



DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
NOTICE OF SUBGRANT AWARD

State of Nevada
Department of Health and Human Services
**Division of Public & Behavioral
Health**

(hereinafter referred to as the Division)

HD #: **16450**
Budget
Account: 3215
Category: 24
GL: 8516
Job Number: REBATE18

NOTICE OF SUBGRANT AWARD

Program Name: Ryan White HIV/AIDS Program – Part B Bureau of Behavioral Health, Wellness and Prevention		Subgrantee Name: Washoe County Health District (WCHD) Kevin Dick, District Health Officer (775) 328-2400																	
Address: 4126 Technology Way, Suite 200 Carson City, NV 89706-2009		Address: 1001 E. Ninth Street, Building B Reno, NV 89512																	
Subgrant Period: April 1, 2018 through March 31, 2019		Subgrantee's: EIN: 88-6000138 Vendor #: T40283400 Dun & Bradstreet: 073786998																	
Purpose of Award: Early Intervention Services (EIS)																			
Region(s) to be served: ☐ Statewide ☒ Specific county or counties: Washoe																			
Approved Budget Categories: <table border="1"><tr><td>1. Personnel</td><td>\$ 128,673.30</td></tr><tr><td>2. Travel</td><td>\$ 3,809.00</td></tr><tr><td>3. Supplies</td><td>\$ 600.00</td></tr><tr><td>4. Contractual/Consultant</td><td>\$ 0.00</td></tr><tr><td>5. Training</td><td>\$ 0.00</td></tr><tr><td>6. Other</td><td>\$ 20,188.00</td></tr><tr><td>7. Indirect/Administrative</td><td>15,327.03</td></tr><tr><td>Total Cost:</td><td>\$ 168,597.33</td></tr></table>		1. Personnel	\$ 128,673.30	2. Travel	\$ 3,809.00	3. Supplies	\$ 600.00	4. Contractual/Consultant	\$ 0.00	5. Training	\$ 0.00	6. Other	\$ 20,188.00	7. Indirect/Administrative	15,327.03	Total Cost:	\$ 168,597.33	Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures <i>specific to this subgrant</i> . Total reimbursement will not exceed \$168,597.33 during the subgrant period.	
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6. Other	\$ 20,188.00																		
7. Indirect/Administrative	15,327.03																		
Total Cost:	\$ 168,597.33																		
Source of Funds: 1. Pharmaceutical Rebates		%Funds: 100%	CFDA: N/A																
		FAIN: N/A	Federal Grant #: N/A																
Terms and Conditions: In accepting these grant funds, it is understood that: 1. Expenditures must comply with appropriate state and/or federal regulations; 2. This award is subject to the availability of appropriate funds; and 3. The recipient of these funds agrees to stipulations listed in the incorporated documents.																			
Incorporated Documents: Section A: Assurances; Section B: Description of Services, Scope of Work and Deliverables; Section C: Budget and Financial Reporting Requirements; Section D: Request for Reimbursement; Section E: Audit Information Request; and Section F: DPBH Business Associate Addendum																			
Kevin Dick District Health Officer	Signature		Date																
Tory Johnson, MMgt Program Manager, OHA																			
Kyle Devine, MSW Bureau Chief, BHWP																			
for Julie Kotchevar, Ph.D. Administrator, Division of Public & Behavioral Health																			