

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

Agency Ref. #:	CC1905
Budget Account:	3267
Category:	20
GL:	9043
Job Number:	93575

## NOTICE OF SUBAWARD

Program Name:		Subre	cipient's Nam	ne:	
Child Care Licensing		Washoe County Human Service Agency (County of Washoe)			
Division of Welfare and Supportive Services		Leslie Williams, Division Director			
Address:		Addre	ess:		
1470 College Parkway			3ox 11130		
Carson City, NV 89706		Reno, NV 89520-0027			
Project Period:		Subre	ecipient's:		
July 01, 2018 through June 30, 2019			EIN	I: *****0138	
De las ( De de l			Vendor #	#: T40283400	
Budget Period: July 01, 2018 through June 30, 2019		Du	n & Bradstree	t: 073786998	
Purpose of Award: This subaward is to					
providers within Washoe County under th	ne provisions gran	ited in the	Nevada Revise	ed Statutes (NRS)	432A.
Region(s) to be served:	Specific county or co	ounties: <u>W</u>	ashoe County		
Approved Budget Categories:		AWARD C	OMPUTATION:		
1. Personnel	\$279,435.00	Total Oblig	ated by This Acti	\$324,907.00	
2. Travel/Training	\$0.00	Cumulative Prior Awards this Budget Period:			\$0.00
3. Supplies/ Operating	\$5,000.00	Total Federal Funds Awarded to Date:			\$324,907.00
4. Equipment	\$0.00				
5. Contractual/Consultant	\$25,000.00	Match Req	uired 🗆 Y 🗹	] N	
6. Other Expenses	\$0.00	Amount Required This Action:			\$0.00
		Amount Required Prior Awards:			\$0.00
TOTAL DIRECT COSTS	\$309,435.00	Total Match	n Amount Require	\$0.00	
7. Administrative / Indirect Costs	\$15,472.00	Research and Development (R&D)			
8. MATCH	\$0.00	Must be completed for federal funding sources. If			
		multiple federal sources apply, fill out the optional			
TOTAL APPROVED BUDGET \$324,907.00		Subaward Additional Funding Sheet and leave this			is
		section bla	nk.		
Source of Funds:	<u>% of Funds:</u>	CFDA:	FAIN:	Federal Grant #:	Federal Grant Award Date
					by Federal Agency:
Administration for Children & Families,	100%	93.575	G1801NVCCDF	2018G996005	10/19/2017
Child Care Development Block					
Terms and Conditions:					

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 any statutory guidelines, the DWSS 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. Subrecipient must comply with all applicable Federal regulations
- 5. 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.
- 6. 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: Section G:	Current/Former State Employed Confidentiality Addendum	e Disclaimer;	
Washoe County Leslie William	Human Services Agency	Signature	Date
Grant Manager I Millie Cady	Name:		
Chief, Child Care Christell Aske			
DWSS Administ Steve H. Fish			