



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

Subaward #: **16575-17-054**  
Budget Account: 3145  
Category: 20  
GL: \_\_\_\_\_  
Job Number: 1657517

**NOTICE OF SUBAWARD**

<b>Program Name:</b> VOCA Victim Assistance		<b>Subrecipient's Name:</b> Washoe County Human Services Agency Contact: Amber Howell																																									
<b>Address:</b> 4126 Technology Way, 3rd Floor Carson City, NV 89706-2009		<b>Address:</b> PO Box 11130 Reno, NV 89520																																									
<b>Project Period:</b> July 1, 2018 through June 30, 2019 <b>Budget Period:</b> July 1, 2018 through June 30, 2019		<b>Subrecipient's:</b> <b>EIN:</b> 88-6000138 <b>Vendor #:</b> T40283400A <b>Dun &amp; Bradstreet:</b> 073786998																																									
<b>Purpose of Award:</b> Provide Direct Services to Victims of Crime																																											
<b>Region(s) to be served:</b> <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: Washoe																																											
<table border="1"><thead><tr><th>Approved Budget</th><th>Categories</th></tr></thead><tbody><tr><td>1. Personnel</td><td>\$653,725</td></tr><tr><td>2. Travel/Training</td><td>\$0.00</td></tr><tr><td>3. Operating</td><td>\$55,905</td></tr><tr><td>4. Equipment</td><td>\$5,000</td></tr><tr><td>5. Contractual/Consultant</td><td>\$95,000</td></tr><tr><td>6. Other</td><td>\$108,370</td></tr><tr><td><b>TOTAL DIRECT COSTS</b></td><td><b>\$918,000</b></td></tr><tr><td>7. Indirect Costs</td><td>\$0.00</td></tr><tr><td><b>TOTAL COSTS</b></td><td><b>\$918,000</b></td></tr><tr><td>8. Match</td><td>\$229,500</td></tr></tbody></table>		Approved Budget	Categories	1. Personnel	\$653,725	2. Travel/Training	\$0.00	3. Operating	\$55,905	4. Equipment	\$5,000	5. Contractual/Consultant	\$95,000	6. Other	\$108,370	<b>TOTAL DIRECT COSTS</b>	<b>\$918,000</b>	7. Indirect Costs	\$0.00	<b>TOTAL COSTS</b>	<b>\$918,000</b>	8. Match	\$229,500	<table border="1"><thead><tr><th colspan="2">Award Computation</th></tr></thead><tbody><tr><td>Total Obligated by This Action:</td><td>\$918,000</td></tr><tr><td>Cumulative Prior Awards this Budget Period:</td><td>\$0.00</td></tr><tr><td>Total Federal Funds Awarded to Date:</td><td>\$0.00</td></tr><tr><td>Match Required</td><td>Yes</td></tr><tr><td>Amount Required this Action:</td><td>\$229,500</td></tr><tr><td>Amount Required Prior Awards:</td><td>\$0.00</td></tr><tr><td>Total Match Amount Required:</td><td>\$229,500</td></tr><tr><td>Research and Development (R&amp;D)</td><td>No</td></tr></tbody></table>		Award Computation		Total Obligated by This Action:	\$918,000	Cumulative Prior Awards this Budget Period:	\$0.00	Total Federal Funds Awarded to Date:	\$0.00	Match Required	Yes	Amount Required this Action:	\$229,500	Amount Required Prior Awards:	\$0.00	Total Match Amount Required:	\$229,500	Research and Development (R&D)	No
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<b>Source of Funds:</b> VOCA – VICTIM ASSISTANCE		<b>CFDA:</b> 16.575	<b>FAIN:</b> 2017-VA-GX-0085																																								
<b>Federal Grant Award Date by Federal Agency:</b>		2017-VA-GX-0085																																									
<b>Terms and Conditions:</b> In accepting these grant funds, it is understood that: 1. This award is subject to the availability of appropriate funds. 2. Expenditures must comply with appropriate state statutory guidelines and/or federal regulations, the DCFS Grant Instructions and Requirements, and the State Administrative Manual. 3. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented. 4. Quarterly progress reports are due by the 15 <sup>th</sup> of each month following the end of the quarter, unless specific exceptions are provided in writing by the grant administrator. 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. 6. The recipient of these funds agrees to stipulations listed in the incorporated documents. 7. Match must be provided equal to 20% of the total award and described in the budget narrative.																																											
<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 Section H: Program Specific Assurance																																									
Authorized Official Name	Signature		Date																																								
Jean Booth Grants & Project Analyst II for Ross E. Armstrong Administrator, Division of Child & Family Services																																											