



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

Subaward #: **93603-17-002**
Budget Account: **3145**
Category: _____
GL: _____
Job Number: **9360317**

NOTICE OF SUBAWARD

Program Name: Adoption Incentive		Subrecipient's Name: Washoe County Human Services Agency Contact: Amber Howell																																							
Address: 4126 Technology Way, 3 rd Floor Carson City, NV 89706-2009		Address: 350 S. Center Street Reno, NV 89520																																							
Project Period: October 1, 2018 through September 30, 2019 Budget Period: October 1, 2018 through September 30, 2019		Subrecipient's: EIN: 86-60000138 Vendor #: T40283400A Dun & Bradstreet: 073786998																																							
Purpose of Award: Training, recruitment, outreach, placement and post adoption services.																																									
Region(s) to be served: <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: <u>Washoe</u>																																									
<table border="1"><thead><tr><th><u>Approved Budget</u></th><th><u>Categories</u></th></tr></thead><tbody><tr><td>1. Personnel</td><td>\$0.00</td></tr><tr><td>2. Travel/Training</td><td>\$11,000.00</td></tr><tr><td>3. Operating</td><td>\$3,000.00</td></tr><tr><td>4. Equipment</td><td>\$0.00</td></tr><tr><td>5. Contractual/Consultant</td><td>\$124,000.00</td></tr><tr><td>6. Other</td><td>\$10,561.00</td></tr><tr><td>TOTAL DIRECT COSTS</td><td>\$0.00</td></tr><tr><td>7. Indirect Costs</td><td>\$0.00</td></tr><tr><td>TOTAL COSTS</td><td>\$148,561.00</td></tr></tbody></table>		<u>Approved Budget</u>	<u>Categories</u>	1. Personnel	\$0.00	2. Travel/Training	\$11,000.00	3. Operating	\$3,000.00	4. Equipment	\$0.00	5. Contractual/Consultant	\$124,000.00	6. Other	\$10,561.00	TOTAL DIRECT COSTS	\$0.00	7. Indirect Costs	\$0.00	TOTAL COSTS	\$148,561.00	<table border="1"><thead><tr><th colspan="2"><u>Award Computation</u></th></tr></thead><tbody><tr><td>Total Obligated by This Action:</td><td>\$148,561.00</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>No</td></tr><tr><td>Amount Required this Action:</td><td>\$0.00</td></tr><tr><td>Amount Required Prior Awards:</td><td>\$0.00</td></tr><tr><td>Total Match Amount Required:</td><td>\$0.00</td></tr><tr><td>Research and Development (R&D)</td><td>No</td></tr></tbody></table>		<u>Award Computation</u>		Total Obligated by This Action:	\$148,561.00	Cumulative Prior Awards this Budget Period:	\$0.00	Total Federal Funds Awarded to Date:	\$0.00	Match Required	No	Amount Required this Action:	\$0.00	Amount Required Prior Awards:	\$0.00	Total Match Amount Required:	\$0.00	Research and Development (R&D)	No
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Source of Funds: Adoption and Legal Guardianship Incentive		CFDA: 93.603	FAIN: 1701NVAIPP																																						
Federal Grant Award Date by Federal Agency:		Federal Grant #: 1701NVAIPP																																							
Terms and Conditions: In accepting these grant funds, it is understood that: <ol style="list-style-type: none">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 15th 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 15th 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.																																									
Incorporated Documents: 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; and Section G: Confidentiality Addendum.																																							
Authorized Official Name	Signature		Date																																						
Jean Booth Grants & Project Analyst II for Ross E. Armstrong Administrator, Division of Child & Family Services																																									