



State of Nevada  
 Department of Health and Human Services  
**Division of Child & Family Services**

Subaward #: 93556-18-021  
 Budget Account: 3145  
 Category: 17  
 GL: \_\_\_\_\_  
 Job Number: 9355618

**NOTICE OF SUBAWARD**

<b>Program Name:</b> Title IV-B, Subpart 2		<b>Subrecipient's Name:</b> Washoe County Human Services Agency Contact: Leslie M. Williams																																		
<b>Address:</b> 4126 Technology Way, 3 <sup>rd</sup> Floor Carson City, NV 89706-2009		<b>Address:</b> 350 S. Center Street Reno, NV 89502																																		
<b>Project Period:</b> July 1, 2018 through June 30, 2019		<b>Subrecipient's:</b>																																		
<b>Budget Period:</b> July 1, 2018 through June 30, 2019		EIN: <u>88-6000138</u>																																		
		Vendor #: <u>T40283400A</u>																																		
		Dun & Bradstreet: <u>073786998</u>																																		
<b>Purpose of Award:</b> Promoting Safe and Stable Families – Time Limited Reunification and Family Preservation																																				
<b>Region(s) to be served:</b> <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: <u>Washoe</u>																																				
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Approved Budget</th> <th style="text-align: left;">Categories</th> <th style="text-align: right;">Amount</th> </tr> </thead> <tbody> <tr><td>1. Personnel</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td>2. Travel/Training</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td>3. Operating</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td>4. Equipment</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td>5. Contractual/Consultant</td><td></td><td style="text-align: right;">\$58,000</td></tr> <tr><td>6. Other</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td><b>TOTAL DIRECT COSTS</b></td><td></td><td style="text-align: right;"><b>\$0</b></td></tr> <tr><td>7. Indirect Costs</td><td></td><td style="text-align: right;">\$0</td></tr> <tr><td><b>TOTAL COSTS</b></td><td></td><td style="text-align: right;"><b>\$58,000</b></td></tr> <tr><td>8. Match</td><td></td><td style="text-align: right;">\$19,333</td></tr> </tbody> </table>		Approved Budget	Categories	Amount	1. Personnel		\$0	2. Travel/Training		\$0	3. Operating		\$0	4. Equipment		\$0	5. Contractual/Consultant		\$58,000	6. Other		\$0	<b>TOTAL DIRECT COSTS</b>		<b>\$0</b>	7. Indirect Costs		\$0	<b>TOTAL COSTS</b>		<b>\$58,000</b>	8. Match		\$19,333	<b>Award Computation</b> Total Obligated by This Action: <span style="float: right;">\$58,000</span> Cumulative Prior Awards this Budget Period: Total Federal Funds Awarded to Date:  Match Required <span style="float: right;">Yes</span> Amount Required this Action: <span style="float: right;">\$19,333</span> Amount Required Prior Awards: <span style="float: right;">No</span> Total Match Amount Required: Research and Development (R&D)	
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<b>Source of Funds:</b> 1. Title IV-B, Subpart 2, Social Security Act		<b>CFDA:</b> 93.556	<b>FAIN:</b> 1801NVFPSS	<b>Federal Grant #:</b> 1801NVFPSS																																
<b>Federal Grant Award Date by Federal Agency:</b>		October 1, 2017 through September 30, 2019																																		
<b>Terms and Conditions:</b> In accepting these grant funds, it is understood that: <ol style="list-style-type: none"> <li>1. This award is subject to the availability of appropriate funds.</li> <li>2. Expenditures must comply with appropriate state statutory guidelines and/or federal regulations, the DCFS Grant Instructions and Requirements, and the State Administrative Manual.</li> <li>3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented.</li> <li>4. Monthly progress reports are due by the 15<sup>th</sup> of each month following the end of the month, unless specific exceptions are provided in writing by the grant administrator.</li> <li>5. Financial Status Reports and Requests for Funds must be submitted by the 15<sup>th</sup> of each month, unless specific exceptions are provided in writing by the grant administrator.</li> <li>6. The recipient of these funds agrees to stipulations listed in the incorporated documents.</li> <li>7. Match must be provided equal to 25% of the total award and described in the budget narrative.</li> </ol>																																				
<b>Incorporated Documents:</b> Subrecipient Agreement Section A: Assurances; Section B: Description of Services, Scope of Work and Deliverables; Section C: Budget and Financial Reporting Requirements;		Section D: Financial Status Reports and Requests for Funds Section E: Audit Information Request; Section F: Current/Former State Employee Disclaimer; Section G: Confidentiality Addendum; and																																		
Authorized Official Name		Signature	Date																																	
Jennie F. Bear Grants & Project Analyst II																																				
for Ross E. Armstrong Administrator, Division of Child & Family Services																																				