



Washoe County
Human Services Agency
350 S. Center Street, Reno NV 89510

NOTICE OF SUBAWARD

Program Name: Title IV-E Foster Care Transportation		Subrecipient Name: Washoe County School District 425 E. 9th Street Reno, NV 89512-2800																	
Address: Washoe County Human Services Agency 350 S. Center Street Reno, NV 89510		Address: 425 E. 9th Street Reno, NV 89512-2800																	
Performance Period: July 1, 2019 – June 30, 2020		Subrecipient's DUNs Number: 100049469																	
Purpose of Award: Provide out of zone transportation services for children in foster care who meet Title IV-E eligibility requirements.																			
Amount of Award: \$300,000		CFDA#: 93.658 – Foster Care Title IV-E																	
Approved Budget Categories: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1. Personnel</td> <td style="width: 20%; text-align: right;">\$ _____</td> </tr> <tr> <td>2. Travel</td> <td style="text-align: right;">\$ 300,000</td> </tr> <tr> <td>3. Supplies</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>4. Equipment</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>5. Contractual/Consultant</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>6. Other</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>7. Indirect 10%</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>TOTAL</td> <td style="text-align: right;">\$300,000</td> </tr> </table>		1. Personnel	\$ _____	2. Travel	\$ 300,000	3. Supplies	\$ _____	4. Equipment	\$ _____	5. Contractual/Consultant	\$ _____	6. Other	\$ _____	7. Indirect 10%	\$ _____	TOTAL	\$300,000	Disbursement of funds will be as follows: Payment will be made upon receipt and acceptance of an invoice and supporting documentation specifically requesting reimbursement for actual expenditures specific to this subgrant. Total reimbursement will not exceed \$300,000. This Award is not for Research & Development	
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2. Travel	\$ 300,000																		
3. Supplies	\$ _____																		
4. Equipment	\$ _____																		
5. Contractual/Consultant	\$ _____																		
6. Other	\$ _____																		
7. Indirect 10%	\$ _____																		
TOTAL	\$300,000																		
Source of Funds: Title IV-E Foster Care																			
FAIN Grant #: 1901NVFOST/2001NVFOST		Subaward #: 314113-20-001																	
Federal Awarding Agency: U.S. Department of Health and Human Services Administration for Children and Families		Granting Entity (Pass through): Washoe County																	
State Pass Through Entity: State of Nevada Department of Health and Human Services Division of Child & Family Services		Subrecipient: Washoe County School District																	
Washoe County Contact: Pamela Mann PMann@washoecounty.us		Subrecipient Contact: Jill Murdock jmurdock@washoeschools.net																	
Terms and Conditions: <ol style="list-style-type: none"> 1. Expenditures must comply with appropriate state and/or federal regulations. 2. This award is subject to the availability of appropriate funds; and 3. The recipient of these funds must agree to stipulate to the incorporated documents. 																			
Incorporated Documents: Subgrant Agreement including Exhibits A through B																			
Authorized Subgrantee Official: Name, Title	Signature	Date																	
Washoe County Authorizing Official: Vaughn Hartung, Chair	Signature	Date																	