marriage and family therapy, mental health, and social worker services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30358		
11.		VARIOUS STATE AGENCIES	PUNSI, LLC	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing personal care, respite care, and senior care services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30357		
12.		VARIOUS STATE AGENCIES	SOLUTIONS OF CHANGE	OTHER: VARIOUS AGENCIES	\$2,800,000	
	Contract Description:	This is a new contract to provide ongoing case management, counseling, and mental health services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30356		
13.		VARIOUS STATE AGENCIES	TRAILWAYS RESIDENTIAL, LLC	OTHER: VARIOUS AGENCIES	\$4,500,000	
	Contract Description:	This is a new contract to provide ongoing community-based living arrangements and residential provider services.				
	Term of Contract:		Upon Approval - 04/30/2029	Contract # 30331		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
14.		VARIOUS STATE AGENCIES	VALETUDO, PLLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is a new contract to provide ongoing acute medical, applied behavioral analysis, assistive technology, autism treatment assistance program, behavioral support, counseling, dietician-nutrition, disabilities support, early intervention, educational tutoring and education support, general medicine, home health care, marriage and family therapy, medical, mental health, occupational therapy, pediatric, personal care, psychiatry, psychology, rehabilitation, residential provider, senior care, social worker, and substance abuse counseling services.				
		Term of Contract:	Upon Approval - 04/30/2029	Contract # 30373		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30257**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **1 Insight, Inc.**Contractor Name: **1 Insight, Inc.**Address: **12232 Sea Voyage Avenue**City/State/Zip: **Las Vegas, NV 89138**Contact/Phone: **Rowell Laino 702-530-1320**Vendor No.: **T32017065**NV Business ID: **NV20232908853**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**Agency Reference #: **S1737-RV VQ16195**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing assisted living, behavioral support, case management, community work experience programs, disabilities support, educational tutoring and education support, group home, marriage and family therapy, mental health, psychiatry, psychology, senior care, social worker, and substance abuse counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 08:48:57 AM
Division Approval	ldeloach	03/27/2025 08:49:01 AM
Department Approval	ldeloach	03/27/2025 08:49:04 AM
Contract Manager Approval	ascaffid	04/02/2025 15:59:32 PM
Budget Analyst Approval	vfajota	04/10/2025 10:10:56 AM
BOE Agenda Approval	mranki1	04/11/2025 08:37:09 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 CONTRACT1. Contract Number: **30329**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Abundant Life Home Care, LLC**Contractor Name: **Abundant Life Home Care, LLC**Address: **2420 Rainy Meadows Avenue**City/State/Zip: **North Las Vegas, NV 89031**Contact/Phone: **Patrice Rideout 231-780-8834**Vendor No.: **T29049802**NV Business ID: **NV20243102252**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**Agency Reference #: **S1737-RV 99SWC-VQ16291**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing case management, disabilities support, home health care, personal care, respite care, and senior care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 09:25:58 AM
Division Approval	ldeloach	03/27/2025 09:26:01 AM
Department Approval	ldeloach	03/27/2025 09:26:05 AM
Contract Manager Approval	ascaffid	04/02/2025 16:00:02 PM
Budget Analyst Approval	vfajota	04/10/2025 10:16:17 AM
BOE Agenda Approval	mranki1	04/11/2025 08:54:27 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30342**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Burnbot, Inc.**Contractor Name: **Burnbot, Inc.**Address: **310 Shaw Road, Suite D**City/State/Zip: **S. San Francisco, CA 94080**Contact/Phone: **Brittany Black 503-847-1328**Vendor No.: **T29049515**NV Business ID: **NV20243076922**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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 #: **RFP 99SWC-S2933 NF**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/07/2028**Contract term: **3 years and 68 days**4. Type of contract: **MSA**Contract description: **Fire Fuels Reduction**

5. Purpose of contract:

This is a new contract to provide forest management hand crews, forestry equipment, and controlled fire services throughout the state.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,638,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

To reduce the risk of wildfires, fuels and vegetation in various locations throughout the state.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This contract provides fuels reduction services for agencies that do not have capability to do the work, and to assist when the volume of reduction services is such that staff cannot accomplish all work in a timely manner.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Green America Trees
Sunset Forestry**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP# 99SWC-S2933, and in accordance with NRS 333, the this vendor received a contact as part of the multiple award.

d. Last bid date: 08/29/2024 Anticipated re-bid date: 08/29/2028

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Nancy Feser, Purchasing Officer Ph: 775-531-3319

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rvradenb	03/14/2025 15:35:57 PM
Division Approval	rvradenb	03/14/2025 15:36:00 PM
Department Approval	ldeloach	03/14/2025 16:00:01 PM
Contract Manager Approval	nfese1	03/17/2025 07:49:48 AM
Budget Analyst Approval	vfajota	04/01/2025 15:12:21 PM
BOE Agenda Approval	mranki1	04/02/2025 10:33:58 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30369**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Compassionate Hands Adult Day Services, LLC**Contractor Name: **Compassionate Hands Adult Day Services, LLC**Address: **4180 S. Pecos Road Suite 100**City/State/Zip: **Las Vegas, NV 89121**Contact/Phone: **Keith Oliver 702-544-8100**Vendor No.: **T29050466**NV Business ID: **NV20232912007**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**Agency Reference #: **S1737-RV 99SWC-VQ16290**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing adult daycare, community work experience programs, educational tutoring and education support, employment support, and job development services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$7,700,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 09:33:19 AM
Division Approval	ldeloach	03/27/2025 09:33:22 AM
Department Approval	ldeloach	03/27/2025 09:33:25 AM
Contract Manager Approval	ascaffid	04/02/2025 16:08:17 PM
Budget Analyst Approval	vfajota	04/10/2025 12:15:20 PM
BOE Agenda Approval	mranki1	04/10/2025 14:42:24 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **28716**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Empower Ability Center

Contractor Name: **Empower Ability Center**Address: **2215-C Renaissance Drive**City/State/Zip: **Las Vegas, NV 89119**

Contact/Phone: Stacie Wirth 702-354-3956

Vendor No.: T29050026

NV Business ID: NV20243238607

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**

Agency Reference #: S1737-RV 99SWC-VQ16295

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing adult daycare, case management, disabilities support, employment support, job development, and supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 09:41:54 AM
Division Approval	ldeloach	03/27/2025 09:41:58 AM
Department Approval	ldeloach	03/27/2025 09:42:01 AM
Contract Manager Approval	ascaffid	04/02/2025 15:58:27 PM
Budget Analyst Approval	vfajota	04/10/2025 09:58:13 AM
BOE Agenda Approval	mranki1	04/11/2025 08:32:33 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30256**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Frontline Therapy Solutions, LLC

Contractor Name: **Frontline Therapy Solutions, LLC**Address: **8490 Lambert Dr.**City/State/Zip: **Las Vegas, NV 89147**

Contact/Phone: Elijah Boston 813-598-7680

Vendor No.: T32017324

NV Business ID: NV20232978893

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**

Agency Reference #: S1737-RV VQ16415

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing behavioral support, early intervention, medical, mental health, occupational therapy, physical therapy, rehabilitation, speech pathology, therapy, and counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$7,400,000.00****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. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 09:59:05 AM
Division Approval	ldeloach	03/27/2025 09:59:08 AM
Department Approval	ldeloach	03/27/2025 09:59:13 AM
Contract Manager Approval	ascaffid	04/02/2025 15:59:04 PM
Budget Analyst Approval	vfajota	04/10/2025 10:04:16 AM
BOE Agenda Approval	mranki1	04/11/2025 08:34:39 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 CONTRACT1. Contract Number: **30353**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	His * Home LP
Agency Code:	MSA	Contractor Name:	His * Home LP
Appropriation Unit:	9999 - All Categories	Address:	dba His * Home 2392 Pauline Avenue Sparks, NV 89431
Is budget authority available?:	Yes	City/State/Zip	Sparks, NV 89431
If "No" please explain:	Not Applicable	Contact/Phone:	Geanann Liccardi 904-716-4095
		Vendor No.:	T32017160A
		NV Business ID:	NV20243188688
To what State Fiscal Year(s) will the contract be charged?	2025-2029		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV 99SWC-VQ16285

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing community based living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

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	ldeloach	03/27/2025 10:04:18 AM
Division Approval	ldeloach	03/27/2025 10:04:21 AM
Department Approval	ldeloach	03/27/2025 10:04:24 AM
Contract Manager Approval	ascaffid	04/02/2025 16:04:14 PM
Budget Analyst Approval	vfajota	04/10/2025 11:29:08 AM
BOE Agenda Approval	mranki1	04/11/2025 10:06:09 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 CONTRACT1. Contract Number: **30355**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Lola's Legacy, LLC
Agency Code:	MSA	Contractor Name:	Lola's Legacy, LLC
Appropriation Unit:	9999 - All Categories	Address:	8115 Mohawk Lane
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89506
If "No" please explain:	Not Applicable	Contact/Phone:	Marcus Raudszus 248-521-7810
		Vendor No.:	T32014890
		NV Business ID:	NV20212186982
To what State Fiscal Year(s) will the contract be charged?	2025-2029		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV 99SWC-VQ16278

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing assisted living, behavioral support, disabilities support, group home, home health care, residential provider, respite care, senior care, and supportive living arrangement services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:08:36 AM
Division Approval	ldeloach	03/27/2025 10:08:38 AM
Department Approval	ldeloach	03/27/2025 10:08:41 AM
Contract Manager Approval	ascaffid	04/02/2025 16:07:19 PM
Budget Analyst Approval	vfajota	04/10/2025 11:34:57 AM
BOE Agenda Approval	mranki1	04/11/2025 10:14:00 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 CONTRACT1. Contract Number: **30368**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Northern Nevada Center for Behavioral Services, LLC

Contractor Name: **Northern Nevada Center for Behavioral Services, LLC**Address: **dba ABC's of Behavior
3411 Emblem Street**City/State/Zip: **Sparks, NV 89436**

Contact/Phone: Michael Gadberry 775-335-6952

Vendor No.: T32005506

NV Business ID: NV20171514175

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**

Agency Reference #: S1737-RV 99SWC-VQ16301

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing autism treatment assistance program services.

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. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:13:55 AM
Division Approval	ldeloach	03/27/2025 10:13:58 AM
Department Approval	ldeloach	03/27/2025 10:14:01 AM
Contract Manager Approval	ascaffid	04/02/2025 16:07:45 PM
Budget Analyst Approval	vfajota	04/10/2025 12:12:42 PM
BOE Agenda Approval	mranki1	04/10/2025 14:36:03 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30358**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Nulli Secundus Health, Inc.**Contractor Name: **Nulli Secundus Health, Inc.**Address: **dba Birches Health
2300 W Sahara Ave., Suite 800**City/State/Zip: **Las Vegas, NV 89102**Contact/Phone: **Elliott Rapaport 917-843-8445**Vendor No.: **T32016792**NV Business ID: **NV20243233006**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**Agency Reference #: **S1737-RV 99SWC-VQ16198**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing counseling, marriage and family therapy, mental health, and social worker services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,800,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:20:16 AM
Division Approval	ldeloach	03/27/2025 10:20:19 AM
Department Approval	ldeloach	03/27/2025 10:20:22 AM
Contract Manager Approval	ascaffid	04/02/2025 16:01:00 PM
Budget Analyst Approval	vfajota	04/10/2025 11:20:49 AM
BOE Agenda Approval	mranki1	04/11/2025 09:15:02 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30357**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Punsi, LLC
Agency Code:	MSA	Contractor Name:	Punsi, LLC
Appropriation Unit:	9999 - All Categories	Address:	dba Punsi Home Care Agency 3202 West Charleston Boulevard
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89102
If "No" please explain:	Not Applicable	Contact/Phone:	Sonia Batoumi 702-372-8411
		Vendor No.:	T29049945
		NV Business ID:	NV20232918186

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **S1737-RV 99SWC-VQ16194**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing personal care, respite care, and senior care services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:26:19 AM
Division Approval	ldeloach	03/27/2025 10:26:22 AM
Department Approval	ldeloach	03/27/2025 10:26:24 AM
Contract Manager Approval	ascaffid	04/02/2025 16:01:39 PM
Budget Analyst Approval	vfajota	04/10/2025 12:09:36 PM
BOE Agenda Approval	mranki1	04/10/2025 14:33:58 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30356**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Solutions of Change

Contractor Name: **Solutions of Change**Address: **2310 Paseo Del Prado, #A101**City/State/Zip: **Las Vegas, NV 89102**

Contact/Phone: Dinisha Mingo 702-556-2634

Vendor No.: T32010188

NV Business ID: NV20171045254

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**

Agency Reference #: S1737-RV 99SWC-VQ16237

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing case management, counseling, and mental health services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$2,800,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:30:56 AM
Division Approval	ldeloach	03/27/2025 10:30:59 AM
Department Approval	ldeloach	03/27/2025 10:31:02 AM
Contract Manager Approval	ascaffid	04/02/2025 16:03:48 PM
Budget Analyst Approval	vfajota	04/10/2025 11:39:03 AM
BOE Agenda Approval	mranki1	04/11/2025 10:15:47 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 CONTRACT1. Contract Number: **30331**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Trailways Residential, LLC
Agency Code:	MSA	Contractor Name:	Trailways Residential, LLC
Appropriation Unit:	9999 - All Categories	Address:	4217 El Conlon Avenue
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89102
If "No" please explain:	Not Applicable	Contact/Phone:	Craig Hancock II 702-371-7970
		Vendor No.:	T32017021
		NV Business ID:	NV20232910989

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV 99SWC-VQ16566

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing community based living arrangements and residential provider services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$4,500,000.00****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. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ldeloach	03/27/2025 10:34:28 AM
Division Approval	ldeloach	03/27/2025 10:34:30 AM
Department Approval	ldeloach	03/27/2025 10:34:33 AM
Contract Manager Approval	ascaffid	04/02/2025 16:00:30 PM
Budget Analyst Approval	vfajota	04/10/2025 10:42:05 AM
BOE Agenda Approval	mranki1	04/11/2025 09:13:20 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30373**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Valetudo, PLLC
Agency Code:	MSA	Contractor Name:	Valetudo, PLLC
Appropriation Unit:	9999 - All Categories	Address:	3201 S. Maryland Parkway, #101
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89109
If "No" please explain:	Not Applicable	Contact/Phone:	Jirair Baghdassarian 702-890-0747
		Vendor No.:	PENDING
		NV Business ID:	NV20222651375
To what State Fiscal Year(s) will the contract be charged?	2025-2029		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: S1737-RV 99SWC-VQ16286

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Direct Client Srvcs**

5. Purpose of contract:

This is a new contract to provide ongoing acute medical, applied behavioral analysis, assistive technology, autism treatment assistance program, behavioral support, counseling, dietician-nutrition, disabilities support, early intervention, educational tutoring and education support, general medicine, home health care, marriage and family therapy, medical, mental health, occupational therapy, pediatric, personal care, psychiatry, psychology, rehabilitation, residential provider, senior care, social worker, and substance abuse counseling services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation 99SWC-S1737 to provide various direct client services.

d. Last bid date: 12/01/2021 Anticipated re-bid date: 06/01/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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	Ideloach	03/27/2025 10:44:59 AM
Division Approval	Ideloach	03/27/2025 10:45:02 AM
Department Approval	Ideloach	03/27/2025 10:45:04 AM
Contract Manager Approval	ascaffid	04/02/2025 16:08:50 PM
Budget Analyst Approval	vfajota	04/10/2025 12:18:35 PM
BOE Agenda Approval	mranki1	04/10/2025 14:45:05 PM
BOE Final Approval	Pending	

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	011	GOVERNOR'S OFFICE - STATE ENERGY OFFICE - OFFICE OF ENERGY	ESTIPONA GROUP	FEDERAL	\$50,000	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17892 which provides consulting, marketing, and education services. This service agreement provides strategic outreach and engagement focusing on energy workforce development.				
	Term of Contract:	03/19/2025 - 09/30/2025	Contract # 30335			
2.	011	GOVERNOR'S OFFICE - STATE ENERGY OFFICE - OFFICE OF ENERGY	THE OLSON GROUP	FEDERAL	\$41,000	
	Contract Description:	This is a new contract to perform a risk assessment on the State Energy Security Plan and provide a risk mitigation approach.				
	Term of Contract:	03/31/2025 - 08/29/2025	Contract # 30400			
3.	015	GOVERNOR'S OFFICE OF FINANCE - BUDGET DIVISION	THE INSTITUTE	GENERAL	\$34,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides a prison population projection report. This amendment increases the maximum amount from \$16,000 to \$50,000 due to the need for an additional report.				
	Term of Contract:	02/26/2025 - 06/30/2025	Contract # 30260			
4.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	JACKSON LEWIS P.C.	OTHER: STATUTORY CONTINGENCY 15%; GAMING CONTROL BOARD 85%	\$75,000	Professional Service
	Contract Description:	This is a new contract to provide special counsel services to the Nevada Gaming Control Board.				
	Term of Contract:	12/05/2024 - 12/04/2025	Contract # 30431			
5.	030	ATTORNEY GENERAL'S OFFICE - ADMINISTRATIVE BUDGET ACCOUNT	LITTLER MENDELSON, P.C.	OTHER: STATUTORY CONTINGENCY	\$75,000	Professional Service
	Contract Description:	This is a new contract to provide special counsel services.				
	Term of Contract:	02/07/2025 - 12/31/2026	Contract # 30295			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	FORCE INDUSTRIAL MECHANICAL LLC	OTHER: BUILDINGS & GROUNDS RENTAL INCOME	\$37,493	
	Contract Description:	This is a new contract to provide for the removal, replacement, and programming of the air handlers at the Decatur Department of Motor Vehicles location in Las Vegas.				
		Term of Contract:	03/26/2025 - 06/30/2025	Contract # 30279		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	JMA CONSTRUCTION CO. INC.	OTHER: BUILDING AND GROUNDS RENTAL INCOME	\$22,360	
	Contract Description:	This is a new contract to provide the removal and cleaning of the mortar joints on granite steps at the Capitol Building.				
		Term of Contract:	04/03/2025 - 02/28/2026	Contract # 30377		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	JMA CONSTRUCTION CO. INC.	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$20,250	
	Contract Description:	This is a new contract to provide the removal and cleaning of the mortar joints on granite steps at the Laxalt Building located in Carson City.				
		Term of Contract:	04/03/2025 - 02/28/2026	Contract # 30378		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	L.A. PERKS PETROLEUM SPECIALISTS	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$14,991	
	Contract Description:	This is a new contract to provide replacement of the damaged submersible turbine manway at the Nevada Highway Patrol location in Reno.				
		Term of Contract:	04/03/2025 - 02/28/2026	Contract # 30374		
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	RHP MECHANICAL SYSTEMS	OTHER: BUILDINGS AND GROUNDS RENTAL INCOME	\$15,035	
	Contract Description:	This is a new contract to provide replacement of the variable frequency drive east return fan unit at the Arrowhead Building located in Carson City.				
		Term of Contract:	04/03/2025 - 06/30/2025	Contract # 30276		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - MARLETTE LAKE	JP FENCE LLC	OTHER: BUILDINGS AND GROUNDS WATER SALES	\$12,294	
	Contract Description:	This is a new contract to provide fence repairs and installation at the Marlette Lake Shop property. Term of Contract: 03/26/2025 - 12/31/2025 Contract # 29452				
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - MARLETTE LAKE	TRUCKEE MEADOWS WATER AUTHORITY	GENERAL	\$40,600	Professional Service
	Contract Description:	This is a new interlocal agreement to provide assistance with the update of the of the Marlette Lake Water System for the Marlette Lake Water Right Revision Agency CIP Project; CIP Project No. 25-A007; SPWD Contract No. 117516. Term of Contract: 03/21/2025 - 06/30/2025 Contract # 30269				
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - MARLETTE LAKE	U.S. DEPARTMENT OF THE INTERIOR, U.S. GEOLOGICAL SURVEY	OTHER: BUILDINGS AND GROUNDS WATER SALES	\$13,780	Exempt
	Contract Description:	This is a new interlocal agreement to provide an ongoing water-resources monitoring program consisting of the operation and maintenance of the water-level gage at Marlette Lake. Term of Contract: 10/01/2024 - 09/30/2026 Contract # 30271				
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	VERUS ASSOCIATES NEVADA LLC	BONDS	\$17,130	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Northern Nevada Correctional Center - Housing Units 4-7 Cell Doors and Lock Replacement CIP Project to include schematic design phase, design development phase, detailed design drawings, floor plans, construction documents and construction administration services required to replace the sally port doors, locks, and controls in the different housing units: CIP Project Nos. 21-M58, 21-M60: SPWD Contract No. 114499. This amendment increases the maximum amount from \$534,038 to \$551,168 for additional construction administration services due to an extended construction timeframe. Term of Contract: 12/14/2021 - 06/30/2025 Contract # 25079				

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	GENERAL	\$42,718	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides professional architectural/engineering services for the Veterans Services - North Las Vegas Veterans Home Advance Planning CIP Project: CIP Project No. 23-P04; SPWD Contract No. 116145. This amendment increases the maximum amount from \$9,150,320 to \$9,193,037.78 due to additional drainage and traffic studies needed for the site.				
	Term of Contract:	01/09/2024 - 06/30/2027	Contract # 28575			
16.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	IN2IT ARCHITECTURE	GENERAL	\$87,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Department of Health and Human Services - Advance Planning: Southern Nevada Forensic Facility CIP Project to include a design phase with meetings, mechanical and electrical engineering, and construction administration with bid review and submission for the construction, build, and replacement of the existing buildings 1300, 1304, and 1391 at the Desert Regional Center: CIP Project No. 23-P06(a); SPWD Contract No. 117073. This amendment increases the maximum amount from \$967,500 to \$1,054,500 due to additional architectural and civil engineering services to extend a 10" water main.				
	Term of Contract:	10/02/2024 - 06/30/2027	Contract # 29726			
17.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATEWIDE CIP PROJECTS - NON-EXEC	CMB CONSULTANTS LC DBA UNVC	GENERAL	\$17,100	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Department of Health and Human Services - Advance Planning: Southern Nevada Forensic Facility CIP Project to include design development drawings and construction documents related to the commissioning services for the forensics facility enclosure design: CIP Project No. 23-P06; SPWD Contract No. 117506.				
	Term of Contract:	03/21/2025 - 06/30/2027	Contract # 30235			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
18.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES AND AGRICULTURE CIP PROJECTS - NON-EXEC	ARCHITECTS + LLC	BONDS	\$51,098	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Nevada Division of Forestry Northern Region 2 Headquarters Heavy Equipment Repair Shop Renovation CIP Project, to include design development, construction administration, geotechnical investigation and report, property legal description work, furniture, fixtures, and equipment services and analysis of the existing fire-water system associated with the Heavy Equipment Repair Shop Renovations: CIP Project No. 21-C01, SPWD Contract No. 114549. This amendment increases the maximum amount from \$327,475 to \$378,573 due to additional utility application fees, site plan redesign, and construction administration services related to the inclusion of an emergency generator.				
	Term of Contract:	12/14/2021 - 06/30/2025	Contract # 25205			
19.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	GENERAL	\$30,000	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides professional architectural/engineering services for the Las Vegas Purchased Building Improvements CIP Project: CIP Project No. 23-C36; SPWD Contract No. 115630. This amendment increases the maximum amount from \$600,000 to \$630,000 due to additional design services, general consulting, and tenant improvements.				
	Term of Contract:	09/12/2023 - 06/30/2027	Contract # 28054			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
20.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	PURCELL ELECTRICAL PROFESSIONAL CORPORATION	GENERAL 75% BONDS 25%	\$40,000	Professional Service
	Contract Description:	This is a new contract which provides professional architectural/engineering services for the Generator System Improvements (Marlette Lake Water System) CIP Project, to include design development services, construction documents, bidding and negotiation services, and construction administration for the design and construction of the existing 375 kW generators crankshaft, camshaft, gaskets, radiator, and other associated wear items at the Marlette Water System (MLWS) generator building; CIP Project No. 23-M03-04; SPWD Contract No. 117603.				
	Term of Contract:	04/23/2025 - 06/30/2027	Contract # 30343			
21.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	SGF ENGINEERING, LLC	GENERAL 75% BONDS 25%	\$37,800	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the EITS Data Center - Computer Room Cooling System Upgrade and the Uninterruptable Power Supply System CIP Projects: CIP Project Nos. 23-M03-1 & 23-M03-2; SPWD Contract No. 115886. This amendment increases the maximum amount of \$234,700 to \$272,500 due to design services needed for the addition of a covered forklift parking structure and new wall in the battery room.				
	Term of Contract:	11/14/2023 - 06/30/2027	Contract # 28312			
22.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF ADMINISTRATION CIP PROJECTS - NON-EXEC	TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK	BONDS	\$13,023	Professional Service
	Contract Description:	This is the fourth amendment to the original contract which provides professional architecture/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116357. This amendment increases the maximum amount from \$663,580 to \$676,603 due to additional engineering services needed for a modified life cycle cost analysis to provide justification for a new window solution on site.				
	Term of Contract:	03/12/2024 - 06/30/2027	Contract # 28840			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	OTHER: AGENCY FUNDED CIP	\$45,700	Professional Service
	Contract Description:	This is the second amendment to the original contract which provides professional architectural/engineering services for the College of Southern Nevada, Northwest Campus - Center for Excellence in Public Safety CIP Project: CIP Project No. 24-A008; SPWD Contract No. 116346. This amendment increases the maximum amount from \$6,559,289.40 to \$6,650,689.40 due to an additional architectural and civil engineering services for a pressure-reducing valve (PRV) assembly.				
		Term of Contract:	03/12/2024 - 06/30/2025	Contract # 28829		
24.	083	DEPARTMENT OF ADMINISTRATION - PURCHASING	J.J. KANE ASSOCIATES, INC.	OTHER: REVENUE	\$85,000	
	Contract Description:	This is a new contract to provide auction services to dispose of excess property.				
		Term of Contract:	04/01/2025 - 06/30/2025	Contract # 30413		
25.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	LAW OFFICE OF JILL GREINER	OTHER: WORKERS' COMPENSATION AND SAFETY FUND	\$40,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing special appeals officer services.				
		Term of Contract:	09/01/2024 - 08/31/2026	Contract # 30126		
26.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	KATHLEEN L BERGQUIST LLC	OTHER: WORKERS COMPENSATION/ CHARGES FOR SERVICES	\$40,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing special appeals officer services.				
		Term of Contract:	04/10/2025 - 03/31/2027	Contract # 30399		
27.	140	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS - STEWART INDIAN SCHOOL LIVING LEGACY	SAMANTHA M. WILLIAMS	FEDERAL	\$30,000	
	Contract Description:	This is a new contract to provide research and documentation of all students who attended Stewart Indian School.				
		Term of Contract:	03/25/2025 - 12/31/2025	Contract # 30121		
28.	315	STATE PUBLIC CHARTER SCHOOL AUTHORITY	HALLI FAULKNER	FEE: SPONSORSHIP	\$24,000	
	Contract Description:	This is a new contract to provide an external reviewer to evaluate charter school applications and other documents related to the operation and/or authorizing of charter schools.				
		Term of Contract:	04/14/2025 - 02/10/2029	Contract # 29324		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
29.	400	DEPARTMENT OF HEALTH AND HUMAN SERVICES - FUND FOR RESILIENT NEVADA	NEVADA PUBLIC HEALTH FOUNDATION, INC.	OTHER: FUND FOR A RESILIENT NEVADA	\$28,160	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides support to the Advisory Committee for a Resilient Nevada by setting strategic direction, defining goals, creating agendas, facilitating meetings, and providing direct content reporting.				
		Term of Contract:	04/08/2025 - 06/30/2026	Contract # 30371		
30.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - COMMUNICATION ACCESS SERVICES	NEVADA PUBLIC HEALTH FOUNDATION, INC.	OTHER: TELECOMMUNICATIONS DEVICES FOR THE DEAF SURCHARGE FUNDS	\$13,332	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides two community presentations on the National Code of Ethics that certified sign language interpreters must adhere to.				
		Term of Contract:	04/10/2025 - 06/30/2025	Contract # 30386		
31.	402	DEPARTMENT OF HEALTH AND HUMAN SERVICES - AGING AND DISABILITY SERVICES - SIERRA REGIONAL CENTER	WASHOE PAINTING COMPANY, LLC	GENERAL	\$89,800	
	Contract Description:	This is a new contract for exterior painting, sealing, and caulking of Building 8D and 8N.				
		Term of Contract:	04/11/2025 - 06/30/2025	Contract # 30397		
32.	403	DEPARTMENT OF HEALTH AND HUMAN SERVICES - HEALTH CARE FINANCING AND POLICY - HEALTH CARE FINANCING AND POLICY ADMINISTRATION	SOCIAL ENTREPRENEURS, INC.	GENERAL 50% FEDERAL 50%	\$71,575	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides project management, oversight, and coordination for actuarial rate analysis.				
		Term of Contract:	04/08/2025 - 06/30/2025	Contract # 30387		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
33.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - ADMINISTRATION	SOCIAL ENTREPRENEURS, INC.	FEDERAL	\$37,722	
	Contract Description:	This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides marketing, planning, and education services. This service agreement provides support and meeting facilitation for the Nevada State Nutrition Action Councils.				
		Term of Contract:	01/01/2025 - 09/30/2025	Contract # 30144		
34.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - CHILDREN, YOUTH AND FAMILY ADMINISTRATION	RICHARD WAYNE ENGLAND	OTHER: CASEY FUNDS FOR INDIAN WELFARE	\$20,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing qualified expert witness testimony.				
		Term of Contract:	03/31/2025 - 11/30/2026	Contract # 30199		
35.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - FAMILY SUPPORT PROGRAM	NEVADA P.E.P., INC.	GENERAL	\$33,640	
	Contract Description:	This is the second amendment to the original contract which provides ongoing support services for the Washoe County Children's Mental Health Consortium and Rural Children's Mental Health Consortium. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$10,480 to \$44,120 due to the addition of project management services.				
		Term of Contract:	08/21/2023 - 06/30/2027	Contract # 27886		
36.	440	DEPARTMENT OF CORRECTIONS - ONE-SHOT	INNOVATIVE COMMUNICATIONS SYSTEMS, LLC	GENERAL	\$98,918	
	Contract Description:	This is a new contract to provide and install nurse call responder equipment in Unit 8 Wing B of the Regional Medical Facility at Northern Nevada Correctional Center.				
		Term of Contract:	04/09/2025 - 08/31/2025	Contract # 30457		
37.	440	DEPARTMENT OF CORRECTIONS - ONE-SHOT	REAL TIME NETWORKS INC.	GENERAL	\$77,520	
	Contract Description:	This is a new contract to supply and install a new key control system at Lovelock Correctional Center.				
		Term of Contract:	04/09/2025 - 06/30/2025	Contract # 30346		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	500	COMMISSION ON MINERAL RESOURCES - DIVISION OF MINERALS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO UNIVERSITY OF NEVADA, RENO	FEE: MINING CLAIMS	\$40,000	Exempt
	Contract Description:	This is a new interlocal agreement to provide services to add enhanced metadata to scanned historic mining district files and increase the discoverability of historic mineral and energy resources information.				
		Term of Contract:	04/09/2025 - 02/28/2029	Contract # 30255		
39.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	ERIN BISHOP DBA CUSTOM CLEAN ELY	GENERAL 26% HIGHWAY 74%	\$14,400	
	Contract Description:	This is a new contract to provide ongoing janitorial services for the combined Nevada Highway Patrol and Nevada Division of Investigations facility located in Ely.				
		Term of Contract:	03/31/2025 - 03/31/2029	Contract # 30393		
40.	651	DEPARTMENT OF PUBLIC SAFETY - NEVADA HIGHWAY PATROL DIVISION	VERICOM LLC	FEDERAL	\$22,485	
	Contract Description:	This is a new contract to provide crash investigation training services and analysis software.				
		Term of Contract:	04/07/2025 - 09/30/2025	Contract # 30275		
41.	651	DEPARTMENT OF PUBLIC SAFETY - HIGHWAY SAFETY GRANTS ACCOUNT	UNITED SITE SERVICES OF NEVADA, INC.	FEDERAL	\$27,852	
	Contract Description:	This is a new contract to provide ongoing portable restroom services for the Apex commercial inspection station in North Las Vegas and Sloan commercial inspection station in Sloan.				
		Term of Contract:	03/31/2025 - 03/31/2029	Contract # 30394		
42.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	LUMOS & ASSOCIATES, INC.	FEE: SPORTSMEN REVENUE	\$56,700	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides professional civil engineering, construction inspection, and materials testing services. This amendment increases the maximum amount from \$128,000 to \$178,000 due to facility work at the Fallon location.				
		Term of Contract:	09/24/2021 - 08/31/2025	Contract # 24718		
43.	702	DEPARTMENT OF WILDLIFE - LAW ENFORCEMENT	SK BASEBALL LLC	FEE: SPORTSMEN REVENUE 15% FEDERAL 85%	\$24,000	
	Contract Description:	This is a new contract to provide outreach and marketing campaign through public service announcements and commercials at Aces Ballpark located in Reno.				
		Term of Contract:	03/20/2025 - 10/31/2025	Contract # 30214		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
44.	704	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	RIVERRESTORATION ORG LLC	GENERAL	\$21,283	
	Contract Description:	This is a new contract to provide a bathymetric survey at the Big Bend of the Colorado State Recreation Area.				
		Term of Contract:	03/20/2025 - 05/31/2025	Contract # 30321		
45.	704	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	SOMETHING GREEN, LLC DBA SIMPLY ELOPED	OTHER: REVENUE	\$12,000	
	Contract Description:	This is a new revenue contract to conduct wedding ceremonies at Valley of Fire State Park.				
		Term of Contract:	03/26/2025 - 05/31/2027	Contract # 30380		
46.	704	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS - PARK IMPROVEMENTS-NON-EXEC	SIERRA SPORTS MARKETING, LLC	GENERAL	\$13,000	
	Contract Description:	This is a new contract to provide interpretive and map sign installation at Spooner Lake and Backcountry State Park.				
		Term of Contract:	03/21/2025 - 06/30/2025	Contract # 30150		
47.	705	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - WATER RESOURCES	KPS3 HOLDINGS LLC	FEDERAL	\$24,910	
	Contract Description:	This is a new contract to provide enhancements and improvements to the NevadaFloods.org website.				
		Term of Contract:	03/19/2025 - 06/30/2025	Contract # 30325		
48.	707	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE LANDS - TAHOE BOND SALE-NON-EXEC	GAIL WILLEY LANDSCAPING INCORPORATED	OTHER: SETTLEMENT	\$70,815	
	Contract Description:	This is a new contract to provide tree planting and irrigation installation on state land located in Glenbrook.				
		Term of Contract:	04/07/2025 - 12/31/2025	Contract # 30424		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
49.	709	STATE DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ENVIRONMENTAL PROTECTION - AIR QUALITY	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO DESERT RESEARCH INSTITUTE	FEDERAL	\$25,500	Exempt
	Contract Description:	This is the first amendment to the original contract which provides laboratory and analytical services to identify and evaluate the chemical characterization of particulate matter related to observations of elevated ozone concentrations in rural portions of Nevada. This amendment extends the termination date from March 31, 2025 to March 31, 2028 and increases the maximum amount from \$24,500 to \$50,000 due to the continued need for these services.				
	Term of Contract:	05/16/2022 - 03/31/2028	Contract # 26040			
50.	748	DEPARTMENT OF BUSINESS AND INDUSTRY - REAL ESTATE - COMMON INTEREST COMMUNITIES	JANET TROST	FEE: LAW AND ADMINISTRATIVE	\$15,000	
	Contract Description:	This is the second amendment to the original contract which provides ongoing mediation services. This amendment increases the maximum amount from \$25,000 to \$40,000 due to the increased need for these services.				
	Term of Contract:	01/06/2022 - 12/31/2025	Contract # 25182			
51.	810	DEPARTMENT OF MOTOR VEHICLES - FIELD SERVICES	VOGUE LAUNDRY AND CLEANERS, INC.	HIGHWAY	\$11,843	
	Contract Description:	This is a new contract to provide ongoing rental of floor mats and scrapers for offices located in Ely and Winnemucca.				
	Term of Contract:	04/07/2025 - 04/30/2029	Contract # 30396			
52.	901	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - REHABILITATION - BLIND BUSINESS ENTERPRISE PROGRAM	EIDE BAILLY LLP	OTHER: BUSINESS ENTERPRISE SET-ASIDE	\$37,000	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides independent vendor audits of the Business Enterprises of Nevada facilities. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the maximum amount from \$38,000 to \$75,000 due to the continued need for these services.				
	Term of Contract:	11/20/2023 - 06/30/2027	Contract # 28180			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
53.	902	GOVERNOR'S OFFICE OF WORKFORCE INNOVATION - NEVADA P20 WORKFORCE REPORTING	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION - OBO SYSTEM ADMINISTRATION	GENERAL	\$26,655	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides ongoing operation and maintenance of the Statewide Longitudinal Data System. This amendment increases the maximum amount from \$250,000.00 to \$276,655.35 due to an increase in salary and fringe benefit costs.				
		Term of Contract:	07/01/2023 - 06/30/2025	Contract # 28098		
54.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - UNEMPLOYMENT INSURANCE	BRIGGS ELECTRIC, INC.	FEDERAL	\$13,255	
	Contract Description:	This is a new contract to provide electrical and circuits hookups at the State Administrative Office located in Carson City.				
		Term of Contract:	03/19/2025 - 12/31/2025	Contract # 30333		
55.	903	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - ADMINISTRATIVE SERVICES - EQUAL RIGHTS COMMISSION	EPATHUSA, INC.	GENERAL 78% FEDERAL 22%	\$87,398	
	Contract Description:	This is the fifth amendment to the original contract which provides a case management system to streamline complaint processing. This amendment extends the termination date from October 31, 2025 to March 31, 2028 and increases the maximum amount from \$572,774.86 to \$660,241.82 due to the need for additional system enhancements.				
		Term of Contract:	11/15/2022 - 03/31/2028	Contract # 26845		
56.	908	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - ADMINISTRATIVE SERVICES - ADMINISTRATION	THE W. W. WILLIAMS COMPANY LLC	OTHER: COST ALLOCATION	\$24,498	
	Contract Description:	This is a new contract to provide preventative maintenance for the emergency backup generator system at the southern headquarters office located in Las Vegas.				
		Term of Contract:	03/25/2025 - 03/31/2027	Contract # 30266		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
57.	B002	LICENSING BOARDS AND COMMISSIONS - ARCHITECTURE, INTERIOR DESIGN AND RESIDENTIAL DESIGN	LING LTD.	FEE: LICENSURE	\$48,000	Professional Service
		Contract Description:	This is a new contract to provide ongoing legal services.			
		Term of Contract:	06/01/2025 - 05/31/2027	Contract # 30194		
58.	B005	LICENSING BOARDS AND COMMISSIONS - CHIROPRACTIC PHYSICIANS	LING LTD.	FEE: LICENSURE	\$60,000	Professional Service
		Contract Description:	This is a new contract to provide ongoing legal services.			
		Term of Contract:	06/01/2025 - 05/31/2027	Contract # 30192		
59.	B015	LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS	CASEY NEILON, INC.	FEE: LICENSURE	\$45,000	Professional Service
		Contract Description:	This is a new contract to provide an independent financial audit.			
		Term of Contract:	04/03/2025 - 12/31/2026	Contract # 30220		
60.	B015	LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS	LIPPARELLI LEGAL SERVICES PROF. LLC	FEE: LICENSURE	\$65,000	Professional Service
		Contract Description:	This is a new contract to provide ongoing hearing officer services.			
		Term of Contract:	04/03/2025 - 12/31/2026	Contract # 30307		
61.	B015	LICENSING BOARDS AND COMMISSIONS - MEDICAL EXAMINERS	TRIPLE J DIMENSIONS, INC. DBA OASIS POND MAINT. & SUPPLY	FEE: LICENSURE	\$10,000	
		Contract Description:	This is a new contract to provide ongoing pond cleaning and maintenance services for the Gateway Drive location in Reno.			
		Term of Contract:	03/03/2025 - 12/31/2026	Contract # 29932		
62.	B028	LICENSING BOARDS AND COMMISSIONS - VETERINARY MEDICAL EXAMINERS	KAEMPFER CROWELL, LTD.	FEE: LICENSURE	\$10,000	Professional Service
		Contract Description:	This is a new contract to provide government relations services.			
		Term of Contract:	02/01/2025 - 06/30/2025	Contract # 30209		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
63.	B028	LICENSING BOARDS AND COMMISSIONS - VETERINARY MEDICAL EXAMINERS	LING LTD.	FEE: LICENSURE	\$90,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing legal services.				
		Term of Contract:	06/01/2025 - 05/31/2028	Contract # 30216		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30335**Agency Name: **STATE ENERGY OFFICE**Agency Code: **011**Appropriation Unit: **4868-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Estipona Group

Contractor Name: **Estipona Group**Address: **PO Box 10606**City/State/Zip: **Reno, NV 89510**

Contact/Phone: Nicole Dion 702-328-6896

Vendor No.: T29035435

NV Business ID: NV19951042070

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/19/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2025**Contract term: **195 days**4. Type of contract: **Provider Agreement**Contract description: **Workforce Outreach**

5. Purpose of contract:

This is new service agreement under Master Service Agreement Consulting Marketing and Education Services 99SWC-S2340 to provide the agency strategic outreach and engagement focusing on energy workforce development.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$50,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency received funding to create a workforce development program. To successfully meet the needs of the state, the vendor is performing a community outreach and engagement initiative to inform the notice of funding opportunity.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The agency does not have the capacity or staff with expertise in this area.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Social Entrepreneurs Inc,
Davison Belluso
Abbi Agency
Estipona**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Of the proposals received, GOE felt that the vendor met the scope of work.

d. Last bid date: 02/11/2025 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Tourism

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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	mbro28	03/11/2025 14:31:31 PM
Division Approval	mbro28	03/11/2025 14:31:35 PM
Department Approval	mbro28	03/11/2025 14:32:15 PM
Contract Manager Approval	ssands	03/18/2025 13:56:12 PM
Budget Analyst Approval	31400	03/19/2025 14:36:26 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30400**Agency Name: **STATE ENERGY OFFICE**Agency Code: **011**Appropriation Unit: **4868-11**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: The Olson Group

Contractor Name: **The Olson Group**Address: **209 Madison Street Suite 410**City/State/Zip: **Alexandria, VA 22314**

Contact/Phone: Kyle Olson 7035189985

Vendor No.: T32013622

NV Business ID: NV20232683089

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 01GO-S3141

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/31/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/29/2025**Contract term: **151 days**4. Type of contract: **Contract**Contract description: **Risk Assessment**

5. Purpose of contract:

This is a new contract to perform a risk assessment on the State Energy Security Plan and provide a risk mitigation approach.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$41,000.00**

Other basis for payment: As invoiced by the Contractor and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

The Risk Assessment of the SESP is a requirement by the Department of Energy outlined in Section 40108 of the Bipartisan Infrastructure Investment and Jobs Act (IIJA). States must meet all six (6) requirements.

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 skillset or time to be able to complete this task.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**The Olson Group
Centurion Solutions LLC
STYX VENTURES LLC DBA Falcon Guard Cyber Solutions**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP # 08DOA-S3141, 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: 02/21/2025 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

FY23-FY24, GOE, 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	mbro28	03/25/2025 13:30:04 PM
Division Approval	mbro28	03/25/2025 13:30:07 PM
Department Approval	mbro28	03/25/2025 13:30:10 PM
Contract Manager Approval	lfredley	03/26/2025 09:14:51 AM
Budget Analyst Approval	31400	03/31/2025 08:50:44 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30260**Amendment
Number: **1**Legal Entity
Name: **The Institute**Agency Name: **GOVERNOR'S FINANCE OFFICE**Contractor Name: **The Institute**Agency Code: **015**Address: **dba The JFA Institute**Appropriation Unit: **1340-10**Is budget authority
available?: **Yes**City/State/Zip: **DENVER, CO 80220-5326**If "No" please explain: **Not Applicable**Contact/Phone: **303/399-3218**Vendor No.: **T27021400**NV Business ID: **NV20121464306**To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **02/26/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2025**Contract term: **123 days**4. Type of contract: **Contract**Contract description: **Prison population**

5. Purpose of contract:

This is the first amendment to the original contract which provides an updated Prison Population Projection Report. This amendment expands the scope to include a prison population projection report. This amendment increases the maximum amount from \$16,000 to \$50,000 due to the expanded scope.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$16,000.00	\$16,000.00	\$16,000.00	Yes - Info
2. Amount of current amendment (#1):	\$34,000.00	\$34,000.00	\$50,000.00	Yes - Info
3. New maximum contract amount:	\$50,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

JFA Institute had previously provided a report late spring last year, and was to provide an update for the budget build, but their contract expired. Part of the JFA report was used in the Parole and Probation budget build and needs to be updated. The position we are in now requires an updated report ASAP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Statute requires an outside independent analysis

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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	dcarlso4	03/13/2025 15:53:12 PM
Division Approval	jkidd	03/18/2025 12:12:32 PM
Department Approval	jkidd	03/18/2025 12:12:36 PM
Contract Manager Approval	ssands	03/18/2025 16:08:22 PM
Budget Analyst Approval	cpalme2	03/18/2025 17:49:58 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: 30431

Agency Name: **ATTORNEY GENERAL'S OFFICE**

Agency Code: 030

Appropriation Unit: 1030-04

Is budget authority available?: Yes

If "No" please explain: Not Applicable

Legal Entity Name: Jackson Lewis P.C.

Contractor Name: Jackson Lewis P.C.

Address: 200 Connell Drive
Suite 2000

City/State/Zip: Berkley Heights, NJ 07922

Contact/Phone: Joseph Lazzarotti 908-795-5205

Vendor No.: T32013371

NV Business ID: NV20131665504

To what State Fiscal Year(s) will the contract be charged? 2025-2026

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 %

Statutory Contingency 15%; Gaming Control Board 85%

2. Contract start date:

a. Effective upon Board of Examiner's approval? No or b. other effective date 12/05/2024

Anticipated BOE meeting date 05/2025

Retroactive? Yes

If "Yes", please explain

The contract need arose to provide [REDACTED]. No DAG currently possesses the experience or ability required to navigate the highly specialized area of [REDACTED].

3. Termination Date: 12/04/2025

Contract term: 364 days

4. Type of contract: Contract

Contract description: Special Counsel

5. Purpose of contract:

This is a new contract to provide special counsel services to the Nevada Gaming Control Board.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: \$75,000.00

Other basis for payment: \$425 per hour for Principals; \$325 per hour for Associates

II. JUSTIFICATION

7. What conditions require that this work be done?

Provide outside legal counsel expertise.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No Deputy Attorney General possesses the experience or ability required to navigate the highly specialized area of [REDACTED]

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Office of Attorney General contracts. Services provided have been satisfactory.
C26988 11/22/2022 - 11/01/2023
C28878 03/14/2024 - 12/01/2024

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Darlene Caruso, Chief DAG Ph: 702-486-3785

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	04/01/2025 12:23:13 PM
Division Approval	jhoba2	04/01/2025 12:23:16 PM
Department Approval	jhoba2	04/01/2025 12:23:20 PM
Contract Manager Approval	cthorso1	04/01/2025 12:28:08 PM
Budget Analyst Approval	vmilazz1	04/08/2025 18:12:26 PM

AARON D. FORD
Attorney General

CRAIG A. NEWBY
First Assistant Attorney General

CHRISTINE JONES BRADY
Second Assistant Attorney General



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1 State of Nevada Way, Suite 100
Las Vegas, Nevada 89119

TERESA BENITEZ-
THOMPSON
Chief of Staff

LESLIE NINO PIRO
General Counsel

HEIDI PARRY STERN
Solicitor General

MEMORANDUM

To: Budd Milazzo, Executive Branch Budget Officer,
Governor's Finance Office, Budget Division

From: Leslie Nino Piro, General Counsel, ext. 6-3077, LNinoPiro@ag.nv.gov LNP

Date: March 26, 2025

Subject: Support for Approval of Retroactive Contract under SAM 0114B for
Special Counsel Jackson Lewis CETS# 30431

SAM 0114 B provides as follows,

When an agency submits a retroactive contract for inclusion on the action item agenda, support documentation submitted to GFO and provided to Board Members must include a memorandum explaining why the proposed contract should be approved retroactively. The memorandum must be on agency letterhead and approved by the agency head or designee.

This memorandum documents the Office of the Attorney General's ("OAG") support for submission of a retroaction contract. Given the cost of outside legal services and associated expenses, the OAG only employs private counsel, *i.e.*, "special counsel," when it would be "impracticable," "uneconomical," or may "constitute a conflict of interest" for the OAG to continue providing legal services. NRS 41.0339, 41.03435, 228.091. Although uncommon, a legal issue can arise for which no Deputy Attorney General ("DAG") possesses the experience or ability required to navigate a highly specialized legal practice area. In those situations, the OAG retains special counsel to ensure a client agency's legal needs are met and comply with the Nevada Rules of Professional Responsibility governing all attorneys.

[REDACTED]

[REDACTED] o DAG currently possesses the experience or ability required to navigate the highly specialized area of

[REDACTED]

The circumstances requiring special counsel for the [REDACTED] arose unexpectedly and required immediate action to ameliorate and prevent further harm. The OAG requests retroactive approval due to the immediate need for legal and [REDACTED]. Accordingly, pursuant to SAM 0114 B, the OAG requests retroactive approval for the Jackson Lewis contract to December 5, 2024.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30295**

Agency Name:	ATTORNEY GENERAL'S OFFICE	Legal Entity Name:	Little Mendelson, P.C.
Agency Code:	030	Contractor Name:	Little Mendelson, P.C.
Appropriation Unit:	1030-04	Address:	3960 Howard Hughes Parkway Suite 300
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89169-5937
If "No" please explain:	Not Applicable	Contact/Phone:	702-862-8800
		Vendor No.:	T27043630
		NV Business ID:	NV20031371619

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Statutory Contingency

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/07/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **Yes**

If "Yes", please explain

The contract need arose unexpectedly during the normal course of the representation. General Counsel reviewed the requests and pleadings from the Personnel Division and determined Special Counsel is needed due to the conflict of interest in the Office of the Attorney General providing representation.

3. Termination Date: **12/31/2026**Contract term: **1 year and 327 days**4. Type of contract: **Contract**Contract description: **Special Counsel**

5. Purpose of contract:

This is a new contract to provide special counsel services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00**

Other basis for payment: \$350 per hour for Shareholders; \$225 per hour for Associates

II. JUSTIFICATION

7. What conditions require that this work be done?

Provide outside legal counsel expertise.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Office of the Attorney General has determined that providing legal services to the clients would constitute a conflict of interest.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Office of Attorney General contracts. Services provided have been satisfactory.
C23084 02/21/2020 - 12/31/2020
C23799 08/01/2020 - 06/30/2021
C25980 01/01/2022 - 04/30/2022

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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:

Leslie Nino Piro, General Counsel Ph: 702-486-3077

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jhoba2	03/11/2025 12:23:36 PM
Division Approval	rjon21	03/21/2025 07:18:45 AM
Department Approval	rjon21	03/21/2025 07:18:57 AM
Contract Manager Approval	cthorso1	03/26/2025 12:24:28 PM
Budget Analyst Approval	vmilazz1	04/08/2025 18:37:33 PM

AARON D. FORD
Attorney General

CRAIG A. NEWBY
First Assistant Attorney General

CHRISTINE JONES BRADY
Second Assistant Attorney General



STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL

1 State of Nevada Way, Suite 100
Las Vegas, Nevada 89119

TERESA BENITEZ-
THOMPSON
Chief of Staff

LESLIE NINO PIRO
General Counsel

HEIDI PARRY STERN
Solicitor General

MEMORANDUM

To: Budd Milazzo, Executive Branch Budget Officer,
Governor's Finance Office, Budget Division

From: Leslie Nino Piro, General Counsel, ext. 6-3077, LNinoPiro@ag.nv.gov;
Christena Georgas-Burns, Deputy General Counsel, ext. 6-9234,
cgeorgasburns@ag.nv.gov

Date: March 13, 2025

Subject: Support for Approval of Retroactive Contract for Special Counsel, Littler
Mendelson, P.C., per SAM 0114B (CETS # 30295)

SAM 0114 B provides as follows,

When an agency submits a retroactive contract for inclusion on the action item agenda, support documentation submitted to GFO and provided to Board Members must include a memorandum explaining why the proposed contract should be approved retroactively. The memorandum must be on agency letterhead and approved by the agency head or designee.

This memorandum documents the Office of the Attorney General's ("OAG") support for submission of a retroaction contract.

The purpose of the contract is to provide conflict counsel to James Whalen in *Bachmann v. State of Nevada Dept of Transportation, et al.* and Matthew Dorangrichia in *Maine v. State of Nevada ex rel. Nevada DETR, et al.*, who are sued individually in their personal and/or official capacity as current or former employees of the State of Nevada.

These situations arose during the normal course of the representation. The OAG became aware of the *Bachmann* lawsuit when it accepted service on October 1, 2024 for the Nevada Department of Transportation. The case was assigned to deputy attorneys general ("DAGs") in the OAG Personnel Division. The OAG became aware of the *Maine* lawsuit when it accepted service for the Department of Employment

Training and Rehabilitation in January 2025. The case was assigned to a senior DAG in the Personnel Division.

Upon requests from the Personnel Division, General Counsel reviewed the requests and pleadings for both cases and determined there would be an actual conflict of interest in the OAG representing James Whelan in the *Bachmann* matter and Matthew Dorangricchia in the *Maine Matter*. General Counsel recommended contracting with Special Counsel to represent both pursuant to NRS 41.03435.

The Office of the Attorney General requests retroactive approval to February 7, 2025, due to the immediate need for legal services to proceed with this case and meet required deadlines and proceedings set by the court as soon as March 6, 2025.

Accordingly, pursuant to SAM 0114 B, the OAG requests retroactive approval of CETS #30295 for Littler Mendelson, P.C. to February 7, 2025.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30279**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	FORCE INDUSTRIAL MECHANICAL LLC
Agency Code:	082	Contractor Name:	FORCE INDUSTRIAL MECHANICAL LLC
Appropriation Unit:	1349-14	Address:	5 Catus Garden Drive
Is budget authority available?:	Yes	City/State/Zip	Henderson, NV 89011-2500
If "No" please explain:	Not Applicable	Contact/Phone:	702-203-1314
		Vendor No.:	T32008023
		NV Business ID:	NV20181027763

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings & Grounds Rental Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/26/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **96 days**4. Type of contract: **Contract**Contract description: **HVAC**

5. Purpose of contract:

This is a new contract to provide for the removal, replacement, and to program the air handlers 1 & 2 supply and return fan motor's.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$37,493.00**

Other basis for payment: CAT14-FY25-004

II. JUSTIFICATION

7. What conditions require that this work be done?

Remove, replace, program air handlers 1 & 2 supply, and return fan motor's VFD's, these need to have a bypass. The replacement of electrical and mechanical components improves the reliability and longevity of the HVAC equipment.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds HVAC does not have the manpower to facilitate this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	dcarlso4	02/27/2025 17:14:58 PM
Division Approval	jkidd	03/12/2025 11:31:49 AM
Department Approval	jkidd	03/12/2025 11:31:51 AM
Contract Manager Approval	ssands	03/13/2025 11:09:48 AM
Budget Analyst Approval	bmacke1	03/26/2025 08:36:52 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30377**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	JMA CONSTRUCTION
Agency Code:	082	Contractor Name:	JMA CONSTRUCTION
Appropriation Unit:	1349-14	Address:	1361 E Appion Way
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89701
If "No" please explain:	Not Applicable	Contact/Phone:	775-882-6347
		Vendor No.:	T29045978
		NV Business ID:	NV20031254722

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building and Grounds Rental Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2026**Contract term: **331 days**4. Type of contract: **Contract**Contract description: **Capitol Steps**

5. Purpose of contract:

This is a new contract to provide the removal and cleaning of the existing mortar joints on granite steps at Capitol Building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,360.00**

Other basis for payment: CAT14-FY25-002

II. JUSTIFICATION

7. What conditions require that this work be done?

Failing mortar, and granite steps need repair

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower needed to facilitate the CAT14-FY25-002 project.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	tbeaureg	03/19/2025 16:23:34 PM
Division Approval	jkidd	03/20/2025 14:24:30 PM
Department Approval	jkidd	03/20/2025 14:24:33 PM
Contract Manager Approval	ssands	03/24/2025 11:53:47 AM
Budget Analyst Approval	bmacke1	04/03/2025 16:08:39 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30378**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1349-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JMA CONTSTRUCTION COMPANY INC**Contractor Name: **JMA CONTSTRUCTION COMPANY
INC**Address: **1361 E. Appion Way**City/State/Zip: **Carson City, NV 89701**Contact/Phone: **775-882-6347**Vendor No.: **T29045978**NV Business ID: **NV20031254722**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rental Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2026**Contract term: **331 days**4. Type of contract: **Contract**Contract description: **Laxalt Bldg**

5. Purpose of contract:

This is a new contract to provide for the removal and clean existing mortar joints on granite steps at Laxalt Building.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,250.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Failing mortar, and granite steps need repair

8. Explain why State employees in your agency or other State agencies are not able to do this work:

**Buildings and Grounds does not have the manpower needed to facilitate this project.
CAT14-FY25-011**9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	tbeaureg	03/20/2025 09:16:05 AM
Division Approval	jkidd	03/20/2025 10:05:38 AM
Department Approval	jkidd	03/20/2025 10:05:41 AM
Contract Manager Approval	ssands	03/24/2025 11:55:02 AM
Budget Analyst Approval	bmacke1	04/03/2025 16:05:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30374**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **LA PERKS PLUMBING & HEATING**Contractor Name: **LA PERKS PLUMBING & HEATING**Address: **765 E Greg Street, Ste 103**City/State/Zip: **Sparks, NV 89431-7133**Contact/Phone: **775-358-4403**Vendor No.: **PUR0000938**NV Business ID: **NV19861000909**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rental Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2026**Contract term: **331 days**4. Type of contract: **Contract**Contract description: **repair work**

5. Purpose of contract:

This is a new contract to replace damaged submersible turbine manway.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,991.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Damaged submersible turning manway

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower needed to facilitate this 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 Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	tbeaureg	03/24/2025 08:20:24 AM
Division Approval	jkidd	03/25/2025 10:13:44 AM
Department Approval	jkidd	03/25/2025 10:13:47 AM
Contract Manager Approval	ablak2	03/26/2025 10:18:51 AM
Budget Analyst Approval	bmacke1	04/03/2025 15:59:55 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30276**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	RHP Mechanical Systems
Agency Code:	082	Contractor Name:	RHP Mechanical Systems
Appropriation Unit:	1349-14	Address:	Ray Heating Products Inc., dba 1008 E. 4TH STREET
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89706
If "No" please explain:	Not Applicable		
To what State Fiscal Year(s) will the contract be charged?	2025		
What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.			

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Rental Income

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **88 days**4. Type of contract: **Contract**Contract description: **HVAC**

5. Purpose of contract:

This is a new contract to provide for the replacement of the variable frequency drive east return fan unit.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,035.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The replacement of electrical and mechanical components improves the reliability and longevity of the HVAC equipment.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds HVAC does not have the manpower to facilitate this service.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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	kpacheco	02/24/2025 08:14:30 AM
Division Approval	jkidd	02/24/2025 13:40:18 PM
Department Approval	jkidd	02/24/2025 13:40:21 PM
Contract Manager Approval	ssands	03/18/2025 08:24:09 AM
Budget Analyst Approval	bmacke1	04/03/2025 16:02:45 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **29452**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: JP Fence LLC
Agency Code: 082	Contractor Name: JP Fence LLC
Appropriation Unit: 1366-04	Address: 16 Jones Rd. Ste E
Is budget authority available?: Yes	City/State/Zip: Moundhouse, NV 89706
If "No" please explain: Not Applicable	Contact/Phone: Jason Plaut 775-671-7912
	Vendor No.: T32013686
	NV Business ID: NV20161006532
To what State Fiscal Year(s) will the contract be charged?	2025-2026

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Buildings and Grounds Water Sales Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/26/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2025**Contract term: **280 days**4. Type of contract: **Contract**Contract description: **Fence Repair/Install**

5. Purpose of contract:

This is a new contract to provide fence repairs and installation for the Marlette Lake Shop property.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,294.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Fencing components must be maintained, repaired, replaced and installation as needed. Fencing provides safety, security, and access control.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Buildings and Grounds does not have the manpower and technical knowledge for this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Reno Fence
Tholl Fence
JP Fence
Artistic Fenceb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

JP Fence LLC provided the ONLY bid.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

JP Fence has been a vendor to various agencies since 2023 and the agency is satisfied with their work.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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:

Blake Gudmundson, Water Systems Manager Ph: 775-687-1022

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tbeaureg	02/28/2025 16:43:17 PM
Division Approval	jkidd	03/06/2025 07:45:53 AM
Department Approval	jkidd	03/06/2025 07:45:56 AM
Contract Manager Approval	ssands	03/06/2025 07:47:52 AM
Budget Analyst Approval	bmacke1	03/26/2025 08:54:18 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30269**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	TRUCKEE MEADOWS WATER AUTHORITY
Agency Code:	082	Contractor Name:	TRUCKEE MEADOWS WATER AUTHORITY
Appropriation Unit:	1366-06	Address:	1355 CAPITAL BLVD
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89502
If "No" please explain:	Not Applicable	Contact/Phone:	775-834-8080
		Vendor No.:	T81201867
		NV Business ID:	NV

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Water Revenues/One-shot

Agency Reference #: 117516

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/21/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **101 days**4. Type of contract: **Contract**Contract description: **MISC**

5. Purpose of contract:

This is a new contract to provide professional miscellaneous services to assist with the update of the of the Marlette Lake Water System for the Marlette Lake Water Right Revision Agency CIP Project; CIP Project No. 25-A007; SPWD Contract No. 117516.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,600.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

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 1366, expenditure category 06, AB470 MARLETTE One Shot, category 04, Operating.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

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:

Jason Crosby, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/21/2025 14:39:25 PM
Division Approval	nmann	02/21/2025 14:39:27 PM
Department Approval	nmann	02/21/2025 14:39:30 PM
Contract Manager Approval	lwildes	02/21/2025 14:46:14 PM
Budget Analyst Approval	bmacke1	03/21/2025 14:54:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: 30271

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	United States Dept of Interior US Geological Survey
Agency Code:	082	Contractor Name:	United States Dept of Interior US Geological Survey
Appropriation Unit:	1366-04	Address:	Suite 3
Is budget authority available?:	Yes	City/State/Zip	Carson City, NV 89701
If "No" please explain:	Not Applicable	Contact/Phone:	Megan Rogers 702-294-7858
		Vendor No.:	
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? 2025-2027

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval?	No	or b. other effective date	10/01/2024
Anticipated BOE meeting date	03/2025		

Retroactive? Yes

If "Yes", please explain

The attached contract with the U.S. Department of the Interior, U.S. Geological Survey, Nevada Water Science Center is to provide water-resources monitoring program which consists of the operation of the water-level gage at Marlette Lake. The effective date of the contract will be October 1, 2024, and terminate on September 30, 2026.

The contract was not submitted in time due to negotiations with the U.S Department of the Interior, U.S. Geological Survey.

3. Termination Date: 09/30/2026
Contract term: 1 year and 364 days

4. Type of contract: Provider Agreement
Contract description: Water Monitoring

5. Purpose of contract:
This is a new agreement to provide an ongoing water-resources monitoring program consisting of the operation and maintenance of the water-level gage at Marlette Lake.

6. NEW CONTRACT
The maximum amount of the contract for the term of the contract is: \$13,780.00
Other basis for payment: FY 2025 \$6,825; FY 2026 \$6,955;

II. JUSTIFICATION

7. What conditions require that this work be done?
The USGS monitoring of Marlette Lake is a tool that enables the operators of this reservoir to have eyes on the operations of the dam. This allows the operators to watch levels of the dam and spillway. To make adjustments that keep proper levels at the earthen dam structure and spillway. It is also used for data, for storage capabilities and allows trends of annual snow runoff. This is critical infrastructure for the operations of this earthen dam and gives a visual during winter months to operate

8. Explain why State employees in your agency or other State agencies are not able to do this work:
N/A

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):
 Not Applicable
- b. Solicitation Waiver: **Not Applicable**
- c. Why was this contractor chosen in preference to other?
- d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
 No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
 Not Applicable
12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?
 No
- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?
 No
- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?
 No If "Yes", please explain
 Not Applicable
13. Has the contractor ever been engaged under contract by any State agency?
 No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:
 Not Applicable
14. Is the contractor currently involved in litigation with the State of Nevada?
 No If "Yes", please provide details of the litigation and facts supporting approval of the contract:
 Not Applicable
15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
 Governmental Entity
16. Not Applicable
17. Not Applicable
18. Not Applicable
19. Agency Field Contract Monitor:
20. Contract Status:
 Contract Approvals:
- | | | |
|---------------------------|----------|------------------------|
| Approval Level | User | Signature Date |
| Budget Account Approval | dcarlso4 | 02/24/2025 13:27:45 PM |
| Division Approval | jkidd | 03/12/2025 16:41:14 PM |
| Department Approval | jkidd | 03/12/2025 16:41:17 PM |
| Contract Manager Approval | ssands | 03/13/2025 09:42:13 AM |
| Budget Analyst Approval | bmacke1 | 04/08/2025 17:28:09 PM |

Joe Lombardo
Governor



Joy Grimmer
Director

Bob Ragar
Deputy Director

Wilfred J. Lewis, Jr.
Administrator

Carson City Office:
406 E. Second Street
Carson City, Nevada 89701
Phone: (775) 684-1800

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
PUBLIC WORKS DIVISION
Buildings and Grounds Section

Las Vegas Office:
7115 Amigo Street, Suite 100
Las Vegas, Nevada 89119
Phone: (702) 486-4300

MEMORANDUM

Date: March 6, 2025
To: Board of Examiner's
From: Kent Choma, Deputy Administrator 
Subject: Retroactive Contract Agreement for Marlette Lake Water-Resources Monitoring Program, U.S. Geological Survey.

Pursuant to the Contract Summary question 2b., "effective other date, retroactive" contracts with an effective date prior to BOE approval (retroactive) must be accompanied by a memorandum explaining the reason prior BOE approval was not obtained.

The attached contract with the U.S. Department of the Interior, U.S. Geological Survey, Nevada Water Science Center is to provide water-resources monitoring program which consists of the operation of the water-level gage at Marlette Lake. The effective date of the contract will be October 1, 2024, and terminate on September 30, 2026.

The contract was not submitted in time due to negotiations with the U.S Department of the Interior, U.S. Geological Survey.

On behalf of State Public Works, Buildings and Grounds, I am requesting approval to proceed with this contract for the services provided and payment.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **25079** Amendment Number: **1**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **VERUS ASSOCIATES NEVADA, LLC**

Agency Code: **082** Contractor Name: **VERUS ASSOCIATES NEVADA, LLC**

Appropriation Unit: **1550-28** Address: **9210 PROTOTYPE DR., STE 101**

Is budget authority available?: **Yes** City/State/Zip: **RENO, NV 89512**

If "No" please explain: Not Applicable Contact/Phone: **775-870-1004**

Vendor No.: **T29038999**

NV Business ID: **NV20161620968**

To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 114499

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2021**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2025**Contract term: **3 years and 198 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 Northern Nevada Correctional Center - Housing Units 4-7 Cell Doors and Lock Replacement CIP Project to include schematic design phase, design development phase, detailed design drawings, floor plans, construction documents and construction administration services required to replace the sally port doors, locks, and controls in the different housing units: CIP Project Nos. 21-M58, 21-M60: SPWD Contract No. 114499. This amendment increases the maximum amount from \$534,038 to \$551,168 for additional construction administration services due to an extended construction timeframe.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$534,038.00	\$534,038.00	\$534,038.00	Yes - Action
2. Amount of current amendment (#1):	\$17,130.00	\$17,130.00	\$17,130.00	Yes - Info
3. New maximum contract amount:	\$551,168.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/21/2025 11:36:53 AM
Division Approval	nmann	02/21/2025 11:36:56 AM
Department Approval	nmann	02/21/2025 11:37:01 AM

Contract Manager Approval
Budget Analyst Approval

lwildes
bmacke1

02/21/2025 12:04:06 PM
03/26/2025 09:12:58 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: **28575** Amendment Number: **3**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS, PC**

Agency Code: **082** Contractor Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS, PC**

Appropriation Unit: **1558-19** Address: **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: **702-251-8896**

Vendor No.: **T80997582**

NV Business ID: **NV19871041301**

To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 116145

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2024**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2027**Contract term: **3 years and 172 days**4. Type of contract: **Contract**
Contract description: **Arch / Eng**

5. Purpose of contract:

This is the third amendment to the original contract which provides professional architectural/engineering services for the Veterans Services - North Las Vegas Veterans Home Advance Planning CIP Project: CIP Project No. 23-P04; SPWD Contract No. 116145. This amendment increases the maximum amount from \$9,150,320 to \$9,193,037.78 due to additional drainage and traffic studies needed for the site.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$8,993,700.00	\$8,993,700.00	\$8,993,700.00	Yes - Action
a. Amendment 1:	\$15,270.00	\$15,270.00	\$15,270.00	Yes - Info
b. Amendment 2:	\$141,350.00	\$141,350.00	\$156,620.00	Yes - Action
2. Amount of current amendment (#3):	\$42,717.78	\$42,717.78	\$42,717.78	Yes - Info
3. New maximum contract amount:	\$9,193,037.78			

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Legislative approved CIP projects

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	03/21/2025 16:29:43 PM
Division Approval	nmann	03/21/2025 16:29:46 PM
Department Approval	nmann	03/21/2025 16:29:50 PM
Contract Manager Approval	lwildes	03/21/2025 16:33:07 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **29726**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **IN2IT ARCHITECTURE**Agency Code: **082**Contractor Name: **IN2IT ARCHITECTURE**Appropriation Unit: **1558-20**Address: **5135 S. DURANGO DR. #103**Is budget authority
available?: **Yes**City/State/Zip **LAS VEGAS, NV 89113**

If "No" please explain: Not Applicable

Contact/Phone: **702-852-2252**Vendor No.: **T29045148**NV Business ID: **NV20131112567**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **117073**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **10/02/2024**Anticipated BOE meeting date **03/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2027**Contract term: **2 years and 271 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 Department of Health and Human Services - Advance Planning: Southern Nevada Forensic Facility CIP Project to include a design phase with meetings, mechanical and electrical engineering, and construction administration with bid review and submission for the construction, build, and replacement of the existing buildings 1300, 1304, and 1391 at the Desert Regional Center: CIP Project No. 23-P06(a); SPWD Contract No. 117073. This amendment increases the maximum amount from \$967,500 to \$1,054,500 for additional architectural and civil engineering services to extend a 10" water main.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$967,500.00	\$967,500.00	\$967,500.00	Yes - Action
2. Amount of current amendment (#1):	\$87,000.00	\$87,000.00	\$87,000.00	Yes - Info
3. New maximum contract amount:	\$1,054,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Yes. SPWD, and currently with satisfactory results.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/21/2025 10:39:26 AM
Division Approval	nmann	02/21/2025 10:39:29 AM
Department Approval	nmann	02/21/2025 10:39:33 AM

Contract Manager Approval
Budget Analyst Approval

lwildes
bmacke1

02/21/2025 11:09:52 AM
03/21/2025 15:06:04 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30235**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	UNVC DBA CMB CONSULTANTS
Agency Code:	082	Contractor Name:	UNVC DBA CMB CONSULTANTS
Appropriation Unit:	1558-20	Address:	1067 W 1400 S
Is budget authority available?:	Yes	City/State/Zip	LEHI, UT 84043
If "No" please explain:	Not Applicable	Contact/Phone:	385-429-5870
		Vendor No.:	T32012002
		NV Business ID:	NV20222334133

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 117506

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/21/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2027**Contract term: **2 years and 101 days**4. Type of contract: **Contract**Contract description: **MSA**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Department of Health and Human Services - Advance Planning: Southern Nevada Forensic Facility CIP Project to include design development drawings and construction documents related to the commissioning services for the forensics facility enclosure design: CIP Project No. 23-P06; SPWD Contract No. 117506.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$17,100.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

null, null Ph: null

Heather Holstrom, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/20/2025 16:11:25 PM
Division Approval	nmann	02/20/2025 16:11:38 PM
Department Approval	nmann	02/20/2025 16:11:40 PM
Contract Manager Approval	lwildes	02/21/2025 08:49:38 AM
Budget Analyst Approval	bmacke1	03/21/2025 15:46:21 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25205**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **ARCHITECTS PLUS, LLC**Agency Code: **082**Contractor Name: **ARCHITECTS PLUS, LLC**Appropriation Unit: **1591-38**Address: **35 MARTIN ST.**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89509-2825**

If "No" please explain: Not Applicable

Contact/Phone: **775-329-8001**Vendor No.: **T80870250**NV Business ID: **NV20001117428**To what State Fiscal Year(s) will the contract be charged? **2022-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **114549**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/14/2021**Anticipated BOE meeting date **03/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2025**Contract term: **3 years and 198 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 Nevada Division of Forestry Northern Region 2 Headquarters Heavy Equipment Repair Shop Renovation CIP Project, to include design development, construction administration, geotechnical investigation and report, property legal description work, furniture, fixtures, and equipment services and analysis of the existing site fire-water system associated with the Heavy Equipment Repair Shop Renovations: CIP Project No. 21-C01, SPWD Contract No. 114549. This amendment increases the maximum amount from \$327,475 to \$378,573 due to additional utility application fees, site plan redesign, and construction administration services related to the inclusion of an emergency generator.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$327,475.00	\$327,475.00	\$327,475.00	Yes - Action
2. Amount of current amendment (#1):	\$51,098.00	\$51,098.00	\$51,098.00	Yes - Info
3. New maximum contract amount:	\$378,573.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/26/2025 14:57:54 PM
Division Approval	nmann	02/26/2025 14:57:57 PM
Department Approval	nmann	02/26/2025 14:58:00 PM

Contract Manager Approval
Budget Analyst Approval

lwildes
bmacke1

02/26/2025 15:00:58 PM
03/21/2025 16:05:02 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **28054**Amendment
Number: **3**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **CARPENTER SELLERS DEL GATTO
ARCHITECTS, PC**Agency Code: **082**Contractor Name: **CARPENTER SELLERS DEL GATTO
ARCHITECTS, PC**Appropriation Unit: **1594-35**Address: **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: 702-251-8896

Vendor No.: T80997582

NV Business ID: NV19871041301

To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 115630

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **09/12/2023**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2027**Contract term: **3 years and 292 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the third amendment to the original contract which provides professional architectural/engineering services for the Las Vegas Purchased Building Improvements CIP Project: CIP Project No. 23-C36; SPWD Contract No. 115630. This amendment increases the maximum amount from \$600,000 to \$630,000 due to additional design services, general consulting, and tenant improvements.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$200,000.00	\$200,000.00	\$200,000.00	Yes - Action
a. Amendment 1:	\$200,000.00	\$200,000.00	\$200,000.00	Yes - Action
b. Amendment 2:	\$200,000.00	\$200,000.00	\$200,000.00	Yes - Action
2. Amount of current amendment (#3):	\$30,000.00	\$30,000.00	\$30,000.00	Yes - Info
3. New maximum contract amount:	\$630,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	02/25/2025 16:26:05 PM
Division Approval	nmann	02/25/2025 16:26:09 PM
Department Approval	nmann	02/25/2025 16:26:12 PM
Contract Manager Approval	lwildes	02/26/2025 08:02:40 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30343**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1594-37**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **PURCELL ELECTRICAL PROF CROP PK ELECTRICAL INC**Contractor Name: **PURCELL ELECTRICAL PROF CROP PK ELECTRICAL INC**Address: **681 SIERRA ROSE DR. STE. B**City/State/Zip: **RENO, NV 89511-2060**Contact/Phone: **775-826-9010**Vendor No.: **T81016802**NV Business ID: **NV19961128650**To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	75.00 %		Fees	0.00 %
	Federal Funds	0.00 %	X	Bonds	25.00 %
	Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **117603**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/03/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2027**Contract term: **2 years and 88 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is a new contract which provides professional architectural/engineering services for the Generator System Improvements (Marlette Lake Water System) CIP Project, to include design development services, construction documents, bidding and negotiation services, and construction administration at the Marlette Water System (MLWS) generator building: CIP Project No. 23-M03-04; SPWD Contract No. 117603.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Jason Aviles, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	03/25/2025 16:03:10 PM
Division Approval	nmann	03/25/2025 16:03:13 PM
Department Approval	nmann	03/25/2025 16:03:16 PM
Contract Manager Approval	lwildes	03/25/2025 16:21:35 PM
Budget Analyst Approval	bmacke1	04/03/2025 17:01:16 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **28312**Amendment Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **SGF ENGINEERING, LLC**Agency Code: **082**Contractor Name: **SGF ENGINEERING, LLC**Appropriation Unit: **1594-37**Address: **9500 PROTOTYPE COURT**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89521-2989**

If "No" please explain: Not Applicable

Contact/Phone: **775-591-4123**Vendor No.: **T27042760**NV Business ID: **NV20181807757**To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	75.00 %		Fees	0.00 %
	Federal Funds	0.00 %	X	Bonds	25.00 %
	Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **115886**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/14/2023**Anticipated BOE meeting date **03/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2027**Contract term: **3 years and 228 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 EITS Data Center - Computer Room Cooling System Upgrade and the Uninterruptable Power Supply System CIP Projects: CIP Project Nos. 23-M03-1 & 23-M03-2; SPWD Contract No. 115886. This amendment increases the maximum amount of \$234,700 to \$272,500 due to design services needed for the addition of a covered forklift parking structure and new wall in the battery room.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$234,700.00	\$234,700.00	\$234,700.00	Yes - Action
2. Amount of current amendment (#1):	\$37,800.00	\$37,800.00	\$37,800.00	Yes - Info
3. New maximum contract amount:	\$272,500.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP projects

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nmann	03/21/2025 16:09:31 PM
Division Approval	nmann	03/21/2025 16:09:34 PM
Department Approval	nmann	03/21/2025 16:09:37 PM
Contract Manager Approval	lwildes	03/21/2025 16:12:42 PM
Budget Analyst Approval	bmacke1	04/03/2025 18:15:23 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: **28840** Amendment Number: **4**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK**

Agency Code: **082** Contractor Name: **TATE SNYDER KIMSEY ARCHITECTS, LTD. DBA TSK**

Appropriation Unit: **1594-26** Address: **314 S. WATER ST.**

Is budget authority available?: **Yes** City/State/Zip: **HENDERSON, NV 89015-7311**

If "No" please explain: Not Applicable Contact/Phone: **775-827-2949**

Vendor No.: **T80883470**

NV Business ID: **NV20212004081**

To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 116357

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/12/2024**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2027**Contract term: **3 years and 110 days**4. Type of contract: **Contract**Contract description: **Arch / Eng**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides professional architecture/engineering services for the Heroes Memorial Building & Annex - Seismic Retrofit and Renovation CIP Project: CIP Project No. 23-C03; SPWD Contract No. 116357. This amendment increases the maximum amount from \$663,580 to \$676,603 due to additional engineering services needed for a modified life cycle cost analysis to provide justification for a new window solution on site.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$590,940.00	\$590,940.00	\$590,940.00	Yes - Action
a. Amendment 1:	\$16,900.00	\$16,900.00	\$16,900.00	Yes - Info
b. Amendment 2:	\$40,420.00	\$40,420.00	\$57,320.00	Yes - Info
c. Amendment 3:	\$15,320.00	\$15,320.00	\$72,640.00	Yes - Info
2. Amount of current amendment (#4):	\$13,023.00	\$13,023.00	\$85,663.00	Yes - Info
3. New maximum contract amount:	\$676,603.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2023 Leg. approved CIP Projects

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

nmann

03/21/2025 16:51:35 PM

Division Approval

nmann

03/21/2025 16:51:40 PM

Department Approval	nmann	03/21/2025 16:51:44 PM
Contract Manager Approval	lwildes	03/24/2025 08:06:09 AM
Budget Analyst Approval	bmacke1	04/03/2025 17:23:58 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: 28829

Amendment Number: 2

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION

Legal Entity Name: CARPENTER SELLERS DEL GATTO ARCHITECTS, PC

Agency Code: 082

Contractor Name: CARPENTER SELLERS DEL GATTO ARCHITECTS, PC

Appropriation Unit: All Appropriations

Address: 8882 SPANISH RIDGE AVE.

Is budget authority available?: No

City/State/Zip: LAS VEGAS, NV 89148-1303

If "No" please explain: This is an agency funded CIP where the project will be managed by the SPWD. Funding and contractor payment responsibilities will remain with the initiating agency. Funding and expenditure authority will reside in agency budget account 3011, expenditure category 21, Center Excellence Public Safety.

Contact/Phone: 702-251-8896

Vendor No.: T80997582

NV Business ID: NV19871041301

To what State Fiscal Year(s) will the contract be charged? 2024-2025

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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 - Budget Account 3011, Category 21

Agency Reference #: 116346

2. Contract start date:

a. Effective upon Board of Examiner's approval? No

or b. other effective date 03/12/2024

Anticipated BOE meeting date 03/2025

Retroactive? No

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: 06/30/2025

Contract term: 1 year and 110 days

4. Type of contract: Contract

Contract description: Arch / Eng

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architectural/engineering services for the College of Southern Nevada, Northwest Campus - Center for Excellence in Public Safety CIP Project: CIP Project No. 24-A008; SPWD Contract No. 116346. This amendment increases the maximum amount from \$6,559,289.40 to \$6,650,689.40 due to an additional architectural and civil engineering services for a pressure-reducing valve (PRV) assembly.

6. CONTRACT AMENDMENT		Trans \$	Info Accum \$	Action Accum \$	Agenda
1.	The max amount of the original contract:	\$3,224,834.00	\$3,224,834.00	\$3,224,834.00	Yes - Action
	a. Amendment 1:	\$3,380,155.40	\$3,380,155.40	\$3,380,155.40	Yes - Action
2.	Amount of current amendment (#2):	\$45,700.00	\$45,700.00	\$45,700.00	Yes - Info
3.	New maximum contract amount:	\$6,650,689.40			

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency Submitted Application - Board of Regents of the Nevada System of Higher Education on behalf of the College of Southern Nevada

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program (CIP) consultants are selected based on their ability to provide professional engineering design and architectural services to SPWD in support of the state engineering services provided to approved CIPs.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes. SPWD, and currently with satisfactory results.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	nmann	02/26/2025 12:07:30 PM
Division Approval	nmann	02/26/2025 12:07:34 PM
Department Approval	nmann	02/26/2025 12:07:38 PM
Contract Manager Approval	lwildes	02/26/2025 13:50:49 PM
Budget Analyst Approval	bmacke1	04/03/2025 18:10:23 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30413**Agency Name: **ADMIN - PURCHASING DIVISION**Agency Code: **083**Appropriation Unit: **1358-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: JJ Kane Associates, Inc.

Contractor Name: **JJ Kane Auctions**Address: **33 Inverness Center Parkway**City/State/Zip: **Birmingham, AL 35242**

Contact/Phone: Johnathan Julian 508-439-7336

Vendor No.: T32014058

NV Business ID: NV2023277758

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue contract Excess Property Budget Account 6101

Agency Reference #: 99SWC-NV25-24432

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **90 days**4. Type of contract: **Contract**Contract description: **Auction Services**

5. Purpose of contract:

This is a new contract to provide auction services, on an as needed basis, to dispose of excess property.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$85,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Certain property retains monetary value, even when no longer usable. By selling excess property through public auction, the state is able to recover revenue that would be otherwise lost by normal disposal or destruction.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies do not possess qualified or licensed staff to conduct public auctions.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Administration, Purchasing Division 06/15-12/20

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Vendor provides services using a DBA.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rvradenb	03/27/2025 14:48:27 PM
Division Approval	rvradenb	03/27/2025 14:48:29 PM
Department Approval	ldeloach	03/28/2025 08:44:57 AM
Contract Manager Approval	jthom17	03/31/2025 07:10:12 AM
Budget Analyst Approval	vfajota	04/01/2025 15:42:52 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30126**

Agency Name:	ADMIN - HEARINGS AND APPEALS DIVISION	Legal Entity Name:	JILL I GREINER
Agency Code:	089	Contractor Name:	JILL I. GREINER, ESQUIRE
Appropriation Unit:	1015-04	Address:	2915 SAGITTARIUS DRIVE
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89509-6895
If "No" please explain:	Not Applicable	Contact/Phone:	JILL GREINER 775/332-8443
		Vendor No.:	T29010968
		NV Business ID:	NV20222392621
To what State Fiscal Year(s) will the contract be charged?	2025-2027		
What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.			
General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % WORKERS' COMPENSATION AND SAFETY FUND

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2024**

Anticipated BOE meeting date 05/2025

Retroactive? **Yes**

If "Yes", please explain

Due to negotiations regarding insurance requirements and the critical need and backlog of personnel cases, the requested start date for this contract is September 1, 2024

3. Termination Date: **08/31/2026**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Special Appeals Ofc**

5. Purpose of contract:

This is a new contract to provide ongoing special appeals officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: \$100/hr, \$50/hr clerical support, \$0.25/copy, current postage rate for mailing

II. JUSTIFICATION

7. What conditions require that this work be done?

Appeals Officer responsibilities include cases related to Division of Human Resource Management in accordance with NRS Chapter 284; Medicaid Provider Matters in accordance with NRS Chapter 422; Department of Training and Rehabilitation in accordance with NRS Chapter 615; Department of Education in accordance with NRS Chapter 391; and other matters as assigned by the Division.
Pursuant to the Nevada Administrative Procedures Act (NRS Chapter 2338) decisions issued are subject to judicial review.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Hearings Division does not have attorneys on staff. These are positions appointed by the Governor to conduct hearings for the Hearings Division on a case by case basis; they will be paid by the agencies who those hearings pertain to.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Hearings & Appeals, service is satisfactory, since 2022

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jkidd	01/09/2025 09:43:15 AM
Division Approval	jkidd	01/10/2025 15:50:59 PM
Department Approval	jkidd	01/10/2025 15:51:04 PM
Contract Manager Approval	ssands	02/25/2025 16:26:15 PM
Budget Analyst Approval	jhelt01	03/18/2025 10:30:40 AM

Joe Lombardo
Governor



Joy Grimmer
Director

Bob Ragar
Deputy Director

Dean A. Hardy, Esq.
Senior Appeals Officer

**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Northern Nevada:
Hearing Office
1050 E. Williams St. Ste. 400
Carson City, Nevada 89701
(775) 687-8440 | Fax (775) 687-8441

Appeals Office
1050 E. William St. Ste. 450
Carson City, Nevada 89701
(775) 687-8420 | Fax (775) 687-8421

Hearings Division
<http://hearings.nv.gov/>

Southern Nevada:
Hearing Office
2200 S. Rancho Drive, Ste. 150
Las Vegas, Nevada 89102
(702) 486-2525 | Fax (702) 486-2879

Appeals Office
2200 S. Rancho Drive, Ste. 220
Las Vegas, Nevada 89102
(702) 486-2527 | Fax (702) 486-2555

MEMORANDUM

To: Contracts Unit

From: Luis Moreno, Administrative Assistant IV

Date: February 24, 2025

Subject: Justification for Retroactive Contract for Special Appeals Officer:
Jill Greiner

A handwritten signature in blue ink, likely belonging to Luis Moreno, the Administrative Assistant IV mentioned in the memorandum.

Special Appeals Officer Jill Greiner was appointed on July 23, 2024, by the Governor as Special Appeals Officers for the Hearings Division. The Special Appeals Officers' appointment is effective September 1, 2024, through August 31, 2026.

Due to negotiations regarding insurance requirements and the critical need and backlog of personnel cases we are respectfully requesting a start date for this contract to be September 1, 2024. The delay in contract submission was due to an oversight by the agency.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30399**

Agency Name: ADMIN - HEARINGS AND APPEALS DIVISION	Legal Entity Name: Kathleen Bergquist LLC
Agency Code: 089	Contractor Name: Kathleen Bergquist LLC
Appropriation Unit: 1015-04	Address: PO Box 371152
Is budget authority available?: Yes	City/State/Zip: Las Vegas, NV 89137
If "No" please explain: Not Applicable	Contact/Phone: Kathleen Bergquist 702-301-3417
	Vendor No.: T32008780
	NV Business ID: NV20081210133

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Workers Compensation/Charges for Services

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/10/2025**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2027**Contract term: **1 year and 355 days**4. Type of contract: **Contract**Contract description: **Special Appeals Ofc**

5. Purpose of contract:

This is a new contract to provide services as a Special Appeals Officer to handle cases related to Human Resource Management, Department of Employment, Training, and Rehabilitation, Department of Education and Medicaid provider matters.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Appeals Officers responsibilities include cases related to Division of Human Resource Management in accordance with NRS Chapter 284; Medicaid Provider Matters in accordance with NRS Chapter 422; Department of Training and Rehabilitation in accordance with NRS Chapter 615; Department of Education in accordance with NRS Chapter 391; and other matters as assigned by the Division. Pursuant to the Nevada Administrative Procedures Act (NRS Chapter 233B) decisions are subject to judicial review.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Hearings Division does not have attorneys on staff. These positions are appointed by the Governor to conduct hearing for the Hearing division on a case by case basis; they will be paid by the agencies whose hearing pertain to.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	javictor	03/25/2025 09:09:34 AM
Division Approval	jkidd	03/25/2025 10:16:35 AM
Department Approval	jkidd	03/25/2025 10:16:38 AM
Contract Manager Approval	ssands	04/10/2025 14:17:32 PM
Budget Analyst Approval	klay0	04/10/2025 14:30:40 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30121**

Agency Name: DEPT NATIVE AMERICAN AFFAIRS	Legal Entity Name: Samantha Williams
Agency Code: 140	Contractor Name: Samantha Williams
Appropriation Unit: 2601-11	Address: 4900 Sir Henry Court
Is budget authority available?: Yes	City/State/Zip: Fair Oaks, CA 95628
If "No" please explain: Not Applicable	Contact/Phone: 209-499-7918
	Vendor No.: T29049968
	NV Business ID: NV20243232606
To what State Fiscal Year(s) will the contract be charged? 2025-2026	

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Natl Endowment for the Humanities Grant

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/25/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2025**Contract term: **281 days**4. Type of contract: **Contract**Contract description: **Research**

5. Purpose of contract:

This is a new contract to conduct research on behalf of Stewart Indian School Cultural Center & Museum to document the 20,000 plus students who attended Stewart Indian School over the 90 years Stewart Indian School was operated.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The goal of this project is to conduct research for the records of the more than 20,000 students who attended the Stewart Indian Boarding School over its 90-year history, in accordance with the United States Department of Interior's initiative to document the names of Native American children who were associated with Indian boarding schools. The records collected will engage Indian boarding school survivors as well as tribal youth and will be used to develop curriculum for K-12 and higher education. The information will also be shared with the National Native American Boarding School Healing Coalition, which is creating a Digital Archives of the more than 523 Indian boarding schools.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Stewart Indian School Cultural Center & Museum has a small staff and currently two out of three positions are filled. The staff run the day-to-day operation of the cultural center & museum and do not have time or funding to conduct this project research. We applied for and received this grant to send a researcher to conduct research at the National Archives-San Bruno, and to digitize the many school records housed there.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

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	tday2	01/03/2025 12:59:30 PM
Division Approval	jkidd	01/03/2025 13:45:11 PM
Department Approval	jkidd	01/03/2025 13:45:49 PM
Contract Manager Approval	ssands	03/25/2025 07:38:35 AM
Budget Analyst Approval	spowel3	03/25/2025 13:32:28 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
 Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:	
Approval#:	2501020

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:	Nevada Department of Native American Affairs	
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	Stacey Montooth, Executive Director	775/687-8333	smontooth@nic.nv.gov

1b	Vendor Information:	
	Vendor Name:	Samantha M. Williams
	Contact Name:	Samantha M. Williams
	Complete Address: City, State, and Zip Code	4900 Sir Henry Court; Fair Oaks, CA 95628
	Telephone Number:	209-499-7918
	Email Address:	samanthawilliams@comcast.net

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	Sole or Single Source
	Professional Service Exemption:	

1d	Contract Information:				
	Is this a new Contract? Check One:	Yes:	XXX	No:	
	If 'No' Enter Amendment Number:	#			
	Enter CETS Number:	#			

1e	Term:				
	One (1) Time Purchase? Check One:	Yes:	XXX	No:	
	Contract:	Start Date:	Dec 2024	End Date:	March 25, 2025

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	\$30,000 grant from the National Endowment of the Humanities

Rec'd 11/06/20

	Other (Explain):	

Purchasing Use Only:

Approval #: 250102 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$ \$30,000

2	Provide a description of work/services to be performed or services with goods to be purchased: This project is to create and conduct research on behalf of the Stewart Indian School Cultural Center and Museum (SISCCM). This project will include a review of records, currently maintained by the SISCCM collected previously by other researchers, as well as those recently acquired from the Stewart Baptist Church and the Nevada State Museum. This vendor will organize digital records and enter them into the SISCCM's Past Perfect collection management software. Once this is completed, the vendor will travel to the National Archives and Records Administration (NARA) facility in San Bruno, CA, to review and scan archival documents not currently in the SISCCM collection. This information will be organized by NARA inventory number, box, number, record type, date, identifying information, and content description. The vendor will work with NARA archivists to determine what archival items might be missing or lost, and the dates on which future documents connected with the Stewart Indian School will become available to researchers.

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor? This grant application required that we identify a qualified academic research upon submission. We picked Dr. Williams for several reasons among them, her extensive knowledge of the Stewart Indian Boarding School as Dr. Williams is the author of "Assimilation, Resilience, and Survival: A History of the Stewart Indian School. In addition, Dr. Williams has a strong, professional working relationship with the staff at the National Archives and Records Administration facility in San Bruno, CA, plus her expertise with our agency's preferred management software, Past Perfect.

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source: Again, because this grant application required that we identify a qualified academic research upon submission, we selected Dr. Williams was the reasons listed above.

5	Were alternative services or commodities evaluated?		Check One:	
			Yes	No
				xxx
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.			
	b. <u>If not</u> , why were alternatives not evaluated? Alternative services were not evaluated because of to successfully secure the funding, we had to identify one qualified academic research upon submission.			

Purchasing Use Only:

Approval #:

250102 @

6	Has the agency purchased these services/services with goods in the past? Check One:					Yes	No
	NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>						xxx
	a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information must be provided along with the <u>CETS contract number(s) associated with each:</u>						
	Term		Value	Short Description	Provide Type of Procurement RFP#, RFQ#, Waiver #	CETS #	
	Start Date	End Date					
			\$				
			\$				
			\$				
			\$				
			\$				

7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
	The required records and documents we need to supplement and cross reference our current Stewart Indian School roster will remain incomplete and we will lose the National Endowment of the Humanities grant of \$50,000.

8	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?
	Total cost of this work was calculated by using the General Services Administration rates (GSA) rate for travel expenses in Carson City, NV and in San Bruno, CA, including: lodging, meals, incidentals, and mileage. We calculated the researcher fee of \$19,136 based on the standard professional research rate based on 46 business days of work for 8 hours per day. The total project cost equals \$30,000, the exact amount of our grant funding.

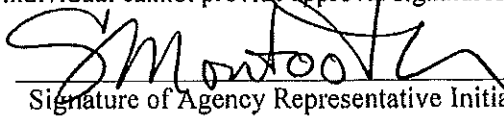
9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.		xxx
	a. If yes, please provide details regarding future obligations or needs.		

Purchasing Use Only:

Approval #:

250102 @

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



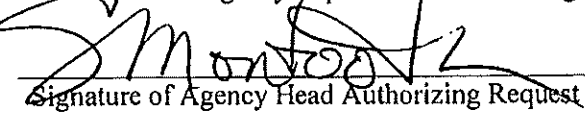
Signature of Agency Representative Initiating Request

Stacey Montooth, Executive Director Nevada Department of Native American Affairs

12-13-24

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Stacey Montooth, Executive Director Nevada Department of Native American Affairs

12-13-24

Print Name of Agency Head Authorizing Request

Date

FOR PURCHASING USE ONLY – PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

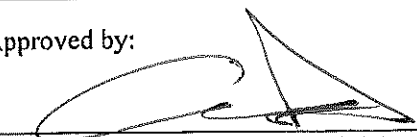
Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at cstoeffler@admin.nv.gov.

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.

Approved by:



Administrator, Purchasing Division or Designee

1/14/25

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **29324**Agency Name: **STATE PUBLIC CHARTER SCHOOL
AUTHORITY**Agency Code: **315**Appropriation Unit: **2711-04**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity
Name: Halli FaulknerContractor Name: **Halli Faulkner**Address: **809 Delaware Ave SW**City/State/Zip **Washington, DC 20024**

Contact/Phone: Halli Faulkner 585-305-6148

Vendor No.: T32004144

NV Business ID: NV20253330446

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % sponsorship 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 **04/14/2025**

Anticipated BOE meeting date 06/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/10/2029**Contract term: **3 years and 303 days**4. Type of contract: **Contract**Contract description: **External Reviewer**

5. Purpose of contract:

This is a new contract to provide for an external reviewer to read and evaluate charter school applications and other documents related to the operation and/or authorizing of charter schools.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00**

Payment for services will be made at the rate of \$1,500.00 per application or other charter document

II. JUSTIFICATION

7. What conditions require that this work be done?

The agency regularly maintains a pool of qualified peer reviewers to read and evaluate charter school applications and other documents related to the operation and/or authorizing of charter schools.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

In reviewing charter school applications and amendments, it is important that an independent, third party perform a review in addition to SPCSA staff.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing
Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Heather Mauze
Kristine Barker
Adam Aberman

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor meets the general minimum qualifications required in the informal solicitation.

d. Last bid date: 01/15/2025 Anticipated re-bid date: 08/29/2028

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State Public charter school authority. 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 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	shoh1	04/11/2025 10:26:28 AM
Division Approval	shoh1	04/11/2025 10:26:54 AM
Department Approval	shoh1	04/11/2025 10:26:56 AM
Contract Manager Approval	shoh1	04/11/2025 10:30:45 AM
Budget Analyst Approval	Iramire7	04/14/2025 13:13:44 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30371**Agency Name: **DHHS - HEALTH AND HUMAN SERVICES DIRECTOR'S OFFICE**Agency Code: **400**Appropriation Unit: **3060-10**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Nevada Public Health Foundation, Inc.

Contractor Name: **Nevada Public Health Foundation, Inc.**Address: **716 North Carson Street Suite 100**City/State/Zip: **CARSON CITY, NV 98701**

Contact/Phone: Natalie Gautereaux 7758840392

Vendor No.: T81018059

NV Business ID: NV19961104052

To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Fund for a Resilient Nevada**

Agency Reference #: SA #10023

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/08/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2026**Contract term: **1 year and 83 days**4. Type of contract: **Contract**Contract description: **Facilitation**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides support to the Advisory Committee for a Resilient Nevada by setting strategic direction, defining goals, creating agendas, facilitating meetings, and providing direct content reporting.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$28,160.00**

Payment for services will be made at the rate of \$88.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The committee makes funding recommendations to the Director's Office, but the Fund for a Resilient Nevada team has been directing their meetings. Facilitation needs to be done by a third party for the sake of transparency.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State agency employees need to ensure adherence to the Consolidated Appropriations Act of 2023 and Assembly Bill 389 AB115 to create transparency for the direction of meetings and reporting of information.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected by Purchasing as part of a multi award solicitation 99SWC-S2340 to provide various consulting, marketing, and education services.

d. Last bid date: 04/17/2023 Anticipated re-bid date: 01/30/2027

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor is currently under contract with various DHHS agencies. 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:

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	chadwic1	04/03/2025 15:10:09 PM
Division Approval	chadwic1	04/03/2025 15:10:11 PM
Department Approval	chadwic1	04/03/2025 15:10:14 PM
Contract Manager Approval	chadwic1	04/03/2025 15:10:17 PM
Budget Analyst Approval	pokeefe	04/08/2025 10:17:57 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30386**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	NEVADA PUBLIC HEALTH FOUNDATION, INC.
Agency Code:	402	Contractor Name:	NEVADA PUBLIC HEALTH FOUNDATION, INC.
Appropriation Unit:	3206-15	Address:	716 N. CARSON STREET SUITE 100
Is budget authority available?:	Yes	City/State/Zip	CARSON CITY, NV 89706
If "No" please explain:	Not Applicable		
		Contact/Phone:	NATALIE GAUTEREAUX 775-884-0392
		Vendor No.:	T81018059
		NV Business ID:	NV19961104052

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Telecommunications Devices for the Deaf (TDD) Surcharge Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/10/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **81 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **Interpreter Workshop**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17896 which provides consulting, marketing, and education services. This service agreement provides two community presentations on the National Code of Ethics that certified sign language interpreters must adhere to.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,332.00**

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 Communication Access Services program manages the Nevada Interpreter/CART Registry, which includes a formal grievance process against interpreters who behave unethically in their professional practice. These presentations are an effort to educate consumers of interpreting services on identifying ethical and unethical behavior of interpreters.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

In their roles managing the Ethical Practices System of the Registry of Interpreters for the Deaf, the national organization that confers certification and has oversight on the interpreter code of ethics compliance, the presenters provide an authority over the information that State employees do not have.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

MSA RFP 99SWC-S2340

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHHS - Since 2019 with satisfactory results

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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	gjorgens	03/21/2025 10:22:12 AM
Division Approval	ecreceli	03/21/2025 11:38:26 AM
Department Approval	ecreceli	03/21/2025 11:38:29 AM
Contract Manager Approval	maceved1	03/21/2025 11:44:32 AM
Budget Analyst Approval	khal5	04/10/2025 12:14:10 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30397**

Agency Name:	DHHS - AGING AND DISABILITY SERVICES DIVISION	Legal Entity Name:	Washoe Painting Company, LLC
Agency Code:	402	Contractor Name:	Washoe Painting Company, LLC
Appropriation Unit:	3280-95	Address:	1085 Whites Creek Lane
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89511
If "No" please explain:	Not Applicable	Contact/Phone:	Erike Saiz 775-233-8981
		Vendor No.:	T29049907
		NV Business ID:	NV20191625497

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 40DHHS-S3177 - AM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/11/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **80 days**4. Type of contract: **Contract**Contract description: **SRC Exterior Paintin**

5. Purpose of contract:

This is a new contract for exterior painting, sealing, and caulking of Building 8D and 8N.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$89,800.00**

Other basis for payment: Per individual invoices consisting of \$20,000 for materials and \$69,800 for labor.

II. JUSTIFICATION

7. What conditions require that this work be done?

This is an approved deferred maintenance project.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise or the tools to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**D&D Elite Property Maintenance
Infinity Painting****Classic Finishes, LLC**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP 40DHHS-S3177, and in accordance with NRS 333, the selected vendor was the only response that was received. Their response was reviewed by the agency and deemed as acceptable.

d. Last bid date: 02/25/2025 Anticipated re-bid date: 10/31/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

DHHS/Child & Family Services Division - 2025. They have been verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	gjorgens	03/26/2025 10:04:35 AM
Division Approval	ecreceli	03/26/2025 10:48:05 AM
Department Approval	ecreceli	03/26/2025 10:48:09 AM
Contract Manager Approval	maceved1	03/26/2025 10:59:12 AM
Budget Analyst Approval	khal5	04/10/2025 09:52:42 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30387**

Agency Name:	DHHS - HEALTH CARE FINANCING & POLICY	Legal Entity Name:	Social Entrepreneurs, Inc.
Agency Code:	403	Contractor Name:	Social Entrepreneurs, Inc.
Appropriation Unit:	3158-04	Address:	6548 South McCarran Blvd. Suite B
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89509
If "No" please explain:	Not Applicable	Contact/Phone:	Kelly Marschall 775-324-4567
		Vendor No.:	T27004599
		NV Business ID:	NV19961250456

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	50.00 %	Fees	0.00 %
X	Federal Funds	50.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: RFQ 99SWC-S2340 (RV)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/08/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **83 days**4. Type of contract: **Other (include description): Statewide Service Agreement**Contract description: **Actuary Rate Review**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides consulting, marketing, and education services. This service agreement provides project management, oversight, and coordination for actuarial rate analysis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$71,575.00**

Other basis for payment: As invoiced by the Contractor and approved by the State.

II. JUSTIFICATION

7. What conditions require that this work be done?

Multiple contracts awarded in conjunction with RFQ, as determined in the best interests of the State for Statewide use, to provide Marketing, Conference Planning, Facilitation, Community Building, Program Evaluation, Training Needs Assessments, Project Management, Data Analysis, and Report Development on an as needed basis, in accordance with a service agreement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the expertise or resources to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Multiple vendors chosen under Statewide RFQ 99SWC-S2340 Consulting, Marketing, and Education Services

d. Last bid date: 04/17/2023 Anticipated re-bid date: 04/01/2027

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Multiple state agencies & DHCFP. 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	ttilito1	04/01/2025 16:53:14 PM
Division Approval	aprasa1	04/02/2025 09:25:57 AM
Department Approval	staciew4	04/02/2025 14:53:30 PM
Contract Manager Approval	trya4	04/02/2025 15:41:55 PM
Budget Analyst Approval	dlenzner	04/08/2025 16:15:49 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30144**Agency Name: **DHHS - WELFARE AND SUPPORTIVE SERVICES**Agency Code: **407**Appropriation Unit: **3228-42**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SOCIAL ENTREPRENEURS, INC.**Contractor Name: **SOCIAL ENTREPRENEURS, INC.**Address: **6548 SOUTH MCCARRAN BLVD. STE B**City/State/Zip: **RENO, NV 89509-6150**Contact/Phone: **Kelly Marschall 775/324-4567**Vendor No.: **T27004599**NV Business ID: **NV19961250456**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 407

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/01/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **Yes**

If "Yes", please explain

The division respectfully seeks approval to retroactively date this contract to January 1, 2025, to ensure effective continuation of the Nevada State Nutrition Action Council (NV SNAC) initiative, established during federal fiscal year 2024 (FFY24). Implementation of the NV SNAC is a long-standing FNS expectation and deliverable due by September 30, 2025. Prompt execution of this contract is vital to meet the division's obligations to both USDA and the State Agencies we support and serve.

3. Termination Date: **09/30/2025**Contract term: **271 days**4. Type of contract: **Other (include description): Service Agreement**Contract description: **SNAP ED NV SNAC**

5. Purpose of contract:

This is a new service agreement under statewide contract #99SWC-NV23-17884 which provides marketing, planning, and education services. This service agreement provides support for implementation of Nevada State Nutrition Action Councils, including facilitation of six meetings.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$37,722.02**

Other basis for payment: Per Attachment AA - Contractor Scope of Work and Quote

II. JUSTIFICATION

7. What conditions require that this work be done?

The effective continuation of the Nevada State Nutrition Action Council (NV SNAC) initiative, established during federal fiscal year 2024 (FFY24), is a long-standing FNS expectation and approved deliverable due by September 30, 2025.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the resources or expertise to provide this service.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Nevada Public Health Foundation
UNR
The Guinn Center
Social Entrepreneurs, Inc.

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #99SWC-S2340 and in accordance with NRS 333. Statewide contract is Permissive for State Agencies and the vendor provided a proposal that was the best value for the services required.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor currently is under contract with the State of Nevada and other using agencies via 99SWC-NV23-17884.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Patricia Segura, Health Program Specialist II Ph: 775-684-0583

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bbarlo1	02/04/2025 09:40:31 AM
Division Approval	bbarlo1	02/04/2025 09:40:35 AM
Department Approval	rthomps1	02/05/2025 09:18:06 AM
Contract Manager Approval	mpomerle	03/21/2025 10:32:04 AM
Budget Analyst Approval	stilley	03/31/2025 13:35:56 PM

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF WELFARE AND SUPPORTIVE SERVICES
Helping people. It's who we are and what we do.



Robert Thompson
Administrator

January 1, 2025

To: Aaron Frantz, Executive Branch Budget Officer II, Governor's Finance Office

From: Robert H. Thompson, Administrator, Division of Welfare and Supportive Services 

SUBJECT: **Retroactive approval of the Contract between the Division of Welfare and Supportive Services (DWSS) and VEN1300 – Social Entrepreneurs, Inc. – NV SNAC**

The division respectfully seeks approval to retroactively date this contract to January 1, 2025, to ensure the effective continuation of the Nevada State Nutrition Action Council (NV SNAC) initiative, established during federal fiscal year 2024 (FFY24). Social Entrepreneurs, Inc. (SEI) will play a crucial role in continuing this initiative by facilitating up to six meetings, recruiting additional State Agency partners, selecting statewide nutrition education initiatives, developing action plans, and managing project communications. The implementation of the NV SNAC is a long-standing FNS expectation and an FNS-approved deliverable due by September 30, 2025.

Prompt execution of this contract is vital for SEI to prepare and provide these essential services, thereby enabling the Division of Welfare and Supportive Services (DWSS) to meet its obligations to both USDA and the State Agencies we support and serve.

Thank you for your consideration. If you have any questions, please contact Monique Pomerleau, Management Analyst III and Certified Contract Manager, at 775-684-0678/ mpomerleau@dwss.nv.gov.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30199**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Richard Wayne England
Agency Code:	409	Contractor Name:	Richard Wayne England
Appropriation Unit:	3145-70	Address:	504 EDGEWATER DR
Is budget authority available?:	Yes	City/State/Zip	Grant Pass, OR 97527
If "No" please explain:	Not Applicable	Contact/Phone:	707-951-0199
		Vendor No.:	
		NV Business ID:	NV20253270748
To what State Fiscal Year(s) will the contract be charged?	2025-2027		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % CASEY FUNDS FOR INDIAN WELFARE

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/31/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **11/30/2026**Contract term: **1 year and 244 days**4. Type of contract: **Contract**Contract description: **ICWA Witness**

5. Purpose of contract:

This is a new contract to provide ongoing qualified expert witness testimony for Indian Child Welfare Act cases.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$85 per hour for expert witness/consultation services up to 200 hours; \$150 per hour, out of office work or testimony up to 20 hours.

II. JUSTIFICATION

7. What conditions require that this work be done?

The federal Indian Child Welfare Act requires testimony from expert witnesses who are familiar with Native American culture before a child can be removed from his/her home.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Pursuant to NRS 125E.330, No petitioning party, employees of the petitioning party or an employee of an agency may serve as a qualified expert witness or a professional under this section. Due to this, we will need contract with an Expert Witness who is not part of the DCFS Agency.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is 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:

Cherie Reeves, Fiscal Monitor Ph: null

Megan Tingle, Program Monitor Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	creeve1	01/28/2025 11:40:57 AM
Division Approval	dfrohlic	03/21/2025 11:13:41 AM
Department Approval	mwillia9	03/27/2025 14:16:22 PM
Contract Manager Approval	dfrohlic	03/28/2025 08:48:54 AM
Budget Analyst Approval	pokeefe	03/31/2025 14:19:20 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: **27886** Amendment Number: **2**

Legal Entity Name: Nevada P.E.P., Inc.

Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES** Contractor Name: **Nevada P.E.P., Inc.**

Agency Code: **409** Address: **7211 W. Charleston Blvd.**

Appropriation Unit: **3146-14** City/State/Zip: **Las Vegas, NV 89117**

Is budget authority available?: **Yes** Contact/Phone: Karen Taycher 702-388-8899

If "No" please explain: Not Applicable Vendor No.: T80975409

NV Business ID: NV19931063169

To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/21/2023**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable

3. Previously Approved Termination Date: **06/30/2025**

Contract term: **3 years and 314 days**

4. Type of contract: **Contract**

Contract description: **Consortia Support**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing support services for the Washoe County Children's Mental Health Consortium and Rural Children's Mental Health Consortium. This amendment extends the termination date from June 30, 2025 to June 30, 2027 and increases the contract maximum from \$10,480 to \$44,120 to add project management services to the scope of work.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$6,588.00	\$6,588.00	\$6,588.00	No
a. Amendment 1:	\$3,892.00	\$10,480.00	\$10,480.00	Yes - Info
2. Amount of current amendment (#2):	\$33,640.00	\$33,640.00	\$44,120.00	Yes - Info
3. New maximum contract amount:	\$44,120.00			
and/or the termination date of the original contract has changed to:	06/30/2027			

II. JUSTIFICATION

7. What conditions require that this work be done?

The work to be contracted by the Washoe County Children's Mental Health Consortium is in NRS 433b.333. The Consortium needs professional support in countywide data collection, data analysis, and report/document writing.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There is a shortage of hours and positions to accomplish this work in order to directly support the chair of the Consortium. The Consortium is required to meet legislative mandates each year and this contract will help support their efforts.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

- c. Why was this contractor chosen in preference to other?

The selected vendor was the lowest cost to provide the services.

d. Last bid date: 05/10/2023 Anticipated re-bid date: 04/21/2025

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

8%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has provided services to the Division under contract and grants since 1999. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmille8	03/28/2025 08:55:04 AM
Division Approval	dfrohlic	03/31/2025 16:15:59 PM
Department Approval	mwillia9	03/31/2025 16:31:51 PM

Contract Manager Approval
Budget Analyst Approval

dfrohlic
pokeefe

03/31/2025 16:32:32 PM
04/02/2025 08:54:38 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30457**

Agency Name: DEPARTMENT OF CORRECTIONS	Legal Entity Name: Innovative Communications Systems, LLC
Agency Code: 440	Contractor Name: Innovative Communications Systems, LLC
Appropriation Unit: 3714-36	Address: 4855 Joule St. Ste. B-2
Is budget authority available?: Yes	City/State/Zip: Reno, NV 89502
If "No" please explain: Not Applicable	Contact/Phone: Jeffry Bowers 775-825-2011
	Vendor No.:
	NV Business ID: NV20041241387
To what State Fiscal Year(s) will the contract be charged?	2025-2026

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % ONE-SHOT APPROPRIATIONS

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/09/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2025**Contract term: **144 days**4. Type of contract: **Contract**Contract description: **Nurse Call Equipment**

5. Purpose of contract:

This is a new contract to provide and install nurse call responder equipment in Unit 8 Wing B of the Regional Medical Facility at Northern Nevada Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$98,918.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

It is necessary for the prompt care and attention of the patients in the medical care unit to be able to call for help promptly when need for medical attention.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No state agency or employee offers 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):

IntraWorks
Power Comm Solutions
Alert Systems
Innovative Communications Systems

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen by an independent evaluation committee chosen in response to RFP 44DOC-S3176.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

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	jgiesle2	04/08/2025 14:20:57 PM
Division Approval	jgiesle2	04/08/2025 14:21:00 PM
Department Approval	jgiesle2	04/08/2025 14:21:03 PM
Contract Manager Approval	blewalle	04/08/2025 14:22:23 PM
Budget Analyst Approval	vyoungb	04/09/2025 15:52:35 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30346**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3714-49**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Real Time Networks Inc.

Contractor Name: **Real Time Networks Inc.**Address: **1833 Coast Meridian Road
Unit 16**City/State/Zip: **Port Coquitlam, BC V3C 6G5**

Contact/Phone: Jeff Bartel 604-838-5378

Vendor No.: F00000377

NV Business ID: NV20161452120

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 44DOC-S3139 - AM

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/09/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **82 days**4. Type of contract: **Contract**Contract description: **LCC Key Machine**

5. Purpose of contract:

This is a new contract to supply and install a new Key Control System at Lovelock Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$77,520.00**

Other basis for payment: Installation Charge: \$7,300.00 and Licensing Charge: \$70,220.00

II. JUSTIFICATION

7. What conditions require that this work be done?

The current standalone key control system is no longer viable due to critical functional and security shortcomings. Its biometric functionality has degraded to the point of being unreliable, posing significant security risks and undermining the system's ability to securely control and track access. Additionally, the existing system is incompatible with Commander 4, the NDOC centralized key control infrastructure implemented at WSCC and NNCC. This lack of interoperability creates administrative inefficiencies and requires staff to learn and manage multiple applications to address the same key management need, further complicating workflows. It also limits real-time key management and access tracking across sites, increasing the potential for errors and delays in critical operations.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Department has already procured a Commercial Off-The-Shelf (COTS) solution from a vendor with the necessary expertise in key control cabinet and software design, which is currently implemented at multiple correctional facilities. The replacement requires specialized cabinets compatible with the existing COTS solution, along with vendor installation and configuration expertise. Leveraging the vendor's specialized skills ensures proper integration, robust security, and reliable functionality across all facilities. These tasks are beyond the scope of state employees, as they demand in-depth knowledge of the COTS solution.

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):

Real Time Networks Inc.
 Authorized Security
 Service Master Restoration Services
 Sting Alarm Inc.

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP 44DOC-S3139, and in accordance with NRS 333, the selected vendor was the only vendor to submit a proposal. The proposal was reviewed by NDOC.

d. Last bid date: 01/28/2025 Anticipated re-bid date: 07/01/2025

10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
 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	jgiesle2	03/25/2025 15:00:38 PM
Division Approval	jgiesle2	03/25/2025 15:00:42 PM
Department Approval	jgiesle2	03/25/2025 15:00:45 PM
Contract Manager Approval	blewalle	03/25/2025 15:02:18 PM
Budget Analyst Approval	vyoungeb	04/09/2025 15:22:13 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30255**

Agency Name:	COMMISSION ON MINERAL RESOURCE	Legal Entity Name:	Board of Regents -Nevada System of Higher Education, on behalf of the University of Nevada Reno
Agency Code:	500	Contractor Name:	Board of Regents -Nevada System of Higher Education, on behalf of the University of Nevada Reno
Appropriation Unit:	4219-09	Address:	1664 N. Virginia Street Mail Stop 0325
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89557
If "No" please explain:	Not Applicable	Contact/Phone:	Jessica Corey 775-784-4040
		Vendor No.:	D35000816B
		NV Business ID:	NA

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Mining Claim Filing Fees

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/09/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **02/28/2029**Contract term: **3 years and 326 days**4. Type of contract: **Interlocal Agreement**Contract description: **Digitizing paperwork**

5. Purpose of contract:

This is a new interlocal agreement to provide for services to add enhanced metadata to scanned historic mining district files and increase the discoverability of historic mineral and energy resources information.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$40,000.00**

Other basis for payment: FY25, \$10K; FY26, \$20K and FY27, \$10K

II. JUSTIFICATION

7. What conditions require that this work be done?

Funding for this project was considered and approved by the Nevada Commission on Mineral Resources in accordance with NRS 513.073.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is an interlocal contract that funds a project within the State system. The Nevada Bureau of Mines and Geology is the custodian of this data and is best suited to perform this project.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

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?

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	tday2	02/12/2025 13:35:47 PM
Division Approval	jkidd	02/19/2025 08:49:53 AM
Department Approval	jkidd	02/19/2025 08:49:55 AM
Contract Manager Approval	ssands	03/31/2025 13:54:12 PM
Budget Analyst Approval	cdavis	04/09/2025 15:25:50 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30393**

Agency Name: DPS-HIGHWAY PATROL	Legal Entity Name: ERIN BISHOP
Agency Code: 651	Contractor Name: ERIN BISHOP DBA CUSTOM CLEAN ELY
Appropriation Unit: 4713-04	Address: CUSTOM CLEAN ELY PO BOX 151132
Is budget authority available?: Yes	City/State/Zip: ELY, NV 89315-1132
If "No" please explain: Not Applicable	Contact/Phone: 916-812-5551
	Vendor No.: T29037609
	NV Business ID: NV20161304129

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

☒ General Funds	26.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
☒ Highway Funds	74.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/31/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2029**Contract term: **4 years and 1 day**4. Type of contract: **Contract**Contract description: **Janitorial**

5. Purpose of contract:

This is a new contract to provide ongoing janitorial services for the combined Nevada Highway Patrol and Nevada Division of Investigations facility in Ely.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$14,400.00**

Payment for services will be made at the rate of \$300.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

This service is needed to maintain a clean working environment for employees and the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no State workers who can 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):

**Squeaky Clean
Sparkling and Beyond
Custon Clean Ely**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Custom Clean Ely was the only vendor to submit a bid.

d. Last bid date: 02/24/2024 Anticipated re-bid date: 01/01/2029

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, this contractor has been engaged under contract with the Department of Public Safety since 2021. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

DBA

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bsalisbu	03/26/2025 11:12:27 AM
Division Approval	thick2	03/26/2025 11:36:48 AM
Department Approval	mclar8	03/31/2025 11:43:44 AM
Contract Manager Approval	mclar8	03/31/2025 11:43:52 AM
Budget Analyst Approval	jhelto1	03/31/2025 15:32:26 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30275**Agency Name: **DPS-HIGHWAY PATROL**Agency Code: **651**Appropriation Unit: **4713-51**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **VERICOM LLC**Contractor Name: **VERICOM LLC**Address: **705 CENTRAL AVENUE EAST**City/State/Zip: **SAINT MICHAEL, MN 55376**Contact/Phone: **TODD SCHAEFFER 612-708-9221**Vendor No.: **T29050136**NV Business ID: **NV20253281542**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/07/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2025**Contract term: **176 days**4. Type of contract: **Contract**Contract description: **Operator Trng Class**

5. Purpose of contract:

This is a new contract to provide crash investigation training services and analysis software.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,485.00**

Other basis for payment: \$3,000/one day operator training (Reno), \$3,000/one day operator training (Las Vegas), \$16,485 Crash Investigation Equipment and Analysis Software

II. JUSTIFICATION

7. What conditions require that this work be done?

This training will enhance NHP Officers collective knowledge, investigatory abilities, and experience to include collection of acceleration rates, road surface friction values, and crash causation.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are not any State employees that are qualified to provide this training.

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):

CMC Government Services Inc
Jonahs Enterprises Inc
RedHead Medical
International Masterminds LLC
MissionGO Unmanned Systems
The Akana Group Inc
Collision Forensic Solutions
Dana Safety Supply, Inc
Less Lethal, LLC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This was the only vendor to submit a bid proposal.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? Yes
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
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:

KASEN CORNMESSER, CONTRACT MANAGER Ph: 775-684-4869

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bsalisbu	03/28/2025 08:40:50 AM
Division Approval	thick2	03/28/2025 11:18:38 AM
Department Approval	kdefe1	04/01/2025 16:36:20 PM
Contract Manager Approval	mcosenti	04/02/2025 10:09:20 AM
EITS Approval	ljean	04/03/2025 08:10:27 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30394**Agency Name: **DPS-HIGHWAY PATROL**Agency Code: **651**Appropriation Unit: **4721-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: United Site Services of Nevada, Inc.

Contractor Name: **United Site Services of Nevada, Inc.**Address: **2701 Simmons Street**City/State/Zip: **North Las Vegas, NV 89032**

Contact/Phone: Bryce Crum 480-932-2822

Vendor No.: T27006789

NV Business ID: NV20021451026

To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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 **03/31/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2029**Contract term: **4 years and 1 day**4. Type of contract: **Contract**Contract description: **Portable Restroom-SC**

5. Purpose of contract:

This is a new contract to provide ongoing portable restroom services for the Apex commercial inspection station in North Las Vegas and Sloan commercial inspection station in Sloan.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$27,852.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Restroom facilities must be available to employees working at all duty stations, there are no restroom facilities at these inspection sites.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are not any State employees or agencies who 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):

Jireh Industrial Inc.
Sylas Group LLCb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

United Site Services of Nevada Inc. was the only vendor to submit a bid for the solicitation

d. Last bid date: 01/24/2025 Anticipated re-bid date: 11/30/2029

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NHP. 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:

Kasen Cornmesser, Contract Manager - NHP Ph: 775-684-4869

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bsalisbu	03/25/2025 08:09:47 AM
Division Approval	thick2	03/28/2025 11:20:04 AM
Department Approval	mcosenti	03/31/2025 14:01:44 PM
Contract Manager Approval	mcosenti	03/31/2025 14:01:48 PM
Budget Analyst Approval	jhelto1	03/31/2025 16:03:58 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **24718**Amendment Number: **3**Agency Name: **DEPARTMENT OF WILDLIFE**Legal Entity Name: **LUMOS & ASSOCIATES**Agency Code: **702**Contractor Name: **LUMOS & ASSOCIATES**Appropriation Unit: **4460-07**Address: **950 Sandhill Road, Suite 100**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89521-8989**

If "No" please explain: Not Applicable

Contact/Phone: **Mitch Burns 775-690-9071**Vendor No.: **T80912843A**NV Business ID: **NV19791006982**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Sportsmen Revenue
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **22-09**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/24/2021**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **08/31/2025**Contract term: **3 years and 342 days**4. Type of contract: **Contract**Contract description: **Prof. Engineering Sv**

5. Purpose of contract:

This is the third amendment to the original contract which provides professional civil engineering, construction inspection, and materials testing services on an as needed basis. This amendment increases the maximum amount from \$128,000 to \$178,000 due to an increased need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$50,000.00	\$50,000.00	\$50,000.00	Yes - Info
a. Amendment 1:	\$53,000.00	\$53,000.00	\$103,000.00	Yes - Action
b. Amendment 2:	\$25,000.00	\$25,000.00	\$25,000.00	Yes - Info
2. Amount of current amendment (#3):	\$56,700.00	\$56,700.00	\$81,700.00	Yes - Info
3. New maximum contract amount:	\$184,700.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Various construction projects that require this work to be performed to be in compliance with the manufacturer's recommendation and State Public Works building permits.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Special equipment, training, and certifications are required to perform this work.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Located in the city/county that the work is being performed. Ability to travel throughout the state.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Wildlife May 2021, work was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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	nrob1	01/13/2025 11:25:01 AM
Division Approval	nrob1	01/13/2025 11:25:07 AM
Department Approval	jneubau2	02/27/2025 17:25:11 PM
Contract Manager Approval	ctull	03/03/2025 07:48:17 AM
Budget Analyst Approval	dspeed1	03/18/2025 17:52:28 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30214**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4463-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SK BASEBALL LLC**Contractor Name: **SK BASEBALL LLC**Address: **RENO ACES BASEBALL CLUB
250 EVANS AVE**City/State/Zip: **RENO, NV 89501-1513**Contact/Phone: **Brian Moss (775) 334-70**Vendor No.: **T32012354**NV Business ID: **NV20071509495**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % **X** Fees **15.00 % Sportsmen Revenue****X** Federal Funds **85.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: 25-54

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/20/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2025**Contract term: **225 days**4. Type of contract: **Contract**Contract description: **Outreach & Marketing**

5. Purpose of contract:

This is a new contract to provide outreach and marketing campaign through public service announcements and commercials (wildlife education, boating safety, urban wildlife, Take 17, etc.) on the kiosks and monitors around Aces Ballpark as well as signage on fascia LED signs under the suites for each of their 75 home games scheduled in 2025. The contract will also include the department running a safe boating table during at least two home games during the 2025 season.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Department of Wildlife is required to promote safe boating as part of its grant with the U.S. Coast Guard.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDOW does not own any facilities with the type of participation that a minor league baseball park enjoys. Greater Nevada Field had over 353,311 visitors last year alone.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

The Abbi Agency
SK Baseball LLC (dba Reno Aces)
Sinclair Media

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor provided lowest quote.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Yes, 2022 - Current, with Agency 040, work was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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:

Aaron Meier, Public Information Officer Ph: (775) 688-1548

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	02/21/2025 15:55:51 PM
Division Approval	nroble1	02/21/2025 15:55:54 PM
Department Approval	jneubau2	03/05/2025 16:48:14 PM
Contract Manager Approval	ctull	03/05/2025 16:50:36 PM
Budget Analyst Approval	dspeed1	03/20/2025 15:18:20 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30321**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-95**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: River Restoration Org, LLC

Contractor Name: **River Restoration Org, LLC**Address: **PO Box 248**City/State/Zip: **CARBONDALE, CO 81623**

Contact/Phone: 970-947-9568

Vendor No.: PENDING

NV Business ID: NV20253301972

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/20/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2025**Contract term: **72 days**4. Type of contract: **Contract**Contract description: **BB Bathymetric**

5. Purpose of contract:

This is a new contract to provide a bathymetric survey at the Big Bend of the Colorado State Recreation Area.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,283.15****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Nevada Division of State Parks requires the completion of a bathymetric survey on the Colorado River at the Big Bend of the Colorado State Recreation 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 specific knowledge and experience collecting bathymetric data.

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):

RiverRestoration Org, LLC
Wallace Morris Kline
Arnett & Associates, Inc
Resource Concepts
Bowman Consulting

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

RiverRestoration ORG LLC was selected due to their specific knowledge and experience collecting bathymetric data for the Colorado River in the vicinity of the Park.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ethick1	03/19/2025 09:37:32 AM
Division Approval	ethick1	03/19/2025 09:37:35 AM
Department Approval	ethick1	03/19/2025 09:37:37 AM
Contract Manager Approval	ethick1	03/19/2025 10:17:02 AM
Budget Analyst Approval	31400	03/20/2025 09:21:39 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30380**

Agency Name:	DCNR - PARKS DIVISION	Legal Entity Name:	Something Green, LLC DBA Simply Eloped
Agency Code:	704	Contractor Name:	Something Green, LLC DBA Simply Eloped
Appropriation Unit:	4162-00	Address:	2 Wisconsin Circle 3rd Floor
Is budget authority available?:	Yes	City/State/Zip	Chevy Chase, MD 20815
If "No" please explain:	Not Applicable	Contact/Phone:	9292058611
		Vendor No.:	
		NV Business ID:	NV20243145937

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % REVENUE

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/26/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2027**Contract term: **2 years and 66 days**4. Type of contract: **Revenue Contract**Contract description: **SCUP VOF Weddings**

5. Purpose of contract:

This is a new revenue contract to conduct wedding ceremonies at Valley of Fire State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Special Use Permit

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Special Use Permit

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No
- b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable
12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable
13. Has the contractor ever been engaged under contract by any State agency?

No

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable
14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable
15. The contractor is 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	ethick1	03/20/2025 09:24:17 AM
Division Approval	ethick1	03/20/2025 09:24:20 AM
Department Approval	ethick1	03/20/2025 09:24:22 AM
Contract Manager Approval	ethick1	03/20/2025 09:24:25 AM
Budget Analyst Approval	31400	03/26/2025 09:24:45 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30150**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4168-09**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SIERRA SPORTS MARKETING LLC**Contractor Name: **SIERRA SPORTS MARKETING LLC**Address: **SIERRA TRAIL WORKS****PO BOX 14952**City/State/Zip: **RENO, NV 89507-4952**Contact/Phone: **775/233-5419**Vendor No.: **T27042024**NV Business ID: **NV20111377422**To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/21/2025**Anticipated BOE meeting date **02/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **101 days**4. Type of contract: **Contract**Contract description: **SP Map signs**

5. Purpose of contract:

This is a new contract to provide Interpretive and Map Sign Installation at Spooner Lake and Backcountry State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Installation of eight interpretive signs, three map signs, two map panels at pre-determined locations, ensuring all installations are secure and meet NDSP specifications. This includes providing necessary tools, supplies, and coordinating with NDSP, and maintaining a clean and safe worksite throughout the project.

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 required time or materials to create and install the signs.

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):

Green Lizard Landscape LLC
Impact Construction
Sierra Sports Marketing dba Sierra Trail Worksb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant of SAM 0313, purchases of services worth less than \$25,000 may be made by agencies after an informal process.

d. Last bid date: 09/26/2024 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDSP contract this vendor for services. Quality of service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ethick1	02/21/2025 09:35:41 AM
Division Approval	ethick1	02/21/2025 09:39:15 AM
Department Approval	ethick1	02/21/2025 09:39:18 AM
Contract Manager Approval	ethick1	02/21/2025 09:40:02 AM
Budget Analyst Approval	31400	03/21/2025 15:10:47 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: 30325

Agency Name:	DCNR - DIVISION OF WATER RESOURCES	Legal Entity Name:	KPS3 Holdings LLC
Agency Code:	705	Contractor Name:	KPS3 Holdings LLC
Appropriation Unit:	4171-17	Address:	500 Ryland St # 300
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89502
If "No" please explain:	Not Applicable.	Contact/Phone:	775/686-7415
		Vendor No.:	T80988055
		NV Business ID:	NV20161614214

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/19/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2025**Contract term: **103 days**4. Type of contract: **Contract**Contract description: **KPS3 NVFloods Web**

5. Purpose of contract:

This is a new contract to provide enhancements and improvements to the NevadaFloods.org website.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,910.00**

Payment for services will be made at the rate of \$24,910.00 per null

Other basis for payment: In full upon completion of work within thirty (30) days after the date of billing.

II. JUSTIFICATION

7. What conditions require that this work be done?

The NevadaFloods.org website update is necessary to ensure the site remains functional, secure, and aligns with Division and Department's broader web strategy.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees lack the expertise, access, and resources needed for the NevadaFloods.org updates.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

KPS3 was chosen over other vendors due to their extensive experience with DCNR websites, specialized expertise in the Expression Engine CMS, established security access, proven reliability in maintenance and support, and ability to efficiently integrate cost-saving features while meeting all project requirements.

d. Last bid date: 11/18/2024 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

In FY25, the vendor provided NDWR with services, which have been verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Sarah Fichtner, State Floodplain Manager & NFIP Coordinator Ph: 775-684-2886

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nwoo4	03/13/2025 08:29:56 AM
Division Approval	nwoo4	03/13/2025 08:29:58 AM
Department Approval	hbugg	03/18/2025 12:56:22 PM
Contract Manager Approval	nwoo4	03/19/2025 08:45:25 AM
Budget Analyst Approval	31400	03/19/2025 12:58:57 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30424**Agency Name: **DCNR - STATE LANDS**Agency Code: **707**Appropriation Unit: **4197-27**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GAIL WILLEY LANDSCAPING, INC.**Contractor Name: **GAIL WILLEY LANDSCAPING, INC.**Address: **490 US HIGHWAY 395 SOUTH**City/State/Zip: **WASHOE VALLEY, NV 89704**Contact/Phone: **SUZANNE LANCASTER 775-853-8733**Vendor No.: **T29050401**NV Business ID: **NV20041376432**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Settlement

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/07/2025**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2025**Contract term: **268 days**4. Type of contract: **Contract**Contract description: **TREE PLANTING**

5. Purpose of contract:

This is a new contract to provide tree planting and irrigation installation on State Land in Cave Rock Estates, Glenbrook, Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$70,815.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Resource damage including pruning and removal of live trees from Nevada owned land.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State lacks sufficient expertise, equipment, and labor to complete this task.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Gail willey Landscaping, Inc.
 Tom Ediss Landscape, Inc.
 Genoa Trees and Landscape Materials**
b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The chosen vendor was the only one to submit a quote during the open bidding period.

d. Last bid date: 02/11/2025 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

MOORE, BRENT, FORESTER 2 Ph: 775-684-2743

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	avance	04/02/2025 13:11:58 PM
Division Approval	avance	04/02/2025 13:22:08 PM
Department Approval	hbugg	04/04/2025 12:11:44 PM
Contract Manager Approval	avance	04/04/2025 12:26:11 PM
Budget Analyst Approval	31400	04/07/2025 11:58:18 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26040**Amendment Number: **1**Legal Entity Name: **BOARD OF REGENTS-DRI**Agency Name: **DCNR - ENVIRONMENTAL PROTECTION**Contractor Name: **BOARD OF REGENTS-DRI**Agency Code: **709**Address: **DRI CONTROLLERS OFFICE**Appropriation Unit: **3185-19****2215 RAGGIO PKWY**Is budget authority available?: **Yes**City/State/Zip: **RENO, NV 89512-1095**

If "No" please explain: Not Applicable

Contact/Phone: **Margie Stuart 775/673-7028**Vendor No.: **D35000802**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2022-2028**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **DEP 22-045**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/16/2022**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **03/31/2025**Contract term: **5 years and 321 days**4. Type of contract: **Interlocal Agreement**Contract description: **Laboratory Services**

5. Purpose of contract:

This is the first amendment to the original contract which provides laboratory and analytical services to identify and evaluate the chemical characterization of particulate matter (PM2.5) related to observations of elevated ozone concentrations in rural portions of Nevada. This amendment extends the expiration date from March 31, 2025 to March 31, 2028 and increases the maximum amount from \$24,500 to \$50,000 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:	\$24,500.00	\$24,500.00	\$24,500.00	Yes - Info
2. Amount of current amendment (#1):	\$25,500.00	\$25,500.00	\$50,000.00	Yes - Info
3. New maximum contract amount:	\$50,000.00			
and/or the termination date of the original contract has changed to:	03/31/2028			

II. JUSTIFICATION

7. What conditions require that this work be done?

There are areas throughout the state that are approaching EPA's regulated air quality standards. By sampling we are able to determine mitigation efforts before federal regulations are mandated to the State of Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have the personnel or resource to effectively sample the filters

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 332.195 which allows the State of Nevada to join or use contracts of local governments located within or outside the State with the authorization of the contracting vendor.

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components?

No

b. Is the contract part of an IT investment project over \$50,000?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NDEP had a contract with DRI that expired on March 31, 2022, All work completed under this contract was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	abarchu1	02/27/2025 07:49:19 AM
Division Approval	ddragon1	03/10/2025 13:06:19 PM
Department Approval	ddragon1	03/10/2025 13:06:26 PM
Contract Manager Approval	mgowe1	03/18/2025 12:52:48 PM
Budget Analyst Approval	31400	04/01/2025 14:58:18 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **25182**Amendment Number: **2**Agency Name: **B&I - REAL ESTATE DIVISION**Legal Entity Name: **Janet Trost**Agency Code: **748**Contractor Name: **Janet Trost**Appropriation Unit: **3820-15**Address: **501 S Rancho Drive, Suite H-56**Is budget authority available?: **Yes**City/State/Zip: **LAS VEGAS, NV 89106**

If "No" please explain: Not Applicable

Contact/Phone: **Janet Trost 702-257-2889**Vendor No.: **T81103488**NV Business ID: **NV20091520321**To what State Fiscal Year(s) will the contract be charged? **2022-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Law and Administrative
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **SOLICITATION # CIC-MED-22-001**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/06/2022**Anticipated BOE meeting date **01/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **12/31/2025**Contract term: **3 years and 360 days**4. Type of contract: **Contract**Contract description: **Mediator Services**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing mediation services. This amendment increases the maximum amount from \$25,000 to \$40,000 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:	\$25,000.00	\$25,000.00	\$25,000.00	Yes - Info
a. Amendment 1:	\$0.00	\$0.00	\$25,000.00	No
2. Amount of current amendment (#2):	\$15,000.00	\$15,000.00	\$40,000.00	Yes - Info
3. New maximum contract amount:	\$40,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Real Estate Division requires independent contractors to conduct mediation services.

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 specialized training.

9. Were quotes or proposals solicited? Yes
 Was the solicitation (RFP) done by the Purchasing Division? No
 a. List the names of vendors that were solicited to submit proposals (include at least three):
 b. Solicitation Waiver: **Not Applicable**
 c. Why was this contractor chosen in preference to other?
 The selected contractor met the General and Technical Minimum Qualifications.
 d. Last bid date: 10/26/2021 Anticipated re-bid date: 11/01/2025
10. a. Does the contract contain any IT components? No
 b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?
 No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor
 Not Applicable
12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?
 No
 b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?
 No
 c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?
 No If "Yes", please explain
 Not Applicable
13. Has the contractor ever been engaged under contract by any State agency?
 Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:
 The vendor has a contract with the Nevada Department of Business and Industry, Real Estate Division. The intital contract was from 2021-2023 and the amendment was from 2024-2025. The work performed during this period has been satisfactory.
14. Is the contractor currently involved in litigation with the State of Nevada?
 No If "Yes", please provide details of the litigation and facts supporting approval of the contract:
 Not Applicable
15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
 Sole Proprietor
16. a. Is the Contractor Name the same as the legal Entity Name?
 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 | jkirkpat | 11/07/2024 16:26:34 PM |
| Division Approval | jkirkpat | 11/07/2024 16:27:50 PM |
| Department Approval | jkirkpat | 02/03/2025 17:46:05 PM |
| Contract Manager Approval | kduena | 02/06/2025 10:31:17 AM |
| Budget Analyst Approval | khawkin1 | 03/28/2025 16:12:00 PM |



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
 Phone: 775-684-0170 | Fax: 775-684-0188

Purchasing Use Only:
Approval#: 250104

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM
ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to <u>ONLY</u> the contact(s) listed below:		
	STATE AGENCY NAME REQUIRED:	<i>Department of Business and Industry, Nevada Real Estate Division – Office of the Ombudsman for Common-Interest Communities and Condominium Hotels</i>	
	Contact Name and Title	Phone Number	Email Address
	<i>Karina Duenas – ADR Facilitator</i>	<i>(702) 486-4013</i>	<i>karina.duenas@red.nv.gov</i>

1b	Vendor Information	
	Vendor Name:	<i>Janet Trost</i>
	Contact Name:	<i>Janet Trost, Esq.</i>
	<u>Complete Address:</u>	<i>501 South Rancho Drive, Suite H-56</i>
	City, State, and Zip Code	<i>Las Vegas, NV 89106</i>
	Telephone Number:	<i>(702) 257-2889</i>
	Fax Number:	<i>(702) 257-2778</i>
Email Address:	<i>jane1@trostlawfirm.com</i>	

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	
	Professional Service Exemption:	☒

1d	Contract Information:				
	Is this a new Contract? Check One:	Yes:		No:	☒
	<u>If 'No' Enter Amendment Number:</u>	<i>#2</i>			
	<u>Enter CETS Number:</u>	<i>#25182</i>			

1e	Term:				
	One (1) Time Purchase? Check One:	Yes:		No:	☒
	Contract:	Start Date:	<i>01/06/2022</i>	End Date:	<i>12/31/2025</i>

1f	Funding:	
	State Appropriated:	☒
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

Purchasing Use Only:	
Approval #:	250104 @

1g	Total Estimated Value of <u>this</u> Service Contract, Amendment or Purchase:
	\$40,000.00

2	Provide a description of work/services to be performed or services with goods to be purchased:
	<i>The panel will mediate disputes between parties concerning common-interest communities, including, without limitation, the interpretation, application and enforcement of covenants, conditions and restrictions pertaining to residential property and the articles of incorporation, bylaws, rules, and regulations of an association; or the procedures used for increasing, decreasing, or imposing additional assessments upon residential property in a Common-Interest Community.</i>

3	What are the unique features/qualifications required for these services/services with goods that are not available from any other vendor?
	1. <i>Must be a Certified Mediator (current within recertification requirements).</i> 2. <i>Must have a minimum of two (2) years' experience with mediating disputes between parties in a professional capacity.</i> 3. <i>Must have training and experience with resolution of disputes concerning Associations, including, and without limitation, the interpretation, application and enforcement of covenants; conditions and restrictions pertaining to residential property and the articles of incorporation; bylaws; rules and regulations of an association.</i>

4	Explain why these services/services with goods cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>Janet Trost has a contract with the Division that does not expire until December 31, 2025. The original contract #25182 was written not to exceed \$25,000.00. As a frequently requested Mediator, Janet Trost has reached the threshold and cannot currently be assigned Mediation claims that are approved for subsidy. The purpose of Amendment #1 was to extend the length of the contract for two additional years. The purpose of Amendment #2 is to increase the value of the contract not to exceed \$40,000.</i>

5	Were alternative services or commodities evaluated?	Check One:	
		Yes	No
		✓	
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific about features, characteristics, requirements, capabilities and compatibility.		
	<i>The Division is currently working with State Purchasing to create an Open Enrollment Solicitation. This will increase the number of Mediators and Referee on the ADR Program panel and help avoid future interruptions to services such as the one we are currently facing.</i>		
	b. <u>If not</u> , why were alternatives not evaluated?		

Purchasing Use Only:	
Approval #:	250104②

6	Has the agency purchased these services/services with goods in the past? Check One:					Yes	No
	NOTE: To avoid delays or your request being rejected, if your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL PREVIOUS WAIVERS MUST ACCOMPANY THIS REQUEST.</u>					✓	
	a. If yes, starting with the most <u>recent contract</u> and working backward, for the <u>entire relationship with this vendor, or any other vendor</u> for these services/services with goods, the following information <u>must be provided along with the CETS contract number(s) associated with each:</u>						
	Term		Value	Short Description	Provide Type of Procurement RFP#, RFQ#, Waiver #	CETS #	
	Start Date	End Date					
	01/06/2022	12/31/2025	\$25,000.00	Mediation Services	RFP - CIC-MED-22-001	25182	
	12/18/2021	12/31/2025	\$25,000.00	Mediation Services	RFP -CIC-MED-18-001	23824	
01/06/2022	12/31/2025	\$25,000.00	Mediation Services	RFP - CIC-MED-22-001	25185		
09/30/2021	09/30/2025	\$25,000.00	Mediation Services	RFQ - 74BAI-S1606	24725		
09/30/2021	09/30/2025	\$25,000.00	Mediation Services	RFQ - 74BAI-S1606	24728		

7	What are the potential consequences to the State if the waiver request is denied and the services/services with goods is competitively bid?
	<i>The constituents who have been approved for subsidy and agree to use Janet Trost as a Mediator for their ADR Claims will be told that the Division is unable to accommodate their request, and the Division will assign another Mediator from the panel of 5 at random. The randomly selected Mediator may be a Certified Mediator who is not also a Licensed Attorney, such as Janet Trost.</i>

8	What efforts were made or conducted to substantiate there is no competition for the services/services with goods and to ensure the price for this purchase is fair and reasonable?
	<i>The price for this purchase is fair and reasonable. The price of each Mediation is set at \$500.00 for three hours of the Mediators time as stated in NRS 38.330 - Procedure for mediation or arbitration of claim; payment of costs and fees upon failure to obtain a more favorable award or judgment in court.</i>

9	Will this purchase obligate the State to this vendor for future purchases? Check One:	Yes	No
	NOTE: Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.		✓
	a. If yes, please provide details regarding future obligations or needs.		

Purchasing Use Only:

Approval #:

2501040

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct. Signatures are required from the agency representatives indicated below. The same individual cannot provide approval signatures in both sections.



Signature of Agency Representative Initiating Request

Karina Duenas – ADR Facilitator

01/17/2025

Print Name of Agency Representative Initiating Request

Date



Signature of Agency Head Authorizing Request

Charvez Foger – Deputy Administrator

1-17-25

Print Name of Agency Head Authorizing Request

Date

FOR PURCHASING USE ONLY – PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, **State Purchasing** may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150 or NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact Cindy Stoeffler at 775-684-0173 or email at cstoeffler@admin.nv.gov.

NOTE: If this box is checked, the agency must include the EITS TIN/CIN approval or approval update as an attachment in CETS.

Approved by:



Administrator, Purchasing Division or Designee

1/23/25

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30396**Agency Name: **DEPARTMENT OF MOTOR VEHICLES**Agency Code: **810**Appropriation Unit: **4735-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **VOGUE LAUNDRY AND CLEANERS, INC.**Contractor Name: **VOGUE LAUNDRY AND CLEANERS, INC.**Address: **175 5TH ST**City/State/Zip **ELKO, NV 89801**Contact/Phone: **Rocky Gonzalez 775-738-5156**Vendor No.: **T60153830A**NV Business ID: **NV19591001005**To what State Fiscal Year(s) will the contract be charged? **2025-2029**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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 **04/07/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2029**Contract term: **4 years and 24 days**4. Type of contract: **Contract**Contract description: **Mat Rental**

5. Purpose of contract:

This is a new contract to provide ongoing rental of floor mats and scrapers for offices located in Ely and Winnemucca.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,843.38****II. JUSTIFICATION**

7. What conditions require that this work be done?

Mats are required to provide safety for our employees and customers as well as protect the facilities.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are no State employees in the area to 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):

**Vogue Linen
Unifirst
Alsco
Cintas**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Cintas, AlSCO, and UniFirst did not respond to the bid.

d. Last bid date: 03/13/2025 Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This contractor has been under contract with multiple state agencies since 1999. They have been satisfied with their quality of work.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Amber Galperin, Management Analyst III Ph: 775-684-4566

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	pgra1	04/01/2025 12:08:06 PM
Division Approval	bmusselm	04/01/2025 14:51:23 PM
Department Approval	bmusselm	04/01/2025 15:09:59 PM
Contract Manager Approval	bhow1	04/01/2025 15:13:36 PM
Budget Analyst Approval	jhelto1	04/07/2025 10:25:32 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **28180**Amendment
Number: **1**Agency Name: **DETR - REHABILITATION DIVISION**Agency Code: **901**Appropriation Unit: **3253-10**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity
Name: **Eide Bailly LLP**Contractor Name: **Eide Bailly LLP**
Address: **5441 Kietzke Lane**
Suite 150City/State/Zip **Reno, NV 89511**Contact/Phone: **Tiffany Williamson 775-337-3961**Vendor No.: **T29026023B**NV Business ID: **NV20201801760**To what State Fiscal Year(s) will the contract be charged? **2024-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Business Enterprise Set-Aside**Agency Reference #: **3780-25-BEN**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **11/20/2023**
Examiner's approval?Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2025**
Termination Date:Contract term: **3 years and 222 days**4. Type of contract: **Contract**Contract description: **Eide Bailly BEN**

5. Purpose of contract:

This is the first amendment to the original contract which provides independent vendor audits of the Business Enterprises of Nevada facilities. This amendment extends the termination date from June 30, 2025, to June 30, 2027, and increases the maximum amount from \$38,000.00 to \$75,000.00 due to the increase in Contractor's fees and continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$38,000.00	\$38,000.00	\$38,000.00	Yes - Info
2. Amount of current amendment (#1):	\$37,000.00	\$37,000.00	\$75,000.00	Yes - Info
3. New maximum contract amount:	\$75,000.00			
and/or the termination date of the original contract has changed to:	06/30/2027			

II. JUSTIFICATION

7. What conditions require that this work be done?

As required by NAC 426.267, the Bureau will enter into a contract with an accounting firm to provide external audits biennially for each BEN facility with gross revenue of \$150,000 or more.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NAC 426.267 1(b) states the Bureau will enter into a contract with an independent accounting firm to perform the audits.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to multiple state agencies including BEN and Insurance 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 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	ejohns16	04/03/2025 07:20:48 AM
Division Approval	cedlefse	04/09/2025 09:19:37 AM
Department Approval	cedlefse	04/09/2025 09:19:43 AM

Contract Manager Approval
Budget Analyst Approval

wcune1
lramire7

04/09/2025 09:29:31 AM
04/11/2025 07:58:42 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **28098**Amendment
Number: **1**Agency Name: **DETR - EMPLOYMENT SECURITY**Legal Entity
Name: **Board of Regents-Nevada System of
Higher Education (NSHE)**Agency Code: **902**Contractor Name: **Board of Regents-Nevada System of
Higher Education (NSHE)**Appropriation Unit: **3270-25**Address: **2601 ENTERPRISE RD**Is budget authority
available?: **Yes**City/State/Zip **RENO, NV 89512**

If "No" please explain: Not Applicable

Contact/Phone: **Patricia Charlton 702-889-8426**Vendor No.: **D35000808**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2024-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

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 #: **3784-25-GOWIN**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **07/01/2023**Anticipated BOE meeting date **12/2024**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **06/30/2025**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **NPWR - NSHE**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides ongoing operation and maintenance of the Statewide Longitudinal Data System services. This amendment increases the maximum amount from \$250,000.00 to \$276,655.35 due to an increase in salary and fringe benefit costs.

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):	\$26,655.35	\$26,655.35	\$26,655.35	Yes - Info
3. New maximum contract amount:	\$276,655.35			

II. JUSTIFICATION

7. What conditions require that this work be done?

This agreement is entered into by GOWINN and Board of Regents-Nevada System of Higher Education, as part of the services for the data link between the agencies through the Nevada Statewide Longitudinal Data System, aka Nevada P-20 to Workforce Research Data System.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Work completed by Board of Regents-Nevada System of Higher Education.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180 - Interlocal contract

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "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 this service satisfactorily since SFY 2019.

14. Is the contractor currently involved in litigation with the State 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	kleal	11/12/2024 13:51:31 PM
Division Approval	athomps8	11/12/2024 13:56:28 PM
Department Approval	zhoeffin	11/13/2024 07:03:16 AM
Contract Manager Approval	wcune1	11/22/2024 15:05:40 PM
Budget Analyst Approval	Iramire7	04/04/2025 10:27:54 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30333**Agency Name: **DETR - EMPLOYMENT SECURITY**Agency Code: **902**Appropriation Unit: **4772-22**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BRIGGS ELECTRIC, INC.**Contractor Name: **BRIGGS ELECTRIC, INC.**Address: **5111 CONVAIR DR**City/State/Zip: **CARSON CITY, NV 89706-0426**Contact/Phone: **775/887-9901**Vendor No.: **T81091747A**NV Business ID: **NV19961075756**To what State Fiscal Year(s) will the contract be charged? **2025-2026**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **3948-26-OM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/19/2025**Anticipated BOE meeting date **04/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2025**Contract term: **287 days**4. Type of contract: **Contract**Contract description: **Electrical Hookups**

5. Purpose of contract:

This is a new contract to provide electrical and circuits hookups for the State Administrative Office basement.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$13,255.00**

Payment for services will be made at the rate of \$13,255.00 per Completion

II. JUSTIFICATION

7. What conditions require that this work be done?

The basement in the SAO building is requiring new flooring and furniture which is requiring new electrical hookups.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

DETR OM staff is unable to perform electrical hookups9. 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):

**Intermountain Electric
Briggs Electrical
Lakeview Electric**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best pricing

d. Last bid date: 03/04/2025 Anticipated re-bid date: 12/31/2025

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to DETR since April 2009 and other state agencies since February 2006.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation 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	eparra	03/18/2025 06:36:08 AM
Division Approval	cjacob	03/18/2025 06:46:04 AM
Department Approval	cjacob	03/18/2025 06:46:06 AM
Contract Manager Approval	wcune1	03/18/2025 09:24:23 AM
Budget Analyst Approval	Iramire7	03/19/2025 10:19:33 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **26845**Amendment Number: **5**Agency Name: **DETR - NV EQUAL RIGHTS COMMISSION**Legal Entity Name: **EPATHUSA, INC.**Agency Code: **903**Contractor Name: **EPATHUSA, INC.**Appropriation Unit: **2580-34**Address: **1075 JORDAN CREEK PKWY STE 295**Is budget authority available?: **Yes**City/State/Zip: **WEST DES MOINES, IA 50266-5602**

If "No" please explain: Not Applicable

Contact/Phone: **Hari Nallure ext104 515-974-6778**Vendor No.: **T29038415**NV Business ID: **NV20161681685**To what State Fiscal Year(s) will the contract be charged? **2023-2028**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	78.00 %	Fees	0.00 %
X	Federal Funds	22.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **#90DETR-S2073 3676-26-NERC**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/15/2022**Anticipated BOE meeting date **05/2025**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **10/31/2025**Contract term: **5 years and 137 days**4. Type of contract: **Contract**Contract description: **Web Monderization**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides a case management system to streamline complaint processing for the Nevada Equal Rights Commission. This amendment extends the termination date from October 31, 2025 to March 31, 2028 and increases the maximum amount from \$572,774.86 to \$660,241.82 due to the need for additional system enhancements and for the continued maintenance for this service.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$470,276.36	\$470,276.36	\$470,276.36	Yes - Action
a. Amendment 1:	\$19,266.00	\$19,266.00	\$19,266.00	Yes - Info
b. Amendment 2:	\$41,160.00	\$41,160.00	\$60,426.00	Yes - Info
c. Amendment 3:	\$15,747.50	\$15,747.50	\$76,173.50	Yes - Info
d. Amendment 4:	\$26,325.00	\$26,325.00	\$102,498.50	Yes - Action
2. Amount of current amendment (#5):	\$87,398.46	\$87,398.46	\$87,398.46	Yes - Info
3. New maximum contract amount:	\$660,173.32			

II. JUSTIFICATION

7. What conditions require that this work be done?

The current NERC Case Management system requires upgrades and enhancements to better serve the population of users; integration of Equality Data for user enhancements.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Due to projects of a greater critical nature requiring immediate attention, DETR's IT Division is unable to assist at this time.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #90DETR-S2073, and in accordance with NRS 333, the selected vendor was the sole proposer. The proposal was reviewed and deemed acceptable as determined by an independently appointed evaluation committee.

d. Last bid date: 07/20/2022 Anticipated re-bid date: 07/20/2027

10. a. Does the contract contain any IT components? Yes

b. Is the contract part of an IT investment project over \$50,000? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory service to DETR since February 2017.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cjacob	04/08/2025 15:38:15 PM
Division Approval	cjacob	04/08/2025 15:38:25 PM
Department Approval	zhoefflin	04/08/2025 15:39:31 PM
Contract Manager Approval	wcune1	04/10/2025 09:38:41 AM
EITS Approval	ljea	04/10/2025 12:34:23 PM
Budget Analyst Approval	Iramire7	04/11/2025 08:29:20 AM



**STATE OF NEVADA
GOVERNOR’S OFFICE**
Office of the Chief Information Officer
100 N. Stewart Street, Suite 100 | Carson City, Nevada 89701
Phone: (775) 684-5800 | www.it.nv.gov | Fax: (775) 687-9097

M E M O R A N D U M

TO: Kara Jenkins, Administrator, DETR
Josh Marhevka, Chief Financial Officer, DETR
Laxmi Bokka, Chief IT Manager, DETR
Walter Cuneo, Management Analyst III, DETR

CC: Tim Galluzi, State Chief Information Officer, OCIO
Robert Dehnhardt, State Chief Information Security Officer, OCIO
David Axtell, Deputy CIO - Chief Technology Officer, OCIO

FROM: Lisa Jean, TIN Administrator, OCIO

SUBJECT: TIN Completion Memo – DETR – TIN 483 – *NERC Streamline Intake Process* – Update B – BA 2580

DATE: June 28, 2024

We have completed our review for the Department of Employment, Training, and Rehabilitation’s (DETR) –NERC Streamline Intake Process – Update B – TIN 483.

The submitted TIN, for an estimated value of \$652,000.00 in the FY24/FY25 biennium (100% ARPA funding), is to increase the scope and cost of the investment.

This update introduces a new feature enabling respondents or their attorneys to log in and manage complaint information.

A cloud-based, modernized case management system is vital to NERC’s long-term success and represents

an important step in facilitating a platform for complaint filing in alignment with the Governor's priority of modernization for equity and inclusion.

There are several technology-related risks that are critical to address. First, the transition from a manual to a cloud-based system introduces potential vulnerabilities related to data security and privacy, particularly as sensitive information regarding discrimination complaints will be stored and processed electronically. There is also a risk of system integration challenges with existing platforms which could lead to inefficiencies or data losses during the transition phase. Additionally, reliance on a cloud-based solution increases the dependence on the service provider's stability and performance, posing a risk of service disruptions that could impede NERC's operational capabilities. Mitigating these risks is essential to ensure the secure, efficient, and effective modernization of NERC's complaint processing and data management systems.

If there are to be any changes to enterprise services or utilizations, including: network, firewall, server, Active Directory (AD) integration, telecom, etc., please notify OCIO as soon as possible to avoid integration delays.

It is expected that this solution will follow state security standards and policies and be compliant with the Americans with Disabilities Act (ADA) to ensure accessibility to all authorized users.

A copy of this memo has been attached to the TIN.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30266**

Agency Name:	DETR - ADMINISTRATIVE SERVICES	Legal Entity Name:	THE W. W. WILLIAMS COMPANY, LLC
Agency Code:	908	Contractor Name:	THE W. W. WILLIAMS COMPANY, LLC
Appropriation Unit:	3272-04	Address:	PO BOX 772022
Is budget authority available?:	Yes	City/State/Zip	DETROIT, MI 48277-2022
If "No" please explain:	Not Applicable	Contact/Phone:	Brandon Nerida 702-472-4596
		Vendor No.:	T29041024A
		NV Business ID:	NV20161487647

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Cost Allocation

Agency Reference #: 908

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **03/25/2025**

Anticipated BOE meeting date 05/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2027**Contract term: **2 years and 6 days**4. Type of contract: **Contract**Contract description: **Generator Service**

5. Purpose of contract:

This is a new contract to provide preventative maintenance for the emergency backup generator system.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,498.00**

Other basis for payment: Annual Preventative Maintenance: \$2,320/year; Annual Load Bank Test: \$1,350/year; Monthly Operational Inspection: \$189/month (every month, except month of annual maintenance). Reserve for unexpected service/repairs and fuel replacement (load tests can use up to 100 gallons per test and diesel fuel needs to be occasionally refreshed): \$13,000; Hourly Service Rate: \$155/hour. As invoices and approved for payment by the State. Total Contract not to exceed: 24,498.00.

II. JUSTIFICATION

7. What conditions require that this work be done?

The backup generator located at DETR's southern Nevada's headquarters requires testing and maintenance to ensure that DETR complies with the requirements to have emergency backup power for the servers located in the building.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

STATE EMPLOYEES DO NOT POSSESS THE QUALIFICATIONS TO DO THIS WORK.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

WW Williams Co
GEN-TECH Power Generator Specialist
Power Plus
On the Road Diesel & RV Mechanic

W.W. Williams

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest cost proposal

d. Last bid date: 02/11/2025 Anticipated re-bid date: 12/01/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This vendor has provided satisfactory services to DETR since October 2018 and other state agencies since August 2018.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Miles Bruinekool, Facilities Manager Ph: 775-684-3854

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jjense6	03/20/2025 11:43:06 AM
Division Approval	cedlefse	03/20/2025 14:51:07 PM
Department Approval	cedlefse	03/20/2025 14:51:14 PM
Contract Manager Approval	wcune1	03/20/2025 14:53:09 PM
Budget Analyst Approval	Iramire7	03/25/2025 09:11:30 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30194**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Ling Ltd
Agency Code:	BDC	Contractor Name:	Ling Ltd
Appropriation Unit:	B002 - All Categories	Address:	933 Gear Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89503
If "No" please explain:	Not Applicable	Contact/Phone:	Louis Ling (775)2339099
		Vendor No.:	Ling Ltd.
		NV Business ID:	NV20222410275

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % 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 **06/01/2025**

Anticipated BOE meeting date 04/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2027**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide ongoing legal services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$48,000.00**

Payment for services will be made at the rate of \$2,000.00 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board finds it necessary to engage with an independent contractor to accomplish the work of the Board under statutory authority NRS 333.700 and NRS 623.135.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

None of our current NSBAIDRD employees have the legal expertise or are legally licensed to provide these services. The legal services offered by the contractor pertain to a specific area of knowledge necessary to ensure that there are no operational disruptions.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Harrison, Monica, Executive Director Ph: (702) 486-7300

null, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cmonica	03/05/2025 15:32:50 PM
Division Approval	cmonica	03/05/2025 15:32:53 PM
Department Approval	cmonica	03/05/2025 15:32:57 PM
Contract Manager Approval	cmonica	03/05/2025 15:36:39 PM
Budget Analyst Approval	bmacke1	04/11/2025 14:50:46 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30192**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	LING LTD.
Agency Code:	BDC	Contractor Name:	LING LTD.
Appropriation Unit:	B005 - All Categories	Address:	933 Gear Street
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89503
If "No" please explain:	Not Applicable	Contact/Phone:	LOUIS LING 775-233-9099
		Vendor No.:	
		NV Business ID:	NV20222410275

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % 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 **06/01/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2027**Contract term: **1 year and 364 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide ongoing legal services, to include; day-to-day legal advice; attendance at board, committee, and other meetings; assist with disciplinary and contested cases; and regulatory and legislative matters.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$60,000.00**

Payment for services will be made at the rate of \$2,500.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board finds it necessary to engage an Independent Contractor for the purpose of accomplishing work of the Board under statutory authority. NRS 333.700 authorizes the Board to hire 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 on staff with the Board. Legal services provided by the contractor pertain to a specific area of 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 Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

The Independent Contractor has provided legal services for the Board for several years and possesses the necessary expertise resulting in continuity of knowledge, which provide effectiveness and efficiencies for the Board.

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jstrand1	01/23/2025 09:11:29 AM
Division Approval	jstrand1	01/23/2025 09:11:32 AM
Department Approval	jstrand1	01/23/2025 09:11:34 AM
Contract Manager Approval	jstrand1	03/06/2025 07:48:16 AM
Budget Analyst Approval	bmacke1	04/03/2025 17:55:10 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30220**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	CASEY NEILON INC
Agency Code:	BDC	Contractor Name:	CASEY NEILON INC
Appropriation Unit:	B015 - All Categories	Address:	503 N DIVISION ST
Is budget authority available?:	Yes	City/State/Zip	CARSON CITY, NV 89703-4104
If "No" please explain:	Not Applicable	Contact/Phone:	775/283-5555
		Vendor No.:	T29010569
		NV Business ID:	NV20061293367

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % 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 **04/03/2025**

Anticipated BOE meeting date 02/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2026**Contract term: **1 year and 272 days**4. Type of contract: **Contract**Contract description: **CaseyNeilon 2025**

5. Purpose of contract:

This is a new contract to provide an independent financial audit for the Board for the year ending December 31, 2024 and December 31, 2025.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00**

Payment for services will be made at the rate of \$22,000.00 per year

Other basis for payment: \$23,000 for year 2

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board is required by the Legislature to have an independent financial audit on a yearly basis.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The audit is required to be independent in nature, therefore it must not be performed by employees of the Board or other State agencies.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	5522	02/27/2025 12:54:00 PM
Division Approval	5522	02/27/2025 12:54:05 PM
Department Approval	5522	02/27/2025 12:54:09 PM
Contract Manager Approval	5522	02/27/2025 12:54:13 PM
Budget Analyst Approval	bmacke1	04/03/2025 17:43:41 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30307**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Lipparelli Legal Services Prof. LLC
Agency Code:	BDC	Contractor Name:	Lipparelli Legal Services Prof. LLC
Appropriation Unit:	B015 - All Categories	Address:	2633 Spearpoint Drive
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89509
If "No" please explain:	Not Applicable	Contact/Phone:	Paul Lipparelli 775/771-6927
		Vendor No.:	
		NV Business ID:	NV20222616654
To what State Fiscal Year(s) will the contract be charged?	2025-2027		

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % 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 **04/03/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2026**Contract term: **1 year and 272 days**4. Type of contract: **Contract**Contract description: **Lipparelli 25/26**

5. Purpose of contract:

This is a new contract to provide ongoing hearing officer services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$65,000.00**

Payment for services will be made at the rate of \$200.00 per hour

Other basis for payment: Billed Monthly

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 630.106 and 630.470 authorize the Board to hire and utilize hearing officers to hold hearing regarding complaints filed pursuant to NRS 630.311. The purpose of this contract is to continue with a hearing officer that is currently on the list of the Boards available officers.

Contractor is responsible for assigned disciplinary matters, ensuring that the hearing procedures contained in NRS and NAC Chapter 630 are followed, as well as those contained in the Administrative Procedure Act and NRS Chapters 622 and 622A. Issuing scheduling orders, decide pending motions, and draft orders regarding the same, preside over administrative hearings.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Hearing officers need to be independent from the Board staff in order to ensure due process for the respondents in the hearing.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada State Board of Medical Examiners, work 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	5522	03/10/2025 14:14:05 PM
Division Approval	5522	03/10/2025 14:14:08 PM
Department Approval	5522	03/10/2025 14:14:10 PM
Contract Manager Approval	5522	03/10/2025 14:14:12 PM
Budget Analyst Approval	bmacke1	04/03/2025 17:59:07 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **29932**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Triple J Dimensions, Inc. DBA Oasis Pond Maint. & Supply
Agency Code:	BDC	Contractor Name:	Triple J Dimensions, Inc. DBA Oasis Pond Maint. & Supply
Appropriation Unit:	B015 - All Categories	Address:	418 Cheney Street
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89502
If "No" please explain:	Not Applicable	Contact/Phone:	Rose Moore 775-356-7663
		Vendor No.:	
		NV Business ID:	NV20041563162

To what State Fiscal Year(s) will the contract be charged? **2025-2027**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % 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 **03/03/2025**

Anticipated BOE meeting date 02/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2026**Contract term: **1 year and 303 days**4. Type of contract: **Contract**Contract description: **Oasis Pond 25/26**

5. Purpose of contract:

This is a new contract to provide ongoing pond cleaning and maintenance services for Gateway Drive location in Reno.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00**

Payment for services will be made at the rate of \$250.00 per month

Other basis for payment: \$2000 yearly pond cleaning; \$250 monthly maintenance, \$335 products, \$250 winterization, \$500 Weed removal if needed

II. JUSTIFICATION

7. What conditions require that this work be done?

The pond located at 9600 Gateway Drive requires maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board staff does not have the experience and knowledge needed to complete the work.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Oasis Pond Maintenance and Supply
Rail City Garden Center
All Season Lawn & Landscape
Up Scapes Lawn & Landscapes

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Price and experience.

d. Last bid date: 10/09/2024 Anticipated re-bid date: 10/09/2026

10. a. Does the contract contain any IT components? No

b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contracted with Nevada State Board of Medical Examiners, 07/24/20 to present- work 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	5522	03/03/2025 10:34:03 AM
Division Approval	5522	03/03/2025 10:34:06 AM
Department Approval	5522	03/03/2025 10:34:08 AM
Contract Manager Approval	5522	03/03/2025 10:34:12 AM
Budget Analyst Approval	bmacke1	04/03/2025 17:47:19 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30209**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Kaempfer Crowell, LTD.
Agency Code:	BDC	Contractor Name:	Kaempfer Crowell, LTD.
Appropriation Unit:	B028 - All Categories	Address:	50 W. Liberty St. Suite 1100
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89501
If "No" please explain:	Not Applicable	Contact/Phone:	Michael D. Hillerby 775-852-3900
		Vendor No.:	T81007815
		NV Business ID:	NV19941041279

To what State Fiscal Year(s) will the contract be charged? **2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Licensing
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **Yes**

If "Yes", please explain

Prior contracted vendor passed away recently. Unfortunately, it left little time to identify and contract vendor prior to legislative session start date.

3. Termination Date: **06/30/2025**Contract term: **148 days**4. Type of contract: **Contract**Contract description: **Legislative Services**

5. Purpose of contract:

This is a new contract to provide government relations services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00**

Payment for services will be made at the rate of \$2,000.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board requires expertise, advice and services regarding representation before and dealing with individual legislators, legislative committees and other legislative matters.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board consists of two employees, and neither of the employees have the expertise, knowledge or skills to perform this function.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

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	jstrand1	01/30/2025 12:46:16 PM
Division Approval	jstrand1	01/30/2025 12:46:20 PM
Department Approval	jstrand1	01/30/2025 12:46:22 PM
Contract Manager Approval	jstrand1	02/10/2025 10:26:22 AM
Budget Analyst Approval	cdavis	04/09/2025 14:23:22 PM

**State of Nevada Board of
Veterinary Medical
Examiners**

Memo

To: Board of Examiners

From: Jennifer Pedigo, Executive Director

Date: February 7, 2025

Re: Retroactive Approval of Contract Due to Impending Legislative Window

Purpose:

The purpose of this memo is to request retroactive approval of the [Contract Title/Number] due to the need to meet a critical deadline within the legislative window.

Background:

The contract in question was initiated for February 1, 2025, to address the unforeseen need for a legislative and government affairs liaison. The Board previously had contracted with Ms. Neena Laxalt who due to her untimely and sad passing, found the need of a new legislative and government affairs liaison.

Rationale for Retroactive Approval:

The urgency of aligning with the upcoming legislative framework made it essential to proceed with the contract execution prior to formal approval. The legislative window opened February 3, 2025, and the timing of the contract was critical to avoid disruptions to our Board.

We request that the contract be formally approved retroactively from February 1, 2025.

Conclusion:

The retroactive approval of this contract is a necessary step to avoid any delays or non-compliance related to the upcoming legislative framework. The timing of the contract's execution was driven by external factors that were beyond the control of the Board control, and this approval is necessitated to properly engage in the current Legislative session.

Should you have any questions or require additional information, please feel free to contact me directly.

Thank you for your understanding and prompt attention to this matter.

Sincerely,

A handwritten signature in blue ink that reads "Jennifer Pedigo". The signature is fluid and cursive, with the first name "Jennifer" and last name "Pedigo" clearly distinguishable.

Jennifer Pedigo

Executive Director

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **30216**

Agency Name:	BDC LICENSING BOARDS & COMMISSIONS	Legal Entity Name:	Louis Ling
Agency Code:	BDC	Contractor Name:	Louis Ling
Appropriation Unit:	B028 - All Categories	Address:	933 Gear Street
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:	NV20222410275

To what State Fiscal Year(s) will the contract be charged? **2025-2028**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	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 **06/01/2025**

Anticipated BOE meeting date 03/2025

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **05/31/2028**Contract term: **3 years**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract to provide ongoing legal services including representation of lawsuits, disciplinary actions, administrative hearings, legislative assistance and in providing legal advice.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$90,000.00**

Payment for services will be made at the rate of \$2,500.00 per Month

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 statutory 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 Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. a. Does the contract contain any IT components? No
b. Is the contract part of an IT investment project over \$50,000? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jstrand1	01/31/2025 07:52:08 AM
Division Approval	jstrand1	01/31/2025 07:52:12 AM
Department Approval	jstrand1	01/31/2025 07:52:15 AM
Contract Manager Approval	jstrand1	01/31/2025 07:52:18 AM
Budget Analyst Approval	bmacke1	04/03/2025 17:51:47 PM

Joe Lombardo
Governor



Tiffany Greenameyer
Director

Curtis Palmer
Deputy Director

David Lenzner
Administrator

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: April 17, 2025
To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office
From: Shayne Powell, Budget Division *SP*
Governor's Finance Office
Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners' meeting.

GOVERNOR'S FINANCE OFFICE – BUDGET DIVISION

Agenda Item Write-up:

Pursuant to NRS Chapter 353, the division presents a reconciled fund balance report for the Tort Claim Fund, Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund as of April 17, 2025, for State Fiscal Year 2025. Additionally, a reconciliation of the Extradition Coordinator budget account has been prepared at the request of the Board.

Additional Information:

The Tort Claim Fund is the State Treasury Fund for Insurance Premiums. The Statutory Contingency Account, State Claims Account, Emergency Account, Disaster Relief Account, and the IFC Contingency Fund 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	\$	2,239,228.50
Statutory Contingency Account	\$	64,588.00
State Claims Account	\$	721,532.18
Emergency Account	\$	500,000.00
Disaster Relief Account	\$	14,332,897.44
IFC Contingency Unrestricted General Fund	\$	11,913,819.35
IFC Contingency Unrestricted Highway Fund	\$	1,638,068.35
IFC Contingency Restricted General Fund	\$	113,815,555.00
IFC Contingency Restricted Highway Fund	\$	18,772,646.00
Extradition Coordinator – Budget Account 1002	\$	65,301.54

Statutory Authority:

NRS 331.187, 353.097, 353.263, 353.264, 353.266, 353.268, 353.2735, 179.225 and AB469, SB453, SB504 of the 2023 Legislative Session.

REVIEWED: _____

[Signature]

INFORMATION ITEM: _____

Fiscal Year:	2025	Tort Claim Fund Balance Sheet April 17, 2025	
Fund:	715		
Agency:	030		
Budget Account:	1348		
Statutory Authority NRS:	331.187		
Receipts/Funding			Balance
Beginning Cash		\$ 2,639.00	
Revenue from Boards		\$ 149,911.69	
Cost Allocation		\$ 5,944,700.82	
Loan Repayment		\$ 5,000.00	
Total Receipts/Funding			\$ 6,102,251.51
Operating Expenditures - Non Claims			
Personnel		\$ 186,729.06	
Operating		\$ 238.86	
Information Technology		\$ 623.25	
Purchasing Assessment		\$ 137.25	
St Cost Plan Recovery		\$ 19,159.50	
Tort Claims Overhead		\$ 349,808.38	
Total Operating Expenditures			\$ 556,696.30
Net Operating Receipts/Funding			\$ 5,545,555.21
Tort Claims			
Tort Claims - AG Approved		\$ 1,134,356.71	
Tort Claims - Board of Examiners Approved		\$ 2,171,970.00	
Total Tort Claims			\$ 3,306,326.71
Realized Funding Available			\$ 2,239,228.50
Projected Claims			
		\$ -	
Total Projected Claims			\$ -
Projected Realized Funding Available			\$ 2,239,228.50

Fiscal Year:	2025	Statutory Contingency Account Balance Sheet April 17, 2025	
Fund:	101		
Agency:	930		
Budget Account:	4892		
Statutory Authority NRS:	353.264		
Receipts/Funding			Balance
Beginning Cash		\$ 2,563,339.00	
Total Receipts/Funding			\$ 2,563,339.00
Claims			
Claims - Clerk Approved		\$ 226,519.03	
Claims - Board of Examiners Approved		\$ 900,000.00	
Terminal Leave Payments		\$ 32,808.00	
Total Claims			\$ 1,159,327.03
Other Expenditures			
Outside Counsel		\$ 50,292.97	
Transfer to Public Defender		\$ 1,289,131.00	
Total Other Expenditures			\$ 1,339,423.97
Realized Funding Available			\$ 64,588.00
Projected Receipts/Funding			
Lobato Settlement Repayment		\$ 900,000.00	
Total Projected Receipts/Funding			\$ 900,000.00
Projected Claims			
County Ballot Stock		\$ 465,144.00	
County Election Training		\$ 55,658.00	
Total Projected Claims			\$ 520,802.00
Projected Extradition Expenditures			
		\$ -	
Total Projected Extradition Expenditures			\$ -
Projected Realized Funding Available			\$ 443,786.00
Notes			
FY 2025 Post-Conviction Relief State Claims will be paid from Department of Indigent Defense - Public Defender, Budget Account			

Fiscal Year:	2025	Stale Claims Account Balance Sheet April 17, 2025	
Fund:	101		
Agency:	930		
Budget Account:	4888		
Statutory Authority NRS:	353.097		
Receipts/Funding			Balance
Beginning Cash		\$ 3,347,421.00	
Total Receipts/Funding			\$ 3,347,421.00
Stale Claims			
Escapee Prosecution	\$	76,297.50	
Governor's Office	\$	763.16	
Nuclear Projects (Returned)	\$	(3,870.81)	
Attorney General	\$	3,670.61	
Secretary of State	\$	1,433.14	
Taxation	\$	25,056.35	
Public Defender	\$	6,432.37	
Education	\$	13,784.80	
Military	\$	79.63	
Nevada Medicaid	\$	109,120.48	
DHRM	\$	132.11	
Aging	\$	37,563.60	
Health Division	\$	23,812.50	
Mental Health	\$	552.00	
DPBH -LV Mental Health	\$	36,532.54	
DPBH - SNAMHS	\$	4,269.82	
Childrens Behavioral	\$	20,151.45	
Public Safety	\$	624.92	
Forestry	\$	3,211.86	
Admin	\$	8,229.55	
Military	\$	15,951.48	
Corrections	\$	2,116,411.04	
Judiciary	\$	1,770.00	
DCFS	\$	119,201.09	
General Overhead	\$	4,707.63	
Total Stale Claims			\$ 2,625,888.82
Realized Funding Available			\$ 721,532.18

Fiscal Year:	2025	Emergency Fund Balance Sheet April 17, 2025	
Fund:	101		
Agency:	930		
Budget Account:	4889		
Statutory Authority NRS:	353.263		
Receipts/Funding			Balance
Beginning Cash		\$ 500,000.00	
Total Receipts/Funding			\$ 500,000.00
Emergency Fund Expenditures			
		\$ -	
Total Emergency Fund Expenditures			\$ -
Realized Funding Available			\$ 500,000.00
Projected Emergency Fund Expenditures			
DCNR - Comstock HVAC		\$ 18,535.00	
Total Projected Emergency Fund Expenditures			\$ 18,535.00
Projected Realized Funding Available			\$ 481,465.00

Fiscal Year:	2025	Disaster Relief Fund Balance Sheet April 17, 2025	
Fund:	101		
Agency:	170		
Budget Account:	1335		
Statutory Authority NRS:	353.2735		
Receipts/Funding			Balance
Beginning Cash		\$ 12,543,674.00	
Transfer From General Fund		\$ 1,500,000.00	
Interest Distribution		\$ 289,223.44	
Total Receipts/Funding			\$ 14,332,897.44
Disaster Relief Fund Expenditures			
		\$ -	
Total Disaster Relief Fund Expenditures			\$ -
Realized Funding Available			\$ 14,332,897.44

Fiscal Year:	2025	IFC Contingency Fund (Unrestricted) Balance Sheet April 17, 2025	
Fund:	101		
Agency:	170		
Budget Account:	2630		
Statutory Authority NRS:	353.266		
Unrestricted General Fund Revenue			Balance
Beginning Cash		\$ 13,174,826.04	
Reversions		\$ 3,183,936.17	
Total Unrestricted General Fund Revenue			\$ 16,358,762.21
Unrestricted General Fund Expenditures			
Meeting Costs (through 4/17/25)		\$ 35,605.86	
Business & Industry (6/13/24 FY25)		\$ 218,889.00	
Division of Emergency Management (10/10/24)		\$ 306,483.00	
Veterans Services (10/10/2024)		\$ 503,938.00	
DETR - Vocational Rehab Match (12/12/24)		\$ 1,216,748.00	
DHHS - Division of Child & Family Services (12/12/24)		\$ 823,120.00	
Education - Special Education Services (12/12/24)		\$ 374,572.00	
Education - County PERS Incentive (12/12/24)		\$ 154,634.00	
Corrections - Peer Support & Programs (12/12/24)		\$ 448,228.00	
DETR - Vocational Rehab (12/12/24)		\$ 78,728.00	
Home Means Nevada (1/29/25)		\$ 196,076.00	
DPS - Dignitary Protection (2/14/25)		\$ 87,921.00	
Total Unrestricted General Fund Expenditures			\$ 4,444,942.86
Unrestricted General Fund Realized Funding Available			\$ 11,913,819.35
Projected Unrestricted General Fund Expenditures			
DCNR - State Lands		\$ 151,954.00	
Total Projected Unrestricted General Fund Expenditures			\$ 151,954.00
Projected Unrestricted General Fund Realized Funding Available			\$ 11,761,865.35
Unrestricted Highway Fund Revenue			
Beginning Cash		\$ 1,184,685.35	
Reversions		\$ 453,383.00	
Total Unrestricted Highway Fund Revenue			\$ 1,638,068.35
Unrestricted Highway Fund Expenditures			
		\$ -	
Total Unrestricted Highway Fund Expenditures			\$ -
Unrestricted Highway Fund Realized Funding Available		\$ -	\$ 1,638,068.35
Projected Unrestricted Highway Fund Expenditures			
		\$ -	
Total Projected Unrestricted Highway Fund Expenditures			\$ -
Projected Unrestricted Highway Fund Realized Funding Available			\$ 1,638,068.35

Fiscal Year: 2025		IFC Contingency Fund (Restricted)					
Fund: 101		Balance Sheet					
Agency: 170		April 17, 2025					
Budget Account: 2630							
Statutory Authority NRS: 353.268							
Restricted General Fund Expenditures							
Bill	Sec	Short Desc	Allotted	Expended	Balance	Projected Expenditures	Projected Balance
AB 468	4.3	Core.NV	\$ 81,606,294.00	\$ 1,575,537.00	\$ 80,030,757.00		\$ 80,030,757.00
AB 480	1	Language Access Plan	\$ 25,000,000.00	\$ 5,758,606.00	\$ 19,241,394.00	\$ 24,258.92	\$ 19,217,135.08
SB 231	1	School District Salaries	\$ 354,583.00	\$ 237,369.00	\$ 117,214.00	\$ -	\$ 117,214.00
SB 342	2	WICHE Veterinary Coop	\$ 8,000,000.00	\$ 8,000,000.00	\$ -	\$ -	\$ -
SB 490	1.5	GCB IT Equipment	\$ 5,500,000.00	\$ 5,500,000.00	\$ -	\$ -	\$ -
AB 518	7	Indigent Defense FY 24 Allocation	\$ 2,714,295.00	\$ 778,103.00	\$ 1,936,192.00		\$ 1,936,192.00
AB 518	7.3	Indigent Defense FY 25 Allocation	\$ 6,613,033.00		\$ 6,613,033.00	\$ 39,900.00	\$ 6,573,133.00
SB 342	3	WICHE Veterinary Utah State University	\$ 76,132.00	\$ 76,132.00	\$ -	\$ -	\$ -
SB 503	14	K-12 Teach Nevada Scholarship	\$ 3,208,023.00		\$ 3,208,023.00	\$ -	\$ 3,208,023.00
SB 511	74	ADSD - Home & Community Programs	\$ 2,352,270.00	\$ 2,283,978.00	\$ 68,292.00	\$ -	\$ 68,292.00
SB 511	75	ADSD - Adult Protective Services	\$ 2,418,818.00	\$ 2,128,964.00	\$ 289,854.00	\$ -	\$ 289,854.00
SB 511	76	ADSD - Long-term Care	\$ 1,468,609.00	\$ 1,468,609.00	\$ -	\$ -	\$ -
SB 511	77	DCFS - Desert Willow	\$ 586,956.00		\$ 586,956.00	\$ -	\$ 586,956.00
SB 511	78	NDOC - Tonopah Conservation Camp	\$ 1,723,840.00		\$ 1,723,840.00	\$ -	\$ 1,723,840.00
Total Restricted General Fund			\$ 141,622,853.00	\$ 27,807,298.00	\$ 113,815,555.00	\$ 64,158.92	\$ 113,751,396.08
Restricted Highway Fund Expenditures							
AB 468	4.7	Core.NV	\$ 19,142,217.00	\$ 369,571.00	\$ 18,772,646.00	\$ -	\$ 18,772,646.00
Total Restricted Highway Fund			\$ 19,142,217.00	\$ 369,571.00	\$ 18,772,646.00	\$ -	\$ 18,772,646.00
Total Restricted Fund			\$ 160,765,070.00	\$ 28,176,869.00	\$ 132,588,201.00	\$ 64,158.92	\$ 132,524,042.08

Fiscal Year:	2025	Extradition Coordinator Balance Sheet April 17, 2025	
Fund:	101		
Agency:	030		
Budget Account:	1002		
Statutory Authority NRS:	179.225		
Receipts/Funding			Balance
Appropriations		\$ 215,370.00	
Recoveries		\$ 22,280.22	
Total Receipts/Funding			\$ 237,650.22
Extradition Coordinator Expenditures			
Personnel Services		\$ 139,588.05	
Out of State Travel		\$ 1,417.98	
In State Travel		\$ 984.52	
Operating		\$ 11,180.37	
Extradition Costs		\$ 4,690.01	
Information Services		\$ 623.25	
Purchasing Assessment		\$ 18.00	
Statewide Cost Allocation Plan		\$ 691.50	
Attorney General Cost Allocation Plan		\$ 13,155.00	
Total Extradition Coordinator Expenditures			\$ 172,348.68
Realized Funding Available			\$ 65,301.54
Notes			
FY 2025 extradition costs will request to be funded by a supplemental appropriation request during the 2025 Legislative Session. Projections from the Attorney General's Office are \$1,924,148 in FY 2025. Actuals for FY 2024 were \$3,314,748.			

Joe Lombardo
Governor



Tiffany Greenameyer
Director

Curtis Palmer
Deputy Director

Vacant
Administrator

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: April 11, 2025

To: Tiffany Greenameyer, Clerk of the Board
Governor's Finance Office

From: Vince Young-Brown, Executive Branch Budget Officer
Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM *VYB*

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

DEPARTMENT OF MOTOR VEHICLES – COMPLETE STREETS PROGRAM

Agenda Item Write-up:

Pursuant to NRS 482.1825, subsection 2, the department shall certify to the Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents, and that the money has been distributed as provided in statute. This submittal reports program activities by month for the third quarter of fiscal year 2025 for the period beginning January 1, 2025 and ending March 31, 2025.

Additional Information:

Complete Streets is a federal initiative designed to encourage varying approaches to planning, designing, and operating roadways and rights of way to make the transportation network safer and more efficient. Complete Street policies are set at the state, regional, and local levels and vary based on community context. The authority for Nevada counties to adopt a Complete Streets Program was approved via Assembly Bill 145 of the 2013 Legislative Session.

Nevada's Complete Streets program is supported through a voluntary \$2 contribution included with vehicle registrations. Voluntary contributions collected under the program, minus 1% to DMV to cover the cost of collecting and distributing the contributions, is

distributed monthly to each county based on the county of registration of the vehicle for which the contribution was made.

This submittal includes reports by month for the third quarter of fiscal year 2025 for the period beginning January 1, 2024 and ending March 31, 2025 from the counties of the funds distributed by the department and how these funds are being used.

Statutory Authority:

NRS 482.1825

REVIEWED:	
INFO ITEM:	

Joe Lombardo
Governor



Tonya Laney
Director

Angela Smith-Lamb
Deputy Director

555 Wright Way
Carson City, Nevada 89711
Telephone (775) 684-4368
dmv.nv.gov

April 10, 2025

Board of Examiners

Re: Complete Streets

Attached, as required by subsection 2 of NRS 482.1825, please find the monthly report for the voluntary Complete Streets contributions collected pursuant to subsection 11 of NRS 482.480 for each participating county by the Department for the period beginning July 1st, 2024, and ending March 31st, 2025.

Sincerely,

Bethany Musselman

Administrator
Department of Motor Vehicles
BMusselman@dmv.nv.gov
775-684-4627

Department of Motor Vehicles
Complete Streets: Monthly Report FY25
Report Date: 4/9/2025
Reporting Period: March 2025

County	Contributions																			
	July		August		September		October		November		December		January		February		March		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City Clark Douglas Washoe Total	\$ 1,240.00	3.74%	\$ 1,258.00	3.77%	\$ 1,208.00	3.64%	\$ 1,240.00	3.81%	\$ 1,078.00	3.63%	\$ 1,170.00	3.74%	\$ 1,398.00	3.97%	\$ 1,132.00	3.77%	\$ 1,390.00	3.98%	\$11,114.00	3.79%
	\$ 25,146.00	75.81%	\$ 25,592.00	76.65%	\$ 25,280.00	76.04%	\$ 24,654.00	75.76%	\$ 22,548.00	75.84%	\$ 24,094.00	77.08%	\$ 27,044.00	76.83%	\$ 22,934.00	76.43%	\$ 26,732.00	76.21%	\$224,004.00	76.30%
	\$ 1,216.00	3.87%	\$ 1,196.00	3.58%	\$ 1,228.00	3.70%	\$ 1,218.00	3.74%	\$ 1,100.00	3.70%	\$ 1,176.00	3.76%	\$ 1,246.00	3.54%	\$ 1,038.00	3.46%	\$ 1,168.00	3.39%	\$10,606.00	3.61%
	\$ 5,566.00	16.78%	\$ 5,342.00	16.00%	\$ 5,524.00	16.63%	\$ 5,430.00	16.69%	\$ 5,006.00	16.84%	\$ 4,820.00	15.42%	\$ 5,514.00	15.66%	\$ 4,904.00	16.34%	\$ 5,766.00	16.44%	\$47,872.00	16.31%
	\$33,168.00	100.00%	\$33,386.00	100.00%	\$33,220.00	100.00%	\$32,542.00	100.00%	\$29,732.00	100.00%	\$31,280.00	100.00%	\$ 35,202.00	100.00%	\$ 30,008.00	100.00%	\$ 35,076.00	100.00%	\$ 293,568.00	100%

County	DMV Commission (1%)																			
	July		August		September		October		November		December		January		February		March		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$12.40	3.74%	\$12.58	3.77%	\$12.08	3.64%	\$12.40	3.81%	\$10.78	3.63%	\$11.70	3.74%	\$13.98	3.97%	\$11.32	3.77%	\$13.90	3.98%	\$111.14	3.79%
Clark	\$251.46	75.81%	\$255.92	76.65%	\$252.60	76.04%	\$246.54	75.76%	\$225.48	75.84%	\$240.94	77.08%	\$270.44	76.83%	\$229.34	76.43%	\$267.32	76.21%	\$2,240.04	76.30%
Douglas	\$12.16	3.67%	\$11.96	3.58%	\$12.28	3.70%	\$12.18	3.74%	\$11.00	3.70%	\$11.76	3.76%	\$12.46	3.54%	\$10.38	3.46%	\$11.88	3.39%	\$106.06	3.61%
Washoe	\$55.66	16.78%	\$53.42	16.00%	\$55.24	16.63%	\$54.30	16.69%	\$50.06	16.84%	\$48.20	15.42%	\$55.14	15.66%	\$49.04	16.34%	\$57.66	16.44%	\$478.72	16.31%
Total	\$331.68	100.00%	\$333.88	100.00%	\$332.20	100.00%	\$325.42	100.00%	\$297.32	100.00%	\$312.80	100.00%	\$352.02	100.00%	\$300.08	100.00%	\$350.76	100.00%	\$2,935.98	100%

County	July		August		September		October		November		December		January		February		March		Year to Date	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$1,227.80	3.74%	\$1,245.42	3.77%	\$1,195.92	3.64%	\$1,227.60	3.61%	\$1,087.22	3.63%	\$1,168.30	3.74%	\$1,384.02	3.97%	\$1,120.68	3.77%	\$1,376.10	3.96%	\$11,002.88	3.79%
Clark	\$24,894.54	75.81%	\$25,336.08	76.65%	\$25,007.40	76.04%	\$24,407.46	75.76%	\$22,822.52	75.84%	\$23,853.08	77.08%	\$26,773.56	76.83%	\$22,704.66	76.43%	\$26,464.68	76.21%	\$221,793.96	76.30%
Douglas	\$1,203.84	3.67%	\$1,184.04	3.58%	\$1,215.72	3.70%	\$1,205.82	3.74%	\$1,089.00	3.70%	\$1,164.24	3.76%	\$1,233.54	3.54%	\$1,027.62	3.46%	\$1,176.12	3.39%	\$10,499.94	3.61%
Washoe	\$5,510.34	16.76%	\$5,288.58	16.00%	\$5,468.76	16.63%	\$5,375.70	16.69%	\$4,855.84	16.84%	\$4,771.80	15.42%	\$5,458.86	15.66%	\$4,854.96	15.34%	\$5,706.34	16.44%	\$47,393.28	16.31%
total	\$32,836.32	100.00%	\$33,054.12	100.00%	\$32,887.80	100.00%	\$32,216.58	100.00%	\$29,434.68	100.00%	\$30,947.40	100.00%	\$34,849.98	100.00%	\$29,707.92	100.00%	\$34,725.24	100.00%	\$280,680.04	100.00%

- Note:
1. DMV began accepting contributions on 12/15/14.
 2. DMV began accepting Douglas County contributions on 5/9/16.

Contributions																						
County	FY16	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24	FY25	Total	% of Total									
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	% of Total									
Carson City	\$2,055.00	4.18%	\$9,312.00	3.09%	\$ 10,351.00	3.15%	\$ 10,338.00	3.05%	\$ 10,458.51	3.10%	\$ 12,414.00	3.05%	\$ 13,380.00	3.35%	\$ 11,114.00	3.76%	\$116,828.51	3.22%				
Clerk	\$33,876.00	70.22%	\$240,972.00	78.80%	\$ 254,228.00	77.97%	\$ 282,432.00	78.07%	\$ 273,436.00	77.78%	\$ 316,586.00	77.58%	\$ 314,544.00	77.42%	\$ 297,898.00	76.48%	\$ 224,004.00	70.37%	\$2,616,907.00	77.64%		
Douglas	\$0.00		\$1,934.00	0.43%	\$ 9,320.00	2.84%	\$ 6,509.51	2.83%	\$ 9,732.00	2.74%	\$ 10,010.00	2.74%	\$ 12,804.00	3.14%	\$ 12,901.00	3.17%	\$ 13,522.00	3.33%	\$ 14,280.00	3.61%		
Washoe	\$12,276.00	25.60%	\$50,350.00	16.68%	\$ 54,686.75	16.64%	\$ 53,856.00	16.02%	\$ 55,314.00	15.85%	\$ 60,526.00	16.59%	\$ 65,055.00	16.09%	\$ 62,554.00	15.36%	\$ 64,830.00	15.99%	\$ 63,866.00	16.27%	\$103,665.40	2.86%
Total	\$47,859.00	100.00%	\$304,838.00	100.00%	\$ 326,588.75	100.00%	\$ 338,129.51	100.00%	\$ 345,918.00	100.00%	\$ 364,761.51	100.00%	\$ 408,054.89	100.00%	\$ 406,383.00	100.00%	\$ 407,288.00	100.00%	\$ 389,458.00	100.00%	\$551,255.75	100%

DMV Commission (1%)																				
County	FY16	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24	FY25	Total								
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total						
Carson City	\$20.05	4.18%	\$103.51	3.15%	\$104.30	2.85%	\$104.58	3.19%	\$125.14	3.05%	\$133.90	3.05%	\$1,168.29	3.22%						
Clerk	\$336.78	70.22%	\$2,542.28	77.37%	\$2,734.36	76.37%	\$3,165.86	77.59%	\$3,145.44	76.38%	\$2,978.98	76.48%	\$25,199.07	77.04%						
Douglas	\$0.00		\$13.04	0.43%	\$97.32	2.76%	\$128.05	3.14%	\$135.22	3.17%	\$142.60	3.66%	\$1,039.63	2.66%						
Washoe	\$122.76	25.60%	\$503.50	16.68%	\$553.14	15.85%	\$605.26	16.03%	\$625.54	15.36%	\$633.86	16.27%	\$5,912.54	16.28%						
Total	\$478.59	100.00%	\$3,018.38	100.00%	\$3,489.18	100.00%	\$3,847.82	100.00%	\$4,093.83	100.00%	\$4,092.89	100.00%	\$36,310.53	100%						

County	Distributions																							
	FY15		FY16		FY17		FY18		FY19		FY20		FY21		FY22		FY23		FY24		FY25		Total	
	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total	Amount	% of Total
Carson City	\$1,084.55	4.18%	\$9,216.88	3.09%	\$ 10,247.49	3.15%	\$ 10,351.64	3.08%	\$ 10,351.64	2.96%	\$ 10,393.52	2.85%	\$ 12,877.92	3.19%	\$ 12,889.86	3.05%	\$ 13,256.10	3.05%	\$ 13,822.38	3.55%	\$ 11,002.88	3.58%	\$115,660.22	3.22%
Clerk	\$33,536.24	70.22%	\$238,463.28	78.80%	\$ 251,685.72	77.97%	\$ 259,807.66	78.07%	\$ 270,701.64	76.37%	\$ 280,589.73	77.77%	\$ 313,420.14	77.58%	\$ 315,348.66	78.39%	\$ 311,398.55	78.38%	\$ 294,886.32	76.48%	\$ 221,763.68	70.45%	\$2,791,707.03	77.04%
Douglas	\$0.00		\$1,200.80	0.43%	\$ 9,228.80	2.84%	\$ 6,408.47	2.83%	\$ 9,834.88	2.76%	\$ 9,909.80	2.74%	\$ 12,070.94	3.14%	\$ 12,771.99	3.17%	\$ 13,386.78	3.17%	\$ 14,117.40	3.99%	\$ 10,489.04	3.66%	\$102,923.86	2.86%
Washoe	\$12,155.22	25.80%	\$49,846.50	16.68%	\$ 54,123.05	16.64%	\$ 53,317.44	16.02%	\$ 54,790.88	15.85%	\$ 59,220.74	16.59%	\$ 64,890.44	16.03%	\$ 61,508.66	15.95%	\$ 64,123.14	15.36%	\$ 62,754.32	16.27%	\$ 47,393.28	16.27%	\$555,341.21	16.26%
Total	\$47,479.41	100.00%	\$288,819.82	100.00%	\$ 325,283.06	100.00%	\$ 332,798.21	100.00%	\$ 345,428.82	100.00%	\$ 381,113.89	100.00%	\$ 403,974.44	100.00%	\$ 402,315.17	100.00%	\$ 402,223.14	100.00%	\$ 385,583.42	100.00%	\$ 300,810.04	100.00%	\$3,565,833.22	100%

Note:
1. DMV began accepting contributions on 12/15/14.

Department of Motor Vehicles
Complete Streets Report: Donations
FY25

County		July	August	September	October	November	December	January	February	March
	Carson City									
	Donations	620	629	604	620	539	585	699	566	695
	Registrations	4,629	4,589	4,282	4,203	3,666	4,173	4,481	3,896	4,547
	Percent that Donated	13.39%	13.71%	14.11%	14.75%	14.70%	14.02%	15.60%	14.53%	15.28%
	Clark									
	Donations	12,573	12,796	12,630	12,327	11,274	12,047	13,522	11,467	13,366
	Registrations	81,077	81,706	79,026	78,032	69,888	76,057	83,727	71,565	82,733
	Percent that Donated	15.51%	15.66%	15.98%	15.80%	16.13%	15.84%	16.15%	16.02%	16.16%
	Douglas									
	Donations	608	598	614	609	550	588	623	519	594
	Registrations	5,228	5,167	5,018	4,949	4,401	4,548	5,053	4,241	4,897
	Percent that Donated	11.63%	11.57%	12.24%	12.31%	12.50%	12.93%	12.33%	12.24%	12.13%
	Washoe									
	Donations	2,783	2,671	2,762	2,715	2,503	2,410	2,757	2,452	2,883
	Registrations	24,081	23,535	22,249	21,946	19,548	20,048	22,160	19,385	22,854
	Percent that Donated	11.56%	11.35%	12.41%	12.37%	12.80%	12.02%	12.44%	12.65%	12.61%

Notes

1. Registration transaction counts come from: G:\Crystal Report\VR\Registrations\New and Renewal Registrations
2. Registration transactions include new registrations and registration renewals completed on the Kiosk, Web and MyDMV Portal only.
3. DMV began accepting Douglas County contributions on 5/9/16.

Kathy Lewis
Chief Financial Officer

www.douglascountynv.gov
775-782-6202



1594 Esmeralda Avenue
Minden, Nevada 89423

PO Box 218
Minden, NV 89423

FINANCE DEPARTMENT

April 10, 2025

Vince Young-Brown
Executive Branch Budget Officer I
Governor's Finance Office
209 E. Musser St. Suite 200
Carson City, NV 89701

Dear Mr. Young-Brown,

Douglas County has received \$10,499.94 in Complete Streets Program funds for the fiscal year 2025. Life to date we have accumulated \$75,794 which will be used towards a multi-use path on the Muller Parkway extension. We recently broke ground on this project and it is scheduled to be completed by the end of calendar year 2025.

Please let me know if you have any questions.

Thank you,

Caroline Chieffo
Senior Accountant
Douglas County Finance Division
Ph: 775-783-6451 Fax: 775-782-6271

Via Email Only, No Hard Copy Will Be Mailed

Vince Young-Brown

From: Christian Schonlau <CSchonlau@rtcwashoe.com>
Sent: Monday, March 31, 2025 3:05 PM
To: Vince Young-Brown
Cc: mkraus
Subject: Complete Streets RTC Washoe Q3
Attachments: Complete Streets FY25 Q3.xlsx

WARNING - This email originated from outside the State of Nevada. Exercise caution when opening attachments or clicking links, especially from unknown senders.

Good Afternoon Vince,

Please see the attached workbook for complete streets revenue received by RTC Washoe County for Q3 FY2025.

The RTC is using the accumulated revenue for the construction of the Oddie Blvd & Wells Ave corridor multi-modal improvements until the project is complete. Construction on the project began in July 2021 and continued for approximately three (3) construction seasons. We are still in the process of final invoices and closeout of this project. Here's a link to project website for more information:

<http://oddiewellsproject.com/>.

Thank you!

Christian



Christian Schonlau
Director of Finance/CFO
Regional Transportation Commission of Washoe County

1105 Terminal Way
Reno, NV 89502
Office: (775) 332-9511
Cell: (775) 200-3327
Fax: (775) 335-1455

Building A Better Community Through Quality Transportation

REGIONAL TRANSPORTATION COMMISSION OF WASHOE COUNTY

Complete Streets Program Revenue

407-9-00	Misc. Non-Transp'n. Rev.	1.01.13	STREET & HIGHWAY PROGRAM	8131070	DMV Complete St Plates	7	JAN	(4,771.80)
407-9-00	Misc. Non-Transp'n. Rev.	1.01.13	STREET & HIGHWAY PROGRAM	8131070	DMV Complete St Plates	9	MAR	(10,313.82)
Fiscal Year 2025 Q3 - Total								
Mar 31, 2025								
1								
(15,085.62)								

3:02:58 PM



CARSON CITY NEVADA
Consolidated Municipality and State Capital
PUBLIC WORKS

April 2, 2025

Governor's Finance Office
209 East Musser Street, Room 200
Carson City, Nevada 89701

Re: Carson City Complete Streets Funding as requested by the Governor and the Board of Examiners.

To Vince Young-Brown,

During FY25 Q3 (January-March), Carson City expended \$1,910.02 of the \$8,280 allocated to the US 50 E. Carson Complete Street Study in Complete Streets Funding.

The Complete Streets Account is not a large account for Carson City. As described in the past; to use it effectively, the City allows funds to build up before initiating a project. The Complete Streets fund is an important funding source for transportation projects, especially those that choose to use multi-modal transportation, and we will continue to use the funds.

Respectfully,

Chris Martinovich, PE
Transportation Manger
Carson City Public Works



Regional Transportation
Commission of
Southern Nevada

600 S. Grand Central Pkwy., Suite 350, Las Vegas, NV 89106-4512

March 31, 2025

Vince Young-Brown, Executive Branch Budget Officer I
State of Nevada – Governor’s Finance Office
209 E. Musser Street, Room 200
Carson City, NV 89701-4298
vbBrown@finance.nv.gov

COMPLETE STREETS FUND -Fiscal Year 2025 -3rd Quarter Update

Dear Vince Young-Brown,

I am writing to provide a quarterly update to the Regional Transportation Commission of Southern Nevada (RTC) projects funded with the Complete Streets Program (CSP) funds.

During quarter 3 of RTC Fiscal Year 2025, the RTC received a total of \$73,331.28 in CSP funds from the DMV as follows:

Date	Collections
FY25-Quarter 1	\$74,533.14
FY25-Quarter 2	\$71,737.38
FY25-Quarter 3	\$73,331.28
FY25-Quarter 4	
Total	\$219,601.80

The attached spreadsheet will provide details of encumbrances and expenditures from January 2015 through March 31, 2025. Below is a summary of the projects and their status:

1. RTC Project Number 191M-CSF – This project was awarded to City of Boulder city at our March 13, 2025, RTC Board Meeting. This project includes complete streets improvements including curb extensions, Americans with Disabilities Act (ADA) sidewalk ramps, pedestrian-activated Rectangular Rapid Flashing Beacons (RRFB), bike ramps, signs and crosswalk markings at the intersection of Buchanan Boulevard and Elm Street

Contract Date	March 13, 2025
Contract Amount	\$ 350,000.00
Amount Spent	\$ 0.00
Balance	\$ 350,000.00
Contract Closed	TBD

2. RTC Project Number 191L-CSF – This project was awarded to the City of Henderson at our December 14, 2023, RTC Board Meeting. This project includes complete streets elements by installing buffered bicycle lanes, on-street parking, and other traffic calming improvements.

Contract Date	December 14, 2023
Contract Amount	\$ 325,000.00
Amount Spent	\$ 1,354.69
Balance	\$ 323,645.31
Contract Closed	TBD

3. RTC Project Number 191K-CSF – This project was awarded to the City of Las Vegas at our October 13, 2022, RTC Board Meeting. This project includes complete streets elements by installing safe route to school improvements including, bicycle lanes, new pathways, and traffic calming treatments. This project is complete.

Contract Date	October 13, 2022
Contract Amount	\$ 300,000.00
Amount Spent	\$ 300,000.00
Balance	\$ 0.00
Contract Closed	June 13, 2024

4. RTC Project Number 191J-CSF – This project was awarded to Boulder City at our November 18, 2021, RTC Board Meeting. This project included complete streets elements by installing shade structures at bus stops and trails heads along Veterans Memorial Drive and Veterans Drive. This project is complete.

Contract Date	November 18, 2021
Contract Amount	\$ 350,000.00
Amount Spent	\$ 350,000.00
Contract Closed	November 16, 2023

5. RTC Project Number 191H-CSF – This project was awarded to the City of Mesquite at our October 8, 2020, RTC Board Meeting. This project included complete streets elements by installing and refurbishing bus shelters along with adding concrete pads and lighting. This project is completed.

Contract Date	October 8, 2020
Contract Amount	\$ 284,897.44
Amount Spent	\$ 284,897.44
Contract Closed	October 14, 2021

6. RTC Project Number 191G-CSF – This project was awarded to Boulder City at our September 10, 2020, RTC Board Meeting. This project included complete streets elements along Boulder City Parkway (US-95) from Veterans Memorial Drive to Buchanan Boulevard. This project is completed.

Contract Date	August 27, 2020
Contract Amount	\$ 95,000.00
Amount Spent	\$ 95,000.00
Contract Closed	June 10, 2021

7. RTC Project Number 191F-CSF - This project was awarded to Clark County at our May 23, 2019, RTC Board Meeting. The project included complete streets elements along Hollywood Boulevard from Charleston Boulevard to Lake Mead Boulevard. This project is completed.

Contract Date	May 23, 2019
Contract Amount	\$ 259,247.34
Amount Spent	\$ 259,247.34
Contract Closed	November 12, 2020

8. RTC Project Number 191E-CSF – This project was awarded to the City of North Las Vegas at our May 24, 2018, RTC Board Meeting. The project included traffic calming improvements, pavement striping, street parking, buffered bike lanes, and other improvements as feasible. The project encompassed White Street from Lake Mead Boulevard to Williams Avenue, Williams Avenue from White Street to Las Vegas Boulevard, and Glider Street from Lake Mead Boulevard to Oxford Avenue. This project is completed.

Contract Date	May 24, 2018
Contract Amount	\$ 252,987.10
Amount Spent	\$ 252,987.10
Contract Closed	June 10, 2021

9. RTC Project Number 191D-CSF – This project was awarded to the City of Mesquite at our February 9, 2017, RTC Board Meeting. The project included the installation of rectangular rapid flashing beacons at various crosswalk locations within the City of Mesquite. This project is completed.

Contract Date	February 9, 2017
Contract Amount	\$ 40,984.71
Amount Spent	\$ 40,984.71
Contract Closed	January 10, 2019

10. RTC Project Number 191C-CSF – This project was awarded to the City of Henderson at our February 9, 2017, RTC Board Meeting. The project included complete streets elements and traffic calming improvements, pavement striping, street parking, buffered bike lanes, and other improvements as feasible. The roadways included in the project were Montelago Boulevard, Cassia Way, Stephanie Street, Greenway Road, Coronado Center, and Patrick Road. This project is completed.

Contract Date	February 9, 2017
Contract Amount	\$ 200,429.38
Amount Spent	\$ 200,429.38
Contract Closed	May 23, 2019

11. RTC Project Number 191B-CSF – This project was awarded to the City of Mesquite at our February 11, 2016, Board Meeting. The project included the installation of “Share the Road” signs throughout the City of Mesquite. This project is completed.

Contract Date	February 11, 2016
Contract Amount	\$ 12,000.00
Amount Spent	\$ 12,000.00
Contract Closed	October 13, 2016

12. RTC Project Number 191A-CSF – This project was awarded to the City of Las Vegas at our February 11, 2016, RTC Board Meeting. The project included retro-fitting of roads for bicycle lanes, pedestrian signals, crosswalks, refuge islands, pathways, and lighting. The roadways included were Fort Apache Road, Hualapai Way, Grand Teton Drive, Lake Mead Boulevard, El Camino Avenue, D Street, Odette Lane, Vegas Drive, Rock Springs Road, Mojave Road, Harris Avenue, Cimarron Road, Ranch Drive, Tonopah Drive, and Goldring Avenue. This project is completed.

Contract Date	February 11, 2016
Contract Amount	\$ 118,119.66
Amount Spent	\$ 118,119.66
Contract Closed	February 9, 2017

Should you have any questions or require any additional information, please do not hesitate to contact me at (702) 676-1632 or by email at kendallg@rtcsonv.com.

Sincerely,

Gena Kendall

Gena Kendall, P.E., PTOE
Manager of Engineering Services – Streets & Highways

GK/sf
Enclosure

cc: (via e-mail)

M.J. Maynard, Chief Executive Officer
David Swallow, Deputy Chief Executive Officer
Andrew Kjellman, Senior Director
Lance Olsen, Director of Public Works, City of Henderson
Travis Anderson, Director of Public Works, City of Mesquite
Mike Hudgeons, Public Works Director, City of North Las Vegas
Denis Cederburg, Director of Engineering, Clark County
Joey Paskey, Director of Public Works, City of Las Vegas
Gary Poindexter, Director of Public Works, City of Boulder City