

#### State of Nevada

### Department of Health and Human Services

# Aging and Disability Services Division (ADSD)

Grant Number:	16-000-21-BX-19			
Subaward Date:	07/01/2018			
New or Revised:	New			
Award FY:	2018			
Grant Type:	Categorical			

## NOTICE OF SUBAWARD

ADSD Program Name:			Subrecipient Name and Address:					
Planning, Advocacy and Community Services (PAC) Unit			Washoe County					
Grants Management			1001 E. 9th Street Reno, NV 89512					
Address:			Program Name and Address:					
3416 Goni Road, #D-132		V	Washoe County Senior Services					
Carson City, NV 89706			1155 E. 9th Street Reno, NV 89512					
Funded Service:		9	Subrecipient'	<u>s</u> :				
Representative Payee				EIN:	88-60000138	3		
Subaward Grant Period:				Vendor #:	T40283400C	;		
7/1/2018 - 6/30/2019			Dun	& Bradstreet:	073786998			
Purpose of Award: Funding for Fiscal Year 2019 Social Service Program								
	tewide 🗵 Sp	ecific county or		Washoe County	у			
Approved Budget Categories:		<u> </u>	WARD COMP	UTATION:				
Personnel		\$0 ⊤	Total Obligated by This Action:			\$31,218		
Travel/Training			Cumulative Prior Awards this Budget Period:			\$0		
Operating			Total Federal Funds Awarded to Date:			\$31,218		
4. Equipment		<b>\$0</b> ⊤	Total State Funds Awarded to Date:			\$0		
5. Contractual/Consultant		\$31,218 T	Total Funds Awarded:			\$31,218		
6. Other		<b>\$0</b> M	Match Required ☑Y ☐N					
TOTAL DIRECT COSTS	\$31,218		Amount Required This Action:			\$5,510		
7. INDIRECT COSTS		<b>\$0</b> A	Amount Required Prior Awards:			\$0		
8. MATCH		\$5,510 ⊤	Total Match Amount Required:			\$5,510		
TOTAL APPROVED BUDGET \$31,218 Research and Development (R&D) ☐ Y ☑ N								
Source(s) of Funds and %:	Award:	Supplement:	Deobligation:	Total Awarded:	CFDA / Federal Award A	gency & Grant #:		
OAA Title III-B 100.0%	\$31,218			\$31,218	93.044 / ACL 18/	AANVT3SS		

## Terms and Conditions:

In accepting these grant funds, it is understood that:

- 1. This award is subject to the availability of appropriate funds.
- Expenditures must comply with any statutory guidelines, ADSD Requirements and Procedures for Grant Programs (RPGPs), and the State Administrative Manual.
- 3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented.
- 4. Subrecipient must comply with all applicable Federal and State regulations.
- 5. Subrecipient must comply with the scope of services, outreach, budget and assurances defined in its approved grant application.
- 6. Financial, programmatic reports and/or data entry are due according to ADSD's Grantee Reporting Schedule, unless specific exceptions are provided in writing by the grant administrator, or grant funds may be withheld. The Reporting Schedule is available online at: <a href="http://adsd.nv.gov/uploadedFiles/adsdnvgov/content/Programs/Grant/Reporting/ReportingSchedule.pdf">http://adsd.nv.gov/uploadedFiles/adsdnvgov/content/Programs/Grant/Reporting/ReportingSchedule.pdf</a>
- 7. Subrecipient agrees to a limited scope audit to settle any financial disagreements or disputes. Audit costs are to be paid by Grantee.
- 8. Subrecipients are required to:
  - (a) Support meaningful involvement of clients in the planning, implementation, and evaluation of the funded program; (b) Demonstrate ability to deliver culturally competent and accessible services to the community the subrecipient services; (c) Demonstrate accountability for collaboration; (d) Adhere to ADSD's General Service Specifications and the Service-Specific Service Specifications for the funded service; and (e) Submit accurate, up-to-date information on this funded service to Nevada 2-1-1 for inclusion in its resource directory at www.Nevada211.org.

# **Incorporated Documents:** Included with the Notice of Subaward: Section A: Confidentiality Addendum (signature required) Download the following documents online for review/signature: <a href="http://adsd.nv.gov/Programs/Grant/SubawardIncorporatedDocs/">http://adsd.nv.gov/Programs/Grant/SubawardIncorporatedDocs/</a> Section B: Assurances Section C: Budget and Financial Reporting Requirements Section D: Current/Former State Employee Disclaimer (signature required) Section E: Audit Information Request (signature required) Section F: Financial Report and Request for Funds Subaward Acceptance: Date: Subrecipient Authorized Official - Name and Title: Signature: ADSD Authorized Official - Name and Title: Signature: Date: Jeffrey S. Duncan, PAC Social Services Chief II 07/06/2018 for Dena Schmidt, Administrator

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