



State of Nevada
Department of Health and Human Services
Aging and Disability Services Division (ADSD)

Award Number: 16-000-07-1X-19
Date: 09/13/2018
New or Revised: New
Funding FY: 2018
Award Type: Fixed Fee

NOTICE OF SUBAWARD

ADSD Program Name: Planning, Advocacy and Community Services (PAC) Unit Grants Management		Subrecipient Name and Address: Washoe County Human Services Agency P.O. Box 11130; Reno, NV 89520																																									
Address: 3416 Goni Road, #D-132 Carson City, NV 89706		Program Name and Address: Senior Services Division 1155 E. 9th Street; Reno, NV 89512																																									
Funded Service: Congregate Meals Budget Period: 09/30/2018 - 09/29/2019		Subrecipient's: <div style="text-align: right;"> EIN: 8860000138 Vendor #: T40283400 Dun & Bradstreet: 073786998 </div>																																									
Purpose of Award: Funding For Fiscal Year 2019 Nutrition Programs.																																											
Region(s) to be served: <input type="checkbox"/> Statewide <input checked="" type="checkbox"/> Specific county or counties: Washoe County																																											
Approved Budget Categories: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>1. Personnel</td><td style="text-align: right;">\$0</td></tr> <tr><td>2. Travel/Training</td><td style="text-align: right;">\$0</td></tr> <tr><td>3. Operating</td><td style="text-align: right;">\$0</td></tr> <tr><td>4. Equipment</td><td style="text-align: right;">\$0</td></tr> <tr><td>5. Contractual/Consultant</td><td style="text-align: right;">\$274,560</td></tr> <tr><td>6. Other</td><td style="text-align: right;">\$0</td></tr> <tr><td>TOTAL DIRECT COSTS</td><td style="text-align: right;">\$274,560</td></tr> <tr><td>7. INDIRECT COSTS</td><td style="text-align: right;">\$0</td></tr> <tr><td>8. MATCH</td><td style="text-align: right;">\$48,457</td></tr> <tr><td>TOTAL APPROVED BUDGET</td><td style="text-align: right;">\$274,560</td></tr> </table>		1. Personnel	\$0	2. Travel/Training	\$0	3. Operating	\$0	4. Equipment	\$0	5. Contractual/Consultant	\$274,560	6. Other	\$0	TOTAL DIRECT COSTS	\$274,560	7. INDIRECT COSTS	\$0	8. MATCH	\$48,457	TOTAL APPROVED BUDGET	\$274,560	AWARD COMPUTATION: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Total Obligated by This Action:</td><td style="text-align: right;">\$274,560</td></tr> <tr><td>Cumulative Prior Awards this Budget Period:</td><td style="text-align: right;">\$0</td></tr> <tr><td>Total Federal Funds Awarded to Date:</td><td style="text-align: right;">\$274,560</td></tr> <tr><td>Total State Funds Awarded to Date:</td><td style="text-align: right;">\$0</td></tr> <tr><td>Total Funds Awarded:</td><td style="text-align: right;">\$274,560</td></tr> <tr><td>Match Required <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</td><td></td></tr> <tr><td>Amount Required This Action:</td><td style="text-align: right;">\$48,457</td></tr> <tr><td>Amount Required Prior Awards:</td><td style="text-align: right;">\$0</td></tr> <tr><td>Total Match Amount Required:</td><td style="text-align: right;">\$48,457</td></tr> <tr><td>Research and Development (R&D) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N</td><td></td></tr> </table>		Total Obligated by This Action:	\$274,560	Cumulative Prior Awards this Budget Period:	\$0	Total Federal Funds Awarded to Date:	\$274,560	Total State Funds Awarded to Date:	\$0	Total Funds Awarded:	\$274,560	Match Required <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		Amount Required This Action:	\$48,457	Amount Required Prior Awards:	\$0	Total Match Amount Required:	\$48,457	Research and Development (R&D) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
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Terms and Conditions: In accepting these funds, it is understood that: <ol style="list-style-type: none"> 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. Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented. Subrecipient must comply with all applicable Federal and State regulations. Subrecipient must comply with the scope of services, outreach, budget and assurances defined in its approved grant application. Financial, programmatic reports and/or data entry are due according to ADSD's Subrecipient Reporting Schedule, unless specific exceptions are provided in writing by the award administrator, or funds may be withheld. The Reporting Schedule is available online at: http://adsd.nv.gov/uploadedFiles/adsdnv.gov/content/Programs/Grant/Reporting/ReportingSchedule.pdf Subrecipient agrees to a limited scope audit to settle any financial disagreements or disputes. Audit costs are to be paid by the Subrecipient. Subrecipients are required to: <ol style="list-style-type: none"> Support meaningful involvement of clients in the planning, implementation, and evaluation of the funded program; Demonstrate ability to deliver culturally competent and accessible services to the community the Subrecipient services; Demonstrate accountability for collaboration; Adhere to ADSD's General Service Specifications and the Service-Specific Service Specifications for the funded service; and 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)

Section F: Financial Report and Request for Funds (signature required when submitted)

Download the following documents online for review/signature: <http://adsd.nv.gov/Programs/Grant/SubawardIncorporatedDocs/>

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)

Subaward Acceptance:

Subrecipient Authorized Official - Name and Title:	Signature:	Date:
Marsha Berkbigler, Chair Washoe County Board of County Commissioners		11/29/2018
ADSD Authorized Official - Name and Title:	Signature:	Date:
Jeffrey S. Duncan, PAC Social Services Chief II for Dena Schmidt, Administrator		09/13/2018

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