



State of Nevada
Department of Health and Human Services
Division of Welfare and Supportive Services

Agency Ref. #: **Ed1924**
Budget Account: 3228
Category: 42
GL: 8795
1056118,
Job Number: 1056119

NOTICE OF SUBAWARD

Program Name: SNAP Education Division of Welfare and Supportive Services	Subrecipient's Name: Washoe County Health District Kevin Dick, Washoe County Health Officer
Address: 1470 College Parkway Carson City, NV 89706	Address: 1001 E. 9 th St. Building B Reno, NV 89512
Project Period: October 1, 2018 through September 30, 2019 Budget Period: October 1, 2018 through September 30, 2019	Subrecipient's: <div style="text-align: right;"> EIN: *****0138 Vendor #: T40283400Q Dun & Bradstreet: 073786998 </div>

Purpose of Award: Through the Healthy Hunger-Free Kids Act of 2010, the Division partners with government and non-profit agencies providing nutrition education, in order to improve the likelihood that SNAP recipients and those eligible for benefits will make healthy food choices within a limited budget and choose physically active lifestyles.

Region(s) to be served: ☐ Statewide ☒ Specific county or counties: Northern Nevada

Approved Budget Categories:		AWARD COMPUTATION:	
1. Salary/Benefits	\$34,209.00	Total Obligated by This Action:	\$63,482.00
2. Contract / Grants / Agreements	\$0.00	Cumulative Prior Awards this Budget Period:	\$0.00
3. Non-capital equipment / Supplies	\$250.00	Total Federal Funds Awarded to Date:	\$63,482.00
4. Materials	\$22,500.00		
5. Travel	\$752.00	Match Required <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
6. Building / Space	\$0.00		
7. Maintenance	\$0.00		
8. Equipment & Capital Expenditures	\$0.00	Amount Required This Action:	\$0.00
TOTAL DIRECT COSTS	\$57,711.00	Amount Required Prior Awards:	\$0.00
9. Administrative / Indirect Costs	\$5,771.00	Total Match Amount Required:	\$0.00
10. MATCH	\$0.00	Research and Development (R&D) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
TOTAL APPROVED BUDGET	\$63,482.00	Must be completed for federal funding sources. If multiple federal sources apply, fill out the optional Subaward Additional Funding Sheet and leave this section blank.	

Source of Funds:	% of Funds:	CFDA:	FAIN:	Federal Grant #:	Federal Grant Award Date by Federal Agency:
U.S Department of Agriculture-Food and Nutrition Service	100%	10.561	187NVNV5Q3903	7NV430NV5	10/05/2017
U.S Department of Agriculture-Food and Nutrition Service	100%	10.561	197NVNV5Q3903	7NV430NV5	10/04/2018

Terms and Conditions:
 In accepting these grant funds, it is understood that:

- This award is subject to the availability of appropriate funds.
- Expenditures must comply with any statutory guidelines, the DWSS Grant Instructions and Requirements, and the State Administrative Manual.
- Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented
- Subrecipient must comply with all applicable Federal regulations
- Quarterly progress reports are due by the 30th of each month following the end of the quarter, unless specific exceptions are provided in writing by the grant administrator.
- Financial Status Reports and Requests for Funds must be submitted monthly, unless specific exceptions are provided in writing by the grant administrator.

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;
Section F:	Current/Former State Employee Disclaimer; and Attachment A to Section F (for sub-awardees)
Section G:	Confidentiality Addendum

Washoe County Health District Kevin Dick	Signature	Date
Grant Manager Name: Rose Sutherland		
DWSS, DA- Program & Field Operations Robert Thompson		
DWSS Administrator: Steve H. Fisher		