

**NEVADA OFFICE OF THE ATTORNEY GENERAL
Calendar Year 2024 STOP/SASP Program Sub-Grant**

**Application
Part 1 - TITLE PAGE**

Agency: Clark County District Attorney

Project Title: Prosecution Of Crimes Against Women

Project Jurisdiction: Clark County Nevada

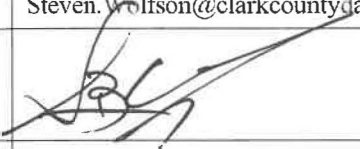
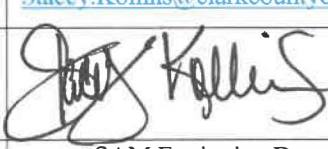
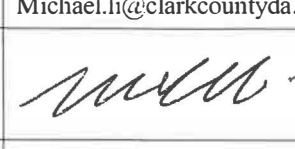
Funding Requested for Calendar Year 2024 (January 1, 2024 through December 31, 2024) :

Source of Funds	Totals	*Describe Match Type/Source, if any
Grant Funds	\$93,107	<i>In-kind existing Attorney staff salaries/benefits</i>
Match Funds*	\$31,036	
TOTAL PROJECT BUDGET (all funds)	\$ 124,143	

Current STOP/SASP funding awarded for Calendar Year 2023 (January, 2023 through December 31, 2023):

STOP:\$127,009

Total:\$127,009

Contact Info	Executive Director/ Authorized Official	Project Director	Fiscal Officer <i>(must be different than Executive Director)</i>
Name	Steven B. Wolfson	Stacey Kollins	Michael Li
Title/Position	Clark County District Attorney	Chief Deputy District Attorney	Senior Management Analyst
Mailing Address City, State & Zip	200 Lewis Avenue 3 rd Floor Las Vegas, NV 89101	301 Clark Place 9 th Floor Las Vegas, NV 89101	200 Lewis Avenue 3 rd Floor Las Vegas, NV 89101
Physical Address City, State & Zip	200 Lewis Avenue 3 rd Floor Las Vegas, NV 89101	301 Clark Place 9 th Floor Las Vegas, NV 89101	200 Lewis Avenue 3 rd Floor Las Vegas, NV 89101
Telephone	702-671-0990	702-671-2712	702-671-0988
Fax	702-455-2294	702-868-2444	702-455-2294
E-Mail	Steven.Wolfson@clarkcountynvda.com	Stacey.Kollins@clarkcountynvda.com	Michael.li@clarkcountynvda.com
Signature/Date			
DUNS Number	117486331	SAM Expiration Date	02/15/2024

STOP Federal Purpose Areas: Include a check for all applicable Purpose Areas being addressed in this application. NOTE: Each area checked here must correspond to the Goals listed in your Scope of Work.

Check if applicable	Federal Purpose Area
X	1. Training (law enforcement, judges, prosecutors, court personnel)
	2. Multi-disciplinary units targeting VAWA crimes
	3. Developing or implementing effective policies, protocols, services
	4. Data collection and communication systems
X	5. Strengthen victim services and legal assistance programs
	6. Addressing the needs of Indian tribes regarding VAWA crimes
	7. Coordinated community response
	8. Train sexual assault forensic medical personnel examiners
	9. Address needs of older and disabled women and prosecute instances
	10. Assistance in immigration matters
	11. Maintain core victim services and criminal justice initiatives
	12. Jessica Gonzales Victim Advocates
	13. Crystal Judson Domestic Violence Protocol Program
	14. Develop and promote legislation and policies to enhance best practices
	15. Sexual Assault Response Teams
	16. Strengthen and train on best practices relating to investigation and prosecution
	17. Address sexual assault in correctional or detention settings
	18. Address backlogs of sexual assault evidence collection kits, develop protocols
	19. Strengthen services to those w/limited access to traditional services/response
	20. Strengthen educational/prevention programming

SASP Federal Purpose Areas: (Include a check for all applicable Purpose Areas being addressed in this application). NOTE: Each area checked here must correspond with the Goals in your Scope of Work.

Check if applicable	Federal Purpose Area
	1. 24-hour hotline services, providing crisis intervention
	2. Accompaniment and advocacy (medical, courts, social support, etc.)
	3. Crisis intervention
	4. Information and referral to resources
	5. Culturally-specific services/support mechanisms, outreach to under-served
	6. Development/distribution of materials on the above services

State Priorities: (Include a check for all applicable Priority Areas being addressed in this application)

Check if applicable	State Priority
X	1. Improve access to sexual assault forensic exams, services for under-served, improve investigation and prosecution
	2. Response to human sex trafficking
	3. Improve intake procedures, collaborations to increase victim access
X	4. Improve statewide, regional, local utilization of resources
	5. Support of Intimate Partner Violence fatality reviews and policy development
	6. Support development of dual (Domestic Violence/Sexual Assault) programming in rural communities

Other Priorities: (Include a check for all applicable Other Priorities being addressed in this application)

Check if applicable	Other Priority
	1. Provision of trauma-informed care services
	2. Provision of healing-centered engagement



CLARK COUNTY
OFFICE OF THE DISTRICT ATTORNEY

Administration Division

STEVEN B. WOLFSON

District Attorney

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CHRISTOPHER LALLI
Assistant District Attorney

ROBERT DASKAS
Assistant District Attorney

BRIGID J. DUFFY
Director DA Juvenile

KAREN S. CLIFFE
Director DA Family Support

LISA LOGSDON
County Counsel

November 17, 2023

Aaron D. Ford
Nevada Attorney General
100 North Carson Street
Carson City, Nevada 89701

Dear Mr. Ford,

Through the 2024 Violence Against Women Act (VAWA) Grant program, the Clark County District Attorney (CCDA) is requesting \$93,107 for salary and benefit costs for one part time victim advocate, and one full time victim advocate dedicated to the Prosecution of Crimes Against Women Program, training expenses designed to target sexual assault and abuse cases, and equipment costs to assist with victim notification. This program addresses the ongoing problem of sexual offense related crimes in Southern Nevada by obtaining the resources necessary during the prosecution and conviction of perpetrators of sexual assault and abuse crimes and providing assistance to the victims of these crimes.

The need for these services continues to grow. During 2022, more than 65,473 felony and misdemeanor cases were submitted to the CCDA Criminal Division for prosecution by at least seven (7) local law enforcement agencies. The population served in Clark County includes outlying communities as far south as Laughlin (90 miles from Las Vegas) and as far north as the City of Mesquite (55 miles from Las Vegas) with a general resident population of approximately 2.38 million people.

The collaborative partnerships existing for the program with the Rape Crisis Center (RCC) and Safenest will continue to provide comprehensive support services in aiding victims of sexual assault throughout the judicial process, resourcing referrals and providing individualized case management support to victims and witnesses.

Sincerely,

A handwritten signature in black ink, appearing to be "SBW", is written over a horizontal line.

Steven B. Wolfson,
Clark County District Attorney

Part 3 - PROJECT NARRATIVE

A. Statement of Need

a. Sexual Assault crimes pose a threat to the safety of all citizens and visitors in Clark County.

The frequency of sexual offense related crimes is a major, ongoing problem in Southern Nevada. The Clark County District Attorney (CCDA) Physical and Sexual Abuse Unit is comprised of attorneys specifically trained and experienced in the prosecution of sexual assault and abuse cases targeted by this Program. The CCDA remains the largest legal provider of prosecutorial services for sexual assault or abuse crimes occurring in Clark County. Contact with and support for victims is an essential component of the prosecution of these cases. Sexual assault and abuse victims require a great deal of support and encouragement due to the very nature of the crimes perpetrated against them. Victims may verbalize their need for emotional support and community resources for the first time through the CCDA and may be pregnant, homeless or in need of some other special assistance. The volume of cases and intensive services required for sexual assault and abuse cases contributes to the need for additional victim advocate and process server positions. Support for victims and victim services provided through the Prosecutor, victim advocate, investigators and process servers include one-on-one discussions and support, accompanying victims to court, expediting referral services for community resources (e.g. counseling, crime compensation programs), and assistance in obtaining critical protective orders. Effectively communicating information regarding the criminal justice system is essential to minimize victims' fears and help victims understand the judicial process in place for their protection. Due to the nature of sexual assault cases, victims/witnesses have various types of reactions regarding the legal/court steps including, but not limited to, fear of retaliation, shame and embarrassment. In addition to delivering subpoenas to victims/witnesses for an upcoming Court Hearing, process servers act as field advocates in the community as well as telephonically. Often times, process servicers are tasked with developing rapport with victims/witnesses to ensure their safety and questions or concerns are relayed to the victim advocate and assigned Attorney

prior to beginning the court process. The process servers help locate, educate and connect victims/witnesses to community resources, victim advocates and specific individuals based on the unique victim/witness needs. Fostering trust with victims and educating them on the often intimidating criminal justice system increases the likelihood of witnesses appearing in court which is crucial to the successful prosecution of these violent crimes.

b. Jurisdictionally, the U.S. Attorney's office can prosecute some sexual assault and abuse cases within Clark County; however, for reasons of practicality these cases are handled by the CCDA. The prosecution of sexual offense felony and gross misdemeanor cases within Clark County is performed by the CCDA's Physical and Sexual Abuse Unit. The Unit works collaboratively with the nonprofit Rape Crisis Center (RCC) and Safenest in Las Vegas, Nevada, who also provide advocacy services to the victims of crimes within the jurisdiction of Clark County, Nevada. Along with the RCC and Safenest victim advocates, CCDA investigators, process servers and victim advocates, the Physical and Sexual Abuse Unit prosecutors assist witnesses each year with guidance through the judicial process, advocacy services, witness services and referrals to outside community resource supportive agencies.

c. This project will enhance the CCDA's ability to prosecute sexual offenses committed in Clark County and provide critical aid to victims of these crimes. During 2022, almost 974 sexual assault or abuse cases were submitted to the Physical and Sexual Abuse Unit for prosecution. The volume of cases and intensive services required for sexual assault victims contribute to the need for more assistance to victims and witnesses. Through this request, the CCDA's Physical and Sexual Abuse Unit will retain the existing victim advocate and one part time victim advocate, as well as providing training for the staff. This will assist in the sexual assault or abuse cases which the Unit is prosecuting, increase the quality of assistance provided, as well as provide additional support to victims and witnesses.

Aggressively prosecuting and convicting perpetrators of sexual assault and abuse crimes is essential to addressing the increasing number of crimes of this category. The increase in victimization has also lead to an increase of resources necessary to cater to case management. The part time advocates, victim advocacate and RCC and Safenest will continue to assist

in the identification of victims of sexual assault moving through the court system and offer community resources and advocacy to these victims.

d. The CCDA is responsible for representing the people of the State of Nevada in the prosecution of felonies and gross misdemeanors committed within Clark County, Nevada. During 2022, more than 65,473 felony and misdemeanor cases were submitted to the CCDA Criminal Division for prosecution by at least seven (7) local law enforcement agencies. Clark County's boundaries include outlying communities as far south as Laughlin (90 miles from Las Vegas) and as far north as the City of Mesquite (55 miles from Las Vegas) with a general resident population of approximately 2.38 million people. Additionally, the Clark County tourist population significantly contributes to the criminal cases submitted. The volume of cases prosecuted by the CCDA presents a difficult challenge for the limited resources available in regard to effective case preparation and resolution, as well as in providing sufficient victim services.

B. What Will Be Done:

The purpose of this request is to enhance the CCDA's ability to prosecute sexual offenses committed in Clark County through serving process and providing prompt aid to victims of these crimes through advocacy. The prosecution of Physical and Sexual Abuse Victim Unit cases is a complicated and evolving area of the law. Continued training is necessary for staff to most effectively and efficiently manage such cases. Additionally, law enforcement training is essential to provide the necessary elements to support a criminal prosecution.

The goals and objectives for this project are:

1. Goal: Investigators, victim advocates and process servers shall maintain timely, direct communication with the case victims. This will allow victims to better understand the criminal procedure and their role in that process, resulting in a reduction in victim stress and apprehension as well as providing more prepared witnesses as testimony is received.

Objective: Prior to any court appearances by the victim, investigators, victim advocates and process servers will attempt to obtain direct contact, personal or telephonic, between themselves and all identified victims in cases approved for prosecution in a timely manner.

Through such process of victim contact, a meeting between the victim and the prosecutor will be arranged prior to the victim coming to court in a minimum of 160 case victims.

Completion Date: Over the term of the grant.

2. Goal: Provide local opportunities for training. Educating staff is a critical component of ensuring a trauma-informed and victim-centered environment for victims going through the criminal justice system.

Objective: Provide at least two local or web-based victim centered training opportunities for the victim advocates.

Completion Date: Over the term of the grant

Receipt of STOP grant funds will enable the CCDA Physical and Sexual Abuse Unit to aide in the adult sexual assault related cases prosecuted, by acting in tandem with law enforcement and utilizing advocate services, to provide a sound approach to building stronger cases and thereby resolving more cases in a timely manner. These efforts will also increase the services provided to sexual assault and abuse victims and the level of safety for Clark County citizens and visitors. The CCDA collaborates with RCC and Safenest to increase cases prosecuted and provide improved services to victims and witnesses. The Physical and Sexual Abuse Unit will retain the existing part time position and victim advocate hired through STOP grant funding.

RCC and Safenest will continue to provide victim advocate positions to better serve victims and witnesses. The victim advocates work with the Physical and Sexual Abuse Unit prosecutors in communication between law enforcement and supportive agencies, which provide support to victims and witnesses of sexual based crimes. Throughout the year, training will be obtained through local seminars and also provided by the Unit prosecutors to the part time victim advocates, the advocates at the RCC and Safenest, and the part time process servers. These courses are designed to educate staff and volunteers on the

investigative and judicial process to prepare witnesses for court which is essential for the successful prosecution of criminal cases.

C. Evaluation Plan:

The CCDA Project Director will continue to oversee the process servers, review the Unit's case statistics, monitor the program and ensure basic program performance factors will be tracked to include: the total number of cases submitted to the Special Victim's Unit for Prosecution, the number of cases with a guilty plea, the number of cases with a guilty verdict and the number of cases dismissed. The Victim Witness Program Administrator shall oversee the victim advocates. The victim advocates will participate in training conducted by the CCDA, as required, to allow for proper case monitoring. The CCDA Project Director will be provided with the number of cases in which victims are contacted by a victim advocate before coming to court by the Victim Witness Program Administrator.

D. Scope of Work Table:

Goal	Objective	Method of Measurement	Estimated Number of Services/Clients (if applicable)	Responsible Party & Completion Date	Federal Purpose Area
Goal 1 - Increase communication with victim advocates and case victims.	Obtain pre-court contact with a minimum of 160 victims in cases prosecuted.	Number of victims with pre-court contact.	160	CCDA investigators, victim advocates and process servers. Over the term of the grant.	Strengthen victim services and legal assistance programs
Goal 2 – Attend VAWA related training.	Obtain one training course for STOP-funded advocate.	1 advocate attending one training course.	N/A	VWAC Administrator. Over the term of the grant.	Training (law enforcement, judges, prosecutors, court personnel)

E. N/A

F. Collaborative Process:

Agency Name	Contact Name and Phone #	Describe Collaboration/Roles
Clark County District Attorney	Stacey Kollins 702/671-2712	Project Director - Chief Deputy District Attorney, Physical and Sexual Abuse Unit – Unit Supervisor
Safenest	Liz Ortenburger, 702/821-2742	Chief Executive Officer – Advocate Supervisor
Rape Crisis Center (RCC)	Danielle Dreitzer 702/385-2153	Executive Director – Advocate Supervisor

Through this project, the CCDA collaborates with RCC and Safenest to increase the number of cases prosecuted and provide improved services to victims and witnesses. The Physical and Sexual Abuse Unit will retain the existing part time positions hired through STOP grant funding, with the addition of a second part-time advocate, which will allow the Unit to provide more services to cases. RCC and Safenest will continue to provide victim advocate positions to provide a greater amount of services to victims and witnesses. The victim advocates work with the Physical and Sexual Abuse Unit prosecutors in communication between law enforcement and supportive agencies, which provide support to victims and witnesses of sexual based crimes. Additionally, both the RCC and Safenest provide two victim advocate positions to assist the Project Director and the CCDA Victim Witness Assistance Center in serving sexual assault or abuse clients.

G. Sustainability Plan:

The CCDA's office will make every effort to sustain the positions after the grant has ended through Clark County general fund supplemental or operating budget requests.

H. Performance:

The CCDA began receiving STOP awards in 2010 and has administered the funding to the fullest each year. Since 2010, procedures have been implemented which allow the attorneys to meet with victims of sexual assault prior to court attendance. Great measures are taken to ensure

victims understand the judicial process for the cases and that they are prepared for appearance in court. The prosecution has also established solid relationships with available victim advocacy organizations. This outreach has enabled the Unit attorneys to continue providing information and training to various non-profit agencies serving victims of sexual assault. The association with the RCC and Safenest assists in the coordination of victim services needed in cases prosecuted by the

CCDA. During 2022, the Unit attorneys have regularly taken time to confer with local law enforcement personnel regarding sexual assault investigations in progress, and provided training to these agencies as to investigative techniques and procedures. These agencies include the Las Vegas Metropolitan Police Department, the Henderson Police Department, the North Las Vegas Police Department and the Clark County School District Police Department.

- I. Explanation/Justification for increased funding**
N/A
- J. Memorandum of Understanding (MOU) – Attached**

BUDGET DETAIL

Budget Narrative

The CCDA is requesting funding for the salary and benefit expenses for one part time process servers, one full time victim advocate and training expenses. Salary expenses total \$64,140 with fringe benefit costs of \$27,919 and training expenses of \$1,048 for a total of \$93,107.

. The following represents a breakdown of the hourly rates and benefit expenses:

A. Grant Employees:

Salary	\$17 per hour X 1,040 Hours
FICA	1.45%
Industrial Insurance	1%
Unemployment Insurance	.20%

Salary	\$22.37 per hour x 2,080 Hours
Retirement	33.5%
FICA	1.45%
Industrial Insurance	1%
Unemployment Insurance	0.20%
Medical Insurance	\$12,500 per year

The requisite 25% match requirement will be made through in-kind services of the salary and benefit costs of an existing non-grant attorney on the CCDA's Physical and Sexual Abuse Unit. The match amount will be paid through the Clark County General Fund.

B. Match Employee:

Salary and Fringe Benefits	\$31,036
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Please see attached Budget Form.

U.S. Department of Justice
Office on Violence Against Women



Certification of Compliance with the Statutory Eligibility Requirements of the Violence Against Women Act as Amended, STOP Formula Grant Program

Applicants should refer to the laws cited below for further information regarding the certifications to which they are required to attest. Signature on this form certifies that the applicant is qualified to receive the STOP Formula Grant Program funds and is in compliance with relevant requirements under 34 U.S.C §§ 10441, 10446 through 10451 and 28 C.F.R. Part 90. These certifications shall be treated as a material representation of fact upon which the Department of Justice will rely if it determines to award the covered transaction, grant, or cooperative agreement.

Upon complying with the application requirements set forth in the solicitation, any state (or territory) shall be qualified for funds provided under the STOP Formula Grant Program upon certification that:

(1) the funds will be used only for the statutory purposes described in 34 U.S.C. § 10441(a) and (b);

(2) grantees and subgrantees will develop plans for implementation and will consult and coordinate with:

- (A) the State sexual assault coalition;
- (B) the State domestic violence coalition;
- (C) the law enforcement entities within the State;
- (D) prosecution offices;
- (E) State and local courts;
- (F) Tribal governments in those States with State or federally recognized Indian tribes;
- (G) representatives from underserved populations, including culturally specific

populations;

- (H) victim service providers;
- (I) population specific organizations; and
- (J) other entities that the State or the Attorney General identifies as needed for the planning process;

(3) grantees will coordinate the State implementation plan with the State plans described in section 307 of the Family Violence Prevention and Services Act (42 U.S.C. 10407) and the programs described in section 1404 of the Victims of Crime Act of 1984 (34 U.S.C. 20103) and section 393A of the Public Health Service Act (42 U.S.C. 280b-1b).

(4) the amount granted will be allocated, without duplication, as follows: not less than 25 percent for law enforcement, not less than 25 percent for prosecutors, not less than 30 percent for victim

services (of which at least 10 percent will be distributed to culturally specific community-based organizations), and not less than 5 percent to state and local courts;

(5) not later than 2 years after March 7, 2013, and every year thereafter, not less than 20 percent of the total amount granted to a State under this subchapter shall be allocated for programs or projects in 2 or more allocations listed in paragraph (4) that meaningfully address sexual assault, including stranger rape, acquaintance rape, alcohol or drug-facilitated rape, and rape within the context of an intimate partner relationship; and

(6) any federal funds received under this subchapter will be used to supplement, not supplant, nonfederal funds that would otherwise be available for activities funded under this chapter.

In addition, to be eligible for funding under the STOP Formula Grant Program, applicants must certify compliance with the requirements in 34 U.S.C. §§ 10449, 10450, and 10451 and implemented at 28 C.F.R. Part 90, as follows:

(1) Forensic Medical Examination Payment Requirement for Victims of Sexual Assault

(a) A state, Indian tribal government, or unit of local government shall not be entitled to funds under the STOP Formula Grant Program unless the state, Indian tribal government, unit of local government, or another governmental entity—

(1) incurs the full out-of-pocket cost of forensic medical exams for victims of sexual assault; and

(2) coordinates with health care providers in the region to notify victims of sexual assault of the availability of rape exams at no cost to the victims.

(b) A state, Indian tribal government, or unit of local government shall be deemed to incur the full out-of-pocket cost of forensic medical exams for victims of sexual assault if any government entity:

(1) provides such exams to victims free of charge to the victim; or

(2) arranges for victims to obtain such exams free of charge to the victims.

(c) A state or Indian tribal government may use STOP Formula Grant Program funds to pay for forensic medical exams performed by trained examiners for victims of sexual assault, except that such funds may not be used to pay for forensic medical exams by any state, Indian tribal government, or territorial government that requires victims of sexual assault to seek reimbursement for such exams from their insurance carriers.

(d) (1) To be in compliance with this section, a state, Indian tribal government, or unit of local government shall comply with subsection (b) without regard to whether the victim participates in the criminal justice system or cooperates with law enforcement.

(2) States, territories, and Indian tribal governments shall have 3 years from March 7, 2013 to come into compliance with this section.

(2) Filing Costs For Criminal Charges and Protection Orders

A state, Indian tribal government, or unit of local government will not be entitled to funds under the STOP Formula Grant Program unless it certifies that its laws, policies, and practices do not

require, in connection with the prosecution of any misdemeanor or felony sexual assault, domestic violence, dating violence, or stalking offense, or in connection with the filing, issuance, registration, modification, enforcement, dismissal, withdrawal or service of a protection order, or a petition for a protection order, to protect a victim of sexual assault, domestic violence, dating violence, or stalking, that the victim bear the costs associated with the filing of criminal charges against the offender, or the costs associated with the filing, issuance, registration, modification, enforcement, dismissal, withdrawal or service of a warrant, protection order, petition for a protection order, or witness subpoena, whether issued inside or outside the State, tribal, or local jurisdiction.

(3) Judicial Notification

A State or unit of local government shall not be entitled to funds under the STOP Formula Grant Program unless the state or unit of local government--

(a) certifies that its judicial administrative policies and practices include notification to domestic violence offenders of the requirements delineated in section 922(g)(8) and (g)(9) of title 18, United States Code, and any applicable related federal, state, or local laws; or

(b) gives the Attorney General assurances that its judicial administrative policies and practices will be in compliance with the requirements of subparagraph (A) within the later of—

(1) the period ending on the date on which the next session of the state legislature ends; or

(2) January 5, 2008.

(4) Polygraph Testing Prohibition

(a) In order to be eligible for grants under the STOP Formula Grant Program, a state, Indian tribal government, territorial government, or unit of local government shall certify that, not later than January 5, 2009, their laws, policies, or practices will ensure that no law enforcement officer, prosecuting officer or other government official shall ask or require an adult, youth, or child victim of an alleged sex offense as defined under federal, tribal, state, territorial, or local law to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an offense.

(b) The refusal of a victim to submit to a polygraph or other truth telling examination shall not prevent the investigation, charging, or prosecution of an alleged sex offense by a state, Indian tribal government, territorial government, or unit of local government.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with above certifications.

Steven B. Wolfson

District Attorney

(702)671-0990

Typed Name of Authorized Representative

Title

Telephone Number

OMB Number – 1122-0001
Expiration Date: 04/30/2022



Signature of Authorized Representative

11/17/2023

Date Signed

CLARK COUNTY District Attorney

Agency Name



Acknowledgement of Notice of Statutory Requirement to Comply with the Confidentiality and Privacy Provisions of the Violence Against Women Act, as Amended

Under section 40002(b)(2) of the Violence Against Women Act, as amended (42 U.S.C. 13925(b)(2)), grantees and subgrantees with funding from the Office on Violence Against Women (OVW) are required to meet the following terms with regard to nondisclosure of confidential or private information and to document their compliance. By signature on this form, applicants for grants from OVW are acknowledging that they have notice that, if awarded funds, they will be required to comply with this provision, and will mandate that subgrantees, if any, comply with this provision, and will create and maintain documentation of compliance, such as policies and procedures for release of victim information, and will mandate that subgrantees, if any, will do so as well.

(A) In general

In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees and subgrantees under this subchapter shall protect the confidentiality and privacy of persons receiving services.

(B) Nondisclosure

Subject to subparagraphs (C) and (D), grantees and subgrantees shall not—

- (i) disclose, reveal, or release any personally identifying information or individual information collected in connection with services requested, utilized, or denied through grantees' and subgrantees' programs, regardless of whether the information has been encoded, encrypted, hashed, or otherwise protected; or
- (ii) disclose, reveal, or release individual client information without the informed, written, reasonably time-limited consent of the person (or in the case of an unemancipated minor, the minor and the parent or guardian or in the case of legal incapacity, a court-appointed guardian) about whom information is sought, whether for this program or any other Federal, State, tribal, or territorial grant program, except that consent for release may not be given by the abuser of the minor, incapacitated person, or the abuser of the other parent of the minor.

If a minor or a person with a legally appointed guardian is permitted by law to receive services without the parent's or guardian's consent, the minor or person with a guardian may release information without additional consent.

(C) Release

If release of information described in subparagraph (B) is compelled by statutory or court mandate—

- (i) grantees and subgrantees shall make reasonable attempts to provide notice to victims affected by the disclosure of information; and
- (ii) grantees and subgrantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) Information sharing

(i) Grantees and subgrantees may share—

- (I) nonpersonally identifying data in the aggregate regarding services to their clients and nonpersonally identifying demographic information in order to comply with Federal, State, tribal, or territorial reporting, evaluation, or data collection requirements;
- (II) court-generated information and law enforcement-generated information contained in secure, governmental registries for protection order enforcement purposes; and
- (III) law enforcement-generated and prosecution-generated information necessary for law enforcement and prosecution purposes.

(ii) In no circumstances may—

- (I) an adult, youth, or child victim of domestic violence, dating violence, sexual assault, or stalking be required to provide a consent to release his or her personally identifying information as a condition of eligibility for the services provided by the grantee or subgrantee;
- (II) any personally identifying information be shared in order to comply with Federal, tribal, or State reporting, evaluation, or data collection requirements, whether for this program or any other Federal, tribal, or State grant program.

(E) Statutorily mandated reports of abuse or neglect

Nothing in this section prohibits a grantee or subgrantee from reporting suspected abuse or neglect, as those terms are defined and specifically mandated by the State or tribe involved.

(F) Oversight

Nothing in this paragraph shall prevent the Attorney General from disclosing grant activities authorized in this Act to the chairman and ranking members of the Committee on the Judiciary of the House of Representatives and the Committee on the Judiciary of the Senate exercising Congressional oversight authority. All disclosures shall protect confidentiality and omit personally identifying information, including location information about individuals.

(G) Confidentiality assessment and assurances

Grantees and subgrantees must document their compliance with the confidentiality and privacy provisions required under this section.

As the duly authorized representative of the applicant, I hereby acknowledge that the applicant has received notice that if awarded funding they will comply with the above statutory requirements. This acknowledgement shall be treated as a material representation of fact upon which the Department of Justice will rely if it determines to award the covered transaction, grant, or cooperative agreement.

Steven B. Wolfson

Typed Name of Authorized Representative

Clark County District Attorney

Title

Telephone Number (702)671-0990



Signature of Authorized Representative

11/16/2023

Date Signed

Clark County District Attorney

Agency Name

U.S. DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS
OFFICE OF THE COMPTROLLER

**CERTIFICATIONS REGARDING LOBBYING; DEBARMENT,
SUSPENSION AND OTHER RESPONSIBILITY MATTERS
AND
DRUG-FREE WORKPLACE REQUIREMENTS**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure of Lobbying Activities," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all sub-recipients shall certify and disclose accordingly.

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510

A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug-free awareness program to inform employees about

(1) The dangers of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
- (e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to:

Department of Justice
Office of Justice Programs
ATTN: Control Desk
810 Seventh Street, N.W.,
Washington, D.C. 20531

- Notice shall include the identification number(s) of each affected grant;
- (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted
 - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 - (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

Check ____ if there are workplaces on file that are not identified here.

Section 67, 630 of the regulations provides that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for Department of Justice funding. States and State agencies may elect to use OJP Form 4061/7.

Check ____ if the State has elected to complete OJP Form 4061/7.

DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67; Sections 67.615 and 67.620

A. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant; and

B. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to:

Department of Justice
Office of Justice Programs
ATTN: Control Desk
810 Seventh Street, N.W.,
Washington, D.C. 20531

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

1. Grantee Name and Address:

Clark County

200 Lewis Avenue 3rd Floor Las Vegas, NV 89101

2. Application Number and/or Project Name:

2023 Services Training Officers Prosecutors (STOP)

3. Grantee IRS/Vendor Number _____

4. Type/Print Name and Title of Authorized Representative

Steven B. Wolfson

5. Signature

6. Date

11/16/2023



OMB APPROVAL NUMBER 1121-0140

EXPIRES 05/31/2019

U.S. DEPARTMENT OF JUSTICE

CERTIFIED STANDARD ASSURANCES

On behalf of the Applicant, and in support of this application for a grant or cooperative agreement, I certify under penalty of perjury to the U.S. Department of Justice ("Department"), that all of the following are true and correct:

- (1) I have the authority to make the following representations on behalf of myself and the Applicant. I understand that these representations will be relied upon as material in any Department decision to make an award to the Applicant based on its application.
- (2) I certify that the Applicant has the legal authority to apply for the federal assistance sought by the application, and that it has the institutional, managerial, and financial capability (including funds sufficient to pay any required non-federal share of project costs) to plan, manage, and complete the project described in the application properly.
- (3) I assure that, throughout the period of performance for the award (if any) made by the Department based on the application--
 - a. the Applicant will comply with all award requirements and all federal statutes and regulations applicable to the award;
 - b. the Applicant will require all subrecipients to comply with all applicable award requirements and all applicable federal statutes and regulations; and
 - c. the Applicant will maintain safeguards to address and prevent any organizational conflict of interest, and also to prohibit employees from using their positions in any manner that poses, or appears to pose, a personal or financial conflict of interest.
- (4) The Applicant understands that the federal statutes and regulations applicable to the award (if any) made by the Department based on the application specifically include statutes and regulations pertaining to civil rights and nondiscrimination, and, in addition--
 - a. the Applicant understands that the applicable statutes pertaining to civil rights will include section 601 of the Civil Rights Act of 1964 (42 U.S.C. § 2000d); section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794); section 901 of the Education Amendments of 1972 (20 U.S.C. § 1681); and section 303 of the Age Discrimination Act of 1975 (42 U.S.C. § 6102);
 - b. the Applicant understands that the applicable statutes pertaining to nondiscrimination may include section 809(c) of Title I of the Omnibus Crime Control and Safe Streets Act of 1968 (34 U.S.C. § 10228(c)); section 1407(e) of the Victims of Crime Act of 1984 (34 U.S.C. § 20110(e)); section 299A(b) of the Juvenile Justice and Delinquency Prevention Act of 2002 (34 U.S.C. § 11182(b)); and that the grant condition set out at section 40002(b)(13) of the Violence Against Women Act (34 U.S.C. § 12291(b)(13)), which will apply to all awards made by the Office on Violence Against Women, also may apply to an award made otherwise;

- c. the Applicant understands that it must require any subrecipient to comply with all such applicable statutes (and associated regulations); and
- d. on behalf of the Applicant, I make the specific assurances set out in 28 C.F.R. §§ 42.105 and 42.204.

(5) The Applicant also understands that (in addition to any applicable program-specific regulations and to applicable federal regulations that pertain to civil rights and nondiscrimination) the federal regulations applicable to the award (if any) made by the Department based on the application may include, but are not limited to, 2 C.F.R. Part 2800 (the DOJ "Part 200 Uniform Requirements") and 28 C.F.R. Parts 22 (confidentiality - research and statistical information), 23 (criminal intelligence systems), 38 (regarding faith-based or religious organizations participating in federal financial assistance programs), and 46 (human subjects protection).

(6) I assure that the Applicant will assist the Department as necessary (and will require subrecipients and contractors to assist as necessary) with the Department's compliance with section 106 of the National Historic Preservation Act of 1966 (54 U.S.C. § 306108), the Archeological and Historical Preservation Act of 1974 (54 U.S.C. §§ 312501-312508), and the National Environmental Policy Act of 1969 (42 U.S.C. §§ 4321-4335), and 28 C.F.R. Parts 61 (NEPA) and 63 (floodplains and wetlands).

(7) I assure that the Applicant will give the Department and the Government Accountability Office, through any authorized representative, access to, and opportunity to examine, all paper or electronic records related to the award (if any) made by the Department based on the application.

(8) I assure that, if the Applicant is a governmental entity, with respect to the award (if any) made by the Department based on the application--

- a. it will comply with the requirements of the Uniform Relocation Assistance and Real Property Acquisitions Act of 1970 (42 U.S.C. §§ 4601-4655), which govern the treatment of persons displaced as a result of federal and federally-assisted programs; and
- b. it will comply with requirements of 5 U.S.C. §§ 1501-1508 and 7324-7328, which limit certain political activities of State or local government employees whose principal employment is in connection with an activity financed in whole or in part by federal assistance.

(9) If the Applicant applies for and receives an award from the Office of Community Oriented Policing Services (COPS Office), I assure that as required by 34 U.S.C. § 10382(c)(11), it will, to the extent practicable and consistent with applicable law—including, but not limited to, the Indian Self-Determination and Education Assistance Act—seek, recruit, and hire qualified members of racial and ethnic minority groups and qualified women in order to further effective law enforcement by increasing their ranks within the sworn positions, as provided under 34 U.S.C. § 10382(c)(11).

I acknowledge that a materially false, fictitious, or fraudulent statement (or concealment or omission of a material fact) in this certification, or in the application that it supports, may be the subject of criminal prosecution (including under 18 U.S.C. §§ 1001 and/or 1621, and/or 34 U.S.C. §§ 10271-10273), and also may subject me and the Applicant to civil penalties and administrative remedies for false claims or otherwise (including under 31 U.S.C. §§ 3729-3730 and 3801-3812). I also acknowledge that the Department's awards, including certifications provided in connection with such awards, are subject to review by the Department, including by its Office of the Inspector General.

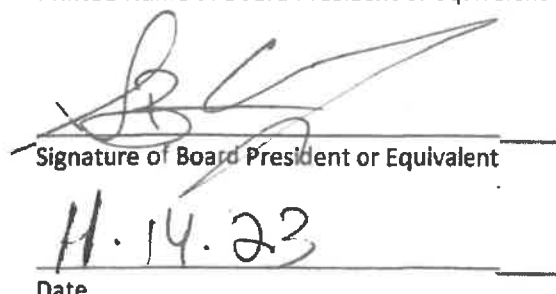
Stacey Kollins

Printed Name of Executive Director


Signature of Executive Director
11/14/23
Date

Steven B Wolfson

Printed Name of Board President or Equivalent


Signature of Board President or Equivalent
11.14.23
Date

**NEVADA ATTORNEY GENERAL OFFICE
REQUEST FOR APPLICATIONS ACKNOWLEDGEMENT FORM**

In signing this form as the authorized representative of the submitting agency, I acknowledge that the applicant agency Clark County (agency name) is aware of these requirements and is prepared to comply with each as well as with any other requirements that are imposed after any award of funding due to changes in federal or state requirements.


1. **Reviewed Entire Solicitation.** By signing below as the authorized representative of the agency noted above, I acknowledge that I have read and reviewed the entire solicitation.
2. **Subgrantee Monitoring.** Each funded agency may receive an on-site monitoring visit which will include both a programmatic and fiscal component. Ideally, the agency will have a 30-day advance notice of such visits; however, the NOAG reserves the right to conduct visits with little or no notice if problems are suspected or in the event that complaints are received.
3. **Quarterly Teleconferences.** The NOAG will assess training needs as well as compliance issues and provide trainings using teleconferences. Funded agencies are expected to participate in these teleconferences.
4. **Networking.** Networking opportunities will be facilitated by the NOAG. Agencies may be asked to send staff to another agency locally that provides similar services to better understand services as well as referral processes and limitations/eligibility requirements.
5. **Disaster Response Plan and Evacuation Plan.** All funded agencies providing services to clients shall have a Disaster Response Plan as well as an Evacuation Plan. All agencies which provide housing and/or shelter to clients shall have an Evacuation Plan clearly posted and shared with clients. Agencies that provide services to clients but do not have a shelter or housing program shall have an evacuation plan for their offices which provide client services clearly posted. All staff shall receive ongoing training on the Disaster and Evacuation Plan on a regular basis.
6. **Cost Allocation Plan for All Agency Funding.** All applicant agencies are required to complete and submit a cost allocation plan to include all funding received, applied for (pending), and discretionary funds anticipated from fund raising or other donations. Additionally, this cost allocation plan should show how the agency's anticipated funding will be allocated across anticipated agency expenses and should show how each position will be funded across all revenue streams (including actual or anticipated discretionary funds).
7. **All awards are contingent upon available funding.**

Clark County

Name of Agency

Steven B Wolfson

Print Name of Authorized Person


Authorized Signature

District Attorney

Title

11/16/2023

Date

Attachment B

VAWA 2023 PROGRAM GRANT CERTIFICATION OF NON-DISCRIMINATION

Please submit this completion page as part of your application

The State of Nevada will not provide support to organizations that in their constitution or practice discriminate against a person or group on the basis of age, gender, race, color, ethnicity, language, educational status, income, political or faith affiliation, national origin and/or immigration status, disability status, marital status, sexual orientation, or gender identification.

STATEMENT OF APPROVAL

The undersigned affirms that the responsible governing body approved this request on 04/14/2023 (date) and is aware of and concurs with the foregoing information. Further, if the proposed grant is awarded, the undersigned agrees to use the funds only for the purpose granted and to provide any reports or information that may be requested by the Nevada Office of the Attorney General.

Additionally, the undersigned affirms that the governing body of this agency has read and understands the nondiscrimination policy. Furthermore, the undersigned declares that this organization, operating in accord with said policy, does not discriminate against any person or group and will ensure that the Project Director and/or funded program staff will view or read the OCR training found at <http://ojp.gov/about/ocr/ocr-training-videos/video-ocr-training.htm>.

Signature: 

Name: Steven B. Wolfson

Title: District Attorney

Organization: Clark County

Date: 11/16/2023

Attachment C

MEMORANDUM OF UNDERSTANDING OR LETTER OF COLLABORATION, IF APPLICABLE (Required for law enforcement, prosecution or court applicants)

**Partnership Agreement
Memorandum of Understanding**

**Clark County Office of the District Attorney
AND
Safe Nest: Temporary Assistance for Domestic Crisis, Inc.**

This In-Kind Memorandum of Understanding is hereby entered into for the purpose of participating in the planning process for the Clark County Office of the District Attorney's (CCDA) Byrne Criminal Justice Innovation Program (BCJI). The success of the CCDA Planning process is greatly dependent on strong collaboration and highly engaged partnerships with local stakeholders, community members and project partners. As such CCDA is convening a Leadership Team to help guide the project, inform the process and help finalize the CCDA's plan for Clark County. As a prominent member of the community and key partner to the project we would like to invite you to participate in the CCDA's Office Leadership Team.

RESPONSIBILITIES AND EXPECTATIONS

For this project CCDA serves as the "lead" organization. As the lead organization, CCDA is responsible for the following:

- Convening the CCDA Leadership Team.
- Coordinating planning activities for the CCDA project, including but not limited to organizing focus groups and interviews of key stakeholders.
- Facilitating communications and information sharing with the CCDA Leadership Team.
- Drafting and completing the CCDA project implementation plan.
- Measuring key outcomes and indicators for CCDA implementation.
- Overseeing the implementation of the CCDA project over the three-year grant period.

Under this Agreement, Safe Nest agrees to:

- Participate in quarterly meetings over the grant period (October 2021- September 2024).
- Support outreach efforts for community meetings and planning activities such as focus groups and community survey days.
- Participate in at least one (1) community meeting in Clark County to engage with and listen to community members as they provide input into the CCDA planning process.
- Share data as needed to support the planning and implementation efforts of the CCDA project.

TIME PERIOD

This Memorandum of Understanding shall follow the grant time period, beginning upon signing this document and remaining in place through September 2024.


TERMINATION

This Agreement may be terminated in whole or in part by either party without cause. Written notice of termination shall be given in writing to both the Clark County District Attorney's Office and Safe Nest and shall be sent via certified or registered mail with return receipt requested. Failure to honor any of the obligations stated above may also result in the termination of this Agreement.

In Witness Whereof, parties have executed this Memorandum of Understanding as of the date first written above.

Clark County
Office of the District Attorney

Safe Nest

By: 
Christopher Lalli
Title: Assistant District Attorney
Date: 7.1.2021

By: 
Title: Chief Executive Officer
Date: 6/30/2021

MEMORANDUM OF UNDERSTANDING

Between

**Community Action Against Rape DBA The Rape Crisis Center, Clark County
District Attorney's Office Special Victims Unit and Clark County Victim Witness
Assistance Center**

This Memorandum of Understanding (MOU) memorializes the on-going partnership, developed in 2010, between Community Action Against Rape, DBA The Rape Crisis Center (RCC), and Clark County, by and through the Clark County District Attorney's (CCDA) Special Victims Unit and its Victim Witness Assistance Center.

The CCDA's Victim Witness Assistance Center and RCC maintain the agreement to work collaboratively to enhance the safety of and increase the positive outcomes for domestic violence and/or sexual assault victims, and their families.

Roles and responsibilities are defined as follows:

RCC agrees to:

1. Provide one or more victim advocates for victims and or witnesses of sexual assault and abuse as needed, with the ability to support victims and witnesses who are fluent in both English and Spanish. The Victim Advocates will be employees of RCC and supervised solely by RCC's staff.

The Victim Advocates are neither employees of nor report to CCDA's or Clark County Victim Witness Assistance Center. CCDA will be able to request the removal or replacement of the Victim Advocates if the terms of this agreement are not met, and may at any time withhold access to the District Attorney's premises if, in the discretion of CCDA, such action is in the best interest of the CCDA's office or the public.

2. Coordinate quarterly meetings with the Team Chief of the Special Victims Unit, the Victim Witness Program Administrator, the RCC victim advocates and supervisors from the RCC. These meetings will be focused on assessing and improving the collaborative process.
3. The Victim Advocates will perform the following functions:
 - A. Establish contact with Victims and Witnesses involved in sexual assault related crimes.
 - B. Assess the needs of Victims and Witnesses and perform any necessary crisis intervention.
 - C. Provide Victims and Witnesses with appropriate information, referrals and facilitated access to other community services

- D. Assist victims in obtaining all available legal remedies and victim related financial compensation.
 - E. Attend daily court hearings and provide assistance requested by the prosecutor.
 - F. Prepare Victims and Witnesses for and provide them with essential support throughout the criminal justice process as needed.
 - G. Maintain the confidentiality of information provided to the Victim Advocate by the CCDA's office.
 - H. Serve as a resource for and liaison to the CCDA's Special Victims Unit personnel to enable attorneys to carry out their duties by:
 - i. Assisting in contacting victims.
 - ii. Providing support during court proceedings.
 - iii. Developing and presenting instruction on sexual violence and the services of RCC when appropriate or requested by Unit personnel.
 - iv. Responding to attorney queries regarding sexual violence services, dynamics, etc.
 - v. Participating in briefings as appropriate or requested by the Unit.
 - vi. Facilitating Department access to other available RCC information or services.
 - vii. Utilizing the Client Limited Release of Information form created to adhere to VAWA guidelines (Attachment A).
4. Provide the CCDA with RCC's annual costs associated with the advocate services for reporting purposes.

CCDA agrees to:

- 1. Make available an appropriate space, administrative support as required and limited support services (utilities, local phone service) for the victim advocate to carry out their duties and afford the victim all possible confidentiality and privacy
- 2. Ensure the access to necessary case information for the victim advocates to carry out their professional duties. All documents related to the cases must remain on the premises of the CCDA's office.
- 3. Attend quarterly meetings with the RCC victim advocates and supervisors and the Victim Witness Program Administrator to assess and improve the collaborative process. Provide training, in collaboration with RCC, as required when staffing changes occur to both CCDA employees and RCC employees regarding the partnership identified by this Memorandum of Understanding.
- 4. Provide feedback on the contributions made by RCC

5. Comply with Violence Against Women Act confidentiality policies as set forth below.

Violence Against Women Act Confidentiality Policies

Victim Advocate primary goals are to obtain sufficient information from victims to conduct lethality assessment, provide support and assistance to primary and secondary victims of sexual violence to support active participation in testifying and support of the criminal prosecution of perpetrators of sexual violence. This includes assisting with addressing both long and short term needs that victims may face as a result of sexual violence. Another goal is to encourage the victim to consent to sharing information which may aid in prosecution. The Client Limited Release of Information forms provide an opportunity for limited release of information to assist prosecution.

Both parties to this Memorandum of Understanding will abide by the following confidentiality guidelines.

Statements made by a victim or survivor of sexual violence to a Safe Nest Victim Advocate will be treated as confidential communication. (All Victim Advocates employed by RCC are qualified as a sexual violence advocates under NRS 49.2543) As such, any information disclosed to the advocate will not be released to a prosecutor or any other source barring the existence of one of the following conditions:

- Permission to release information is granted by the victim/survivor after informed consent is provided in writing utilizing RCC's Client Limited Release of Information document (copies in English and Spanish attached). For the purpose of this project informed consent is achieved when the following criteria has been met:
 1. The situation is explained carefully and in detail.
 2. The information is provided to the client in a language and style that client understands.
 3. Any and all of the client's questions were diligently elicited and answered.
 4. The client has the opportunity to decline giving permission to release information.
 5. The client has opportunity to rescind the permission to release information at the client's discretion. (In the event this occurs, the Advocate will sign and date the document and note "VOID" in large letters across the face of the document.)
 6. The Victim Advocate signs and dates the document.
 7. The client indicates by signature that the previous actions have taken place
- There exists a court order requesting specific information.
- Special circumstances:
 1. if and when child abuse is initially disclosed
 2. if and when elder abuse is initially disclosed

This Memorandum of Understanding shall be effective as of the date of signing and supersedes any previous MOUs. The MOU will be reviewed at least biennially for any material changes program.

This MOU may be terminated by either party subsequent to a thirty (30) day prior written notice of the date of cancellation being served on the other party. No element of this agreement will be construed to imply any form of financial or monetary obligation or liability, or to confer on one party the capacity to represent or act as an agent of the other.

Authorized signatures:

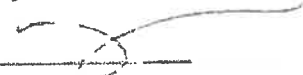
Clark County District Attorney's Office

**Community Action Against Rape
DBA The Rape Crisis Center**

Las Vegas, Nevada

Las Vegas, Nevada

By: 

By: 

Date: 11-20-14

Date: 11/18/14

ATTACHMENT A



CLIENT LIMITED RELEASE OF INFORMATION (ADULT)

I understand that The Rape Crisis Center has an obligation to keep my personal information, identifying information, and my records confidential. I also understand that I can choose to allow The Rape Crisis Center to release some of my personal information to certain individuals or agencies.

I, _____, authorize The Rape Crisis Center to share the following specific information with:
name _____

Who I want to have my information:	Name: _____ Specific Office at Agency: _____ Phone Number: _____
------------------------------------	--

The information may be shared: ☐ in person ☐ by phone ☐ by fax ☐ by mail ☐ by e-mail
☐ I understand that electronic mail (e-mail) is not confidential and can be intercepted and read by other people.

What info about me will be shared:	(List as specifically as possible, for example: name, dates of service, any documents).
------------------------------------	---

Why I want my info shared: (purpose)	(List as specifically as possible, for example: to receive benefits).
--------------------------------------	---

Please Note: there is a risk that a limited release of information can potentially open up access by others to _____ of your confidential information held by The Rape Crisis Center.

I understand:

That I do not have to sign a release form. I do not have to allow The Rape Crisis Center to share my information. Signing a release form is completely voluntary. That this release is limited to what I write above. If I would like The Rape Crisis Center to release information about me in the future, I will need to sign another written, time-limited release.

That releasing information about me could give another agency or person information about my location and would confirm that I have been receiving services from The Rape Crisis Center.

That The Rape Crisis Center and I may not be able to control what happens to my information once it has been released to the above person or agency, and that the agency or person getting my information may be required by law or practice to share it with others.

This release expires on _____

Date

Time

Expiration should meet the needs of the victim, which is typically no more than 15-30 days, but may be shorter or longer.

I understand that this release is valid when I sign it and that I may withdraw my consent to this release at any time either orally or in writing.

Signed: _____ Date: _____ Time: _____ Witness: _____

I, _____, understand the purpose of this release.

Date: _____ Witness: _____

ATTACHMENT B

7-2001

Created for adaptation by Julie Kuncz Field, J.D. and NNEDV.

Lea Primero: Antes de que usted decida en si o no dejar compartir con The Rape Crisis Center algo confidencial con otra agencia o persona, un abogado de The Rape Crisis Center discutirá con usted todos los alternativos y cualquier riesgos y ventaja potenciales que podrían resultar por compartir su información confidencial. Si usted decide que desea manifestar The Rape Crisis Center algo de su información confidencial, usted puede utilizar esta forma para elegir lo qué se comparte, cómo se comparte, con quien, y por cuánto tiempo.



Entiendo que The Rape Crisis Center tiene una obligación de guardar mi información personal, identificando la información, y mis expedientes confidenciales. También entiendo que puedo elegir permitir que el The Rape Crisis Center puede compartir algo de mi información personal a ciertos individuos o agencias.

Yo, _____, autorizo The Rape Crisis Center que comparte la siguiente información específica con:

A quien deseo que tenga mi información:	Nombre: _____ Oficina específica o Agencia: _____ Numero de Teléfono: _____
--	---

La información puede ser compartido:

- ☐ en persona
 ☐ por teléfono
 ☐ por fax
 ☐ por correo
 ☐ por correo electrónico
☐ Entiendo que el correo electrónico (E-mail) no es confidencial y puede ser interceptado y leído por la gente.

Qué información sobre mí será compartida:	(liste tan específicamente como sea posible, por ejemplo: nombre, fechas del servicio, cualquier documentos).
Porqué deseo compartir mi información: (propósito)	(liste tan específicamente como sea posible, por ejemplo: para recibir ventajas).

Por favor Note: hay un riesgo que un lanzamiento limitado de la información puede potencialmente abrir el acceso por otros a toda su información confidencial llevada a cabo The Rape Crisis Center.

Yo entiendo:

Que no tengo que firmar una forma del lanzamiento. No tengo que permitir The Rape Crisis Center que comparta mi información. La firma de una forma del lanzamiento es totalmente voluntaria. Que este lanzamiento está limitado a lo que escribo arriba. Si quisiera The Rape Crisis Center lanzar la información sobre mí en el futuro, necesitare firmar otro lanzamiento por tiempo-limitado por escrito.

Que lanzar la información sobre mí podría darle información de la agencia o de la persona sobre mi localización y confirmarla que ha estado recibiendo servicios de The Rape Crisis Center.

Que él The Rape Crisis Center y yo podremos controlar lo qué sucede con mi información una vez se ha lanzado a la persona o a la agencia antedicha, y que la agencia o la persona que obtenga mi información se puede requerir por la ley o la práctica de compartirla con otras.

La expiración debe resolver las necesidades de la víctima, que es típicamente no más de 15-30 días, pero puede ser más corta o más de largo.

Este lanzamiento se vence _____ Fecha _____ Hora _____

Entiendo que este lanzamiento es válido cuando lo firmo y puedo retirar mi consentimiento a este lanzamiento en cualquier momento u oral o en la escritura.

Fecha: _____
 Firmado: _____ Hora: _____ Testigo: _____

Reafirmación y Expiración: Si el tiempo adicional es necesario resolver el propósito de este lanzamiento, _____
 Fecha: _____ Hora: _____
 Firmado: _____ Testigo: _____

Attachment E
LETTER REGARDING SUPPLANTING



**CLARK COUNTY
OFFICE OF THE DISTRICT ATTORNEY**

Administration Division

STEVEN B. WOLFSON

District Attorney

200 Lewis Avenue • Las Vegas, NV 89101 • 702-671-2500 • Fax: 702-455-2294 • TTY and/or other relay services: 711

CHRISTOPHER LALLI
Assistant District Attorney

ROBERT DASKAS
Assistant District Attorney

BRIGID J. DUFFY
Director DA Juvenile

KAREN S. CLIFFE
Director DA Family Support

LISA LOGSDON
County Counsel

November 16, 2023

Aaron D. Ford
Nevada Attorney General
100 North Carson Street
Carson City, Nevada 89701

Dear General Ford:

The Clark County District Attorney certifies that any funds awarded through the Violence Against Women Act (VAWA) Grant Program will be used to supplement existing fund for program activities and will not replace (supplant) nonfederal funds that have been appropriated for the same purpose. The Clark County District Attorney understands that supplanting violations can result in a range of penalties, including suspension of future funds under this program, suspension and debarment from federal grants, recoupment of monies provided under this grant, and civil and/or criminal penalties.

Sincerely,

A handwritten signature in black ink, appearing to be "S. Wolfson", is written over the printed name and title.

Steven B. Wolfson
Clark County District Attorney

Attachment G

Insert your agency's confidentiality policy here. This policy must be VAWA-responsive. **Non-VAWA responsive confidentiality policies may prevent funding.**

Components of a VAWA-responsive policy: Personally identifying information must not be disclosed to any third party without specific written and informed consent from the victim. This identifying information includes: name, address, social security number, date of birth, driver's license number, passport number, student identification number- any information that is likely to disclose a victim's identity, regardless of whether the information is encoded, encrypted, hashed, or otherwise protected. Releases of information, signed by the victim, must include a description of exactly what information will be disclosed and to whom, purpose of disclosure, and timeframe of permission to disclose.

VAWA Section 3: Confidentiality Provision

“(A) In GENERAL. In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees and sub grantees under this title shall protect the confidentiality and privacy of persons receiving services.

(B) NONDISCLOSURE.—Subject to subparagraphs (C) and (D), grantees and sub grantees shall not — (i) disclose, reveal or release any personally identifying information or individual information collected in connection with services requested, utilized, or denied through grantees' and sub-grantees' programs, regardless of whether the information has been encoded, encrypted, hashed or otherwise protected; or (ii) disclose, reveal, or release individual client information without the informed, written, reasonably time-limited consent of the person (or in the case of an non-emancipated minor, the minor and the parent or guardian or in the case of legal incapacity, a court-appointed guardian) about whom information is sought, whether for this program or any other Federal, State, Tribal or territorial grant program, except that consent for release may not be given by the abuser of the minor, incapacitated person, or the abuser of the other parent of the minor.

(C) RELEASE. – If release of information described in subparagraph (B) is compelled by statutory or court mandate —(i) grantees and sub grantees shall make reasonable attempts to provide notice to victims affected by the disclosure of information; and (ii) grantees and sub grantees shall take steps necessary to protect the privacy and safety of the persons affected by the release of the information.

(D) INFORMATION SHARING.—(i) Grantees and sub grantees may share— (I) non-personally identifying data in the aggregate regarding services to their clients and non-personally identifying demographic information in order to comply with Federal, State, tribal, or territorial reporting, evaluation, or data collection requirements; (II) court-generated information and law-enforcement generated information contained in secure, governmental registries for protection order enforcement purposes; and (III) law enforcement- and prosecution-generated information necessary for law enforcement and prosecution purposes (ii) In no circumstances may (I) an adult, youth, or child victim of domestic violence, dating violence, sexual assault, or stalking be required to provide a consent to release his or her personally identifying information as a condition of eligibility for the services provided by the grantee or sub grantee; (II) any personally identifying information be shared in order to comply with Federal, Tribal, or State reporting, evaluation, or data collection requirements, whether for this program or any other Federal, Tribal or State grant program .”

SUBJECT: DISCLOSURE OF CONFIDENTIAL INFORMATION

PURPOSE: The operations of the Office of the Clark County District Attorney Victim Witness Assistance Center involve the processing of a wide variety of confidential information regarding criminal investigations. It is essential that the utmost discretion be exercised by all employees and volunteers working in the Department

DISCLOSURE OF CONFIDENTIAL INFORMATION:

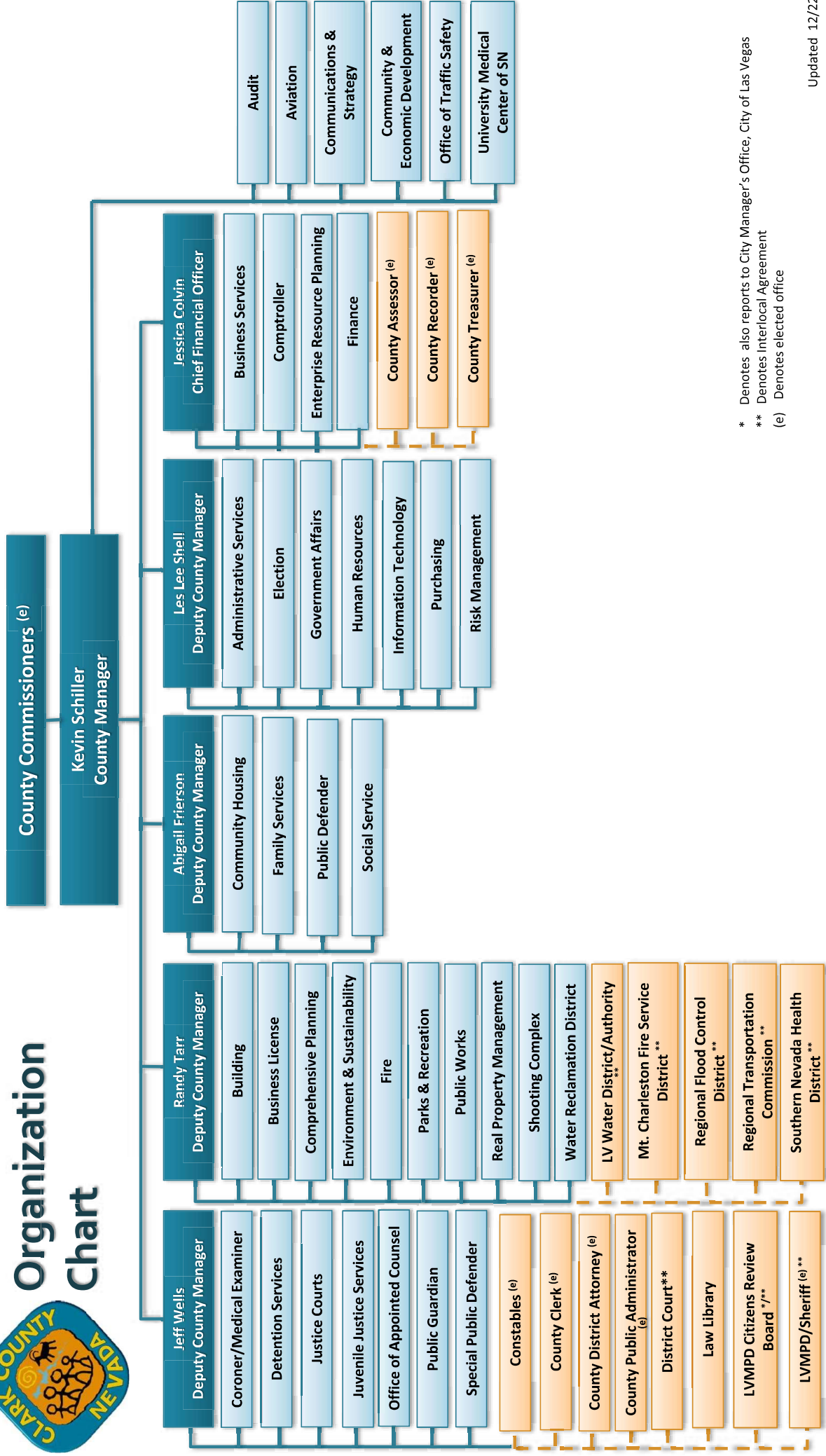
1. Unless otherwise allowed by this Policy, confidential information shall not be disclosed to a non-employee.
2. Confidential information may be disclosed to a non-employee:
 - a. By written interagency working agreement.
 - b. By approval from the deputy handling the case pursuant to court order, discovery rules or other authorization.
 - c. By permission of the District Attorney, Assistant District Attorney, Director, Assistant Director, or County Counsel.
3. Any breach of confidentiality, regardless of the circumstances, shall be reported immediately of its discovery to:
 - a. the Division of Child of Family Services; and
 - b. the District Attorney, Assistant District Attorney, Director, Assistant Director, or County Counsel.
4. Any employee found to have violated this Policy may be subject to disciplinary action

Attachment H

1. **For all applicants:** Insert your organizational chart/table here; AND
2. **For non-profit organizations:** Insert your list of Board of Directors, including all of the following information: 1) contact information 2) indicate the business/financial/community sector that each member represents, 3) dates of their term on the board; AND
3. **For non-profit organizations:** Please provide the contact information and total annual compensation of the five most highly compensated executives, as the OAG may need to report the names and total compensation of the five most highly compensated executives of sub-grantees through the Federal Funding Accountability and Transparency Act (FFATA) Sub-Award Reporting System.



Organization Chart



* Denotes also reports to City Manager's Office, City of Las Vegas
 ** Denotes Interlocal Agreement
 (e) Denotes elected office

Updated 12/22

Attachment H - Clark County District Attorney - Cost Allocation											
	Funding Source										
		STOP		VOCA		FVPSA		CLARK COUNTY		TOTAL	
Personnel	Cost	%	\$	%	\$	%	\$	%	\$	%	\$
Victim Advocate	46,460	100	46,460		0		0	0	\$0	100	0
Part Time Process Server	17,680	100	17,680		0		0	0	\$0	100	0
Clark County Attorney	19,768	0	\$0		0		0	100	19,768	100	19,768
Sub-Total Personnel	83,908	N/A	\$64,140	N/A	0	N/A	0	N/A	19,768	N/A	19,768
Fringe Benefits	Cost	%	\$	%	\$	%	\$	%	\$	%	\$
Victim Advocate	\$27,439	100	\$27,439		0		0	0	\$0	100	\$0
Part Time Process Server	\$480	100	\$480		0		0	0	\$0	100	\$0
Clark County Attorney	\$11,268	0	0		0		0	100	\$11,268	100	\$11,268
Sub-Total Operating	\$39,187	N/A	\$27,919	N/A	0	N/A	0	N/A	\$31,036	N/A	\$31,036
Travel	Cost	%	\$	%	\$	%	\$	%	\$	%	\$
Miscellaneous Training	\$1,048	100	\$1,048		\$0		\$0	0	\$0	100	\$0
Sub-Total Travel	\$1,048	N/A	\$1,048	N/A	0	N/A	0	0	\$0	N/A	\$0
TOTAL	\$124,143	N/A	\$93,107	N/A	0	N/A	0	N/A	31,036	N/A	\$31,036

Applicant Name: Clark County District Attorney

Federal

BUDGET NARRATIVE - CY24

Total Personnel & Fringe Costs					Total:	\$92,059.00
List Staff, positions, percent of time to be spent on the project, rate of pay, and total cost to this grant.						
Name of Employee (if known, otherwise state new position) and Position	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested	
Victim Advocate	\$ 46,460.00		59%	100%	12	\$73,899.00
Provides case status, victim notification, restitution process and related information to victims and witnesses in a variety of criminal situations; monitors cases through the judicial system. Refers victim to crime victim resources for assistance.						
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested	
Ruellen Castro	\$ 17,680.00		3%	100%	12	\$18,160.00
Answer victim calls and direct to proper advocate, office, and/or victim resources. Provide case information and refer to correct resource. Assist with transportation setup of victims.						
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested	
						\$0.00
*Insert brief details to describe position duties as it relates to the funding.						
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested	
						\$0.00
*Insert brief details to describe position duties as it relates to the funding.						
Total Fringe Cost		\$27,919.00	Total Personnel (w/o Fringe):		\$64,140.00	

Travel/Training					Total:	\$1,048.00
Identify staff who will travel, the purpose, frequency, and projected costs. Utilize GSA rates for per diem and lodging (go to www.gsa.gov) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification.						
	# of Mile	Mileage Rate				
Mileage		0.655				\$0.00
Justification of need. Mileage is only reimbursable if it is for client transport, client assistance, or if it is a justifiable expense to provide client services. It is not reimbursable from employees home to/from workstation.						
Out-of-State Travel						\$0.00
Title of Trip & Destination such as CDC Conference: San Diego, CA		Cost	# of Trips	# of Days	# of Staff	
Registration fee						\$0.00
Airfare: Cost per trip (origin & destination) x # of trips x # of staff						\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff						\$0.00

*Revise as needed to include multiple trips.

Per Diem: \$ per day per GSA rate for area x # of trips x # of staff		\$0.00
Lodging: \$ per day +\$ tax = total \$ x # of trips x #of nights x # of staff		\$0.00
Ground Transportation: \$ per r/trip x # of trips x # of staff		\$0.00
Parking: \$ per day x # of trips x # of days x # of staff		\$0.00
Justification:		
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allowabilities.		
If traveling to more than 1 out-of-state destination, copy section above, revise formula in Cell F33 and complete for each trip		
In-State Travel		\$1,048.00
<u>Origin & Destination</u>	<u>Cost</u>	<u># of Trips</u> <u># of Days</u> <u># of Staff</u>
Registration fee	524	2
Airfare: cost per trip (origin & designation) x # of trips x # of staff		\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff		\$0.00
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff		\$0.00
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff		\$0.00
Ground Transportation/Motor Pool:(\$ car/day + ## miles/day x \$ rate per mile) x # trips x # days		\$0.00
Parking: \$ per day x # of trips x # of days x # of staff		\$0.00
Justification:		
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allowabilities.		
If traveling to more than 1 in-state destination, copy section above, revise formula in F48 and complete for each trip.		

Operating	Total:	\$0.00
List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated agency expenses should be included.		
Rent Office: \$ per month x 12 months x allocation %	\$0.00	
Communications Internet/phone Office: \$ per month x 12 months x allocation %	\$0.00	
Utilities Office: \$ per month x 12 months x allocation %	\$0.00	
Supplies Office: \$ per month x 12 months x allocation %	\$0.00	
Janitorial Office: \$ per month x 12 months x allocation %	\$0.00	
Printing services/rental: \$ per month x 12 months x allocation %	\$0.00	
Insurance	\$0.00	
Audit	\$0.00	
Client software (specify, eg: Apricot, Datafirm, etc.)	\$0.00	
Justification:		
Provide narrative to explain specifics of line items. Example: Utilities include power, water, sewer, etc.		

Equipment	Total:	\$0.00
List Equipment purchase costing \$5,000 or more, and justify these expenditures. Also list any computers, cellular phones, iPods, iPads, Tablets, etc. to be purchased regardless of cost. All other equipment costing less than \$5,000 should be listed under Operating.		
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Provide narrative to explain specifics of line items.		

Contracts/Consultants	Total:	\$0.00
Agency must be able to provide documentation for full and open competition, develop clear descriptions of duties provided by Contractor, ensure maximum open and free competition, and verify that Contractor is not on the suspended and debarred list (SAM.gov). Agencies must follow their procurement policies to enter into contracts. Copies of contracts are required.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		
Justification: Define if sole source method and explain how it is sole source; explain contract approval.		
Method of Accountability:		
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		
Justification: Define if sole source method and explain how it is sole source; explain contract approval.		
Method of Accountability:		
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		

*Revise this formula as needed to include each Contractor listed

Justification: Define if sole source method and explain how it is sole source; explain contract approval.

Method of Accountability:
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.

*Add additional Contractor/Subrecipients here with justification or delete this row.

Other	Total:	\$0.00
Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as emergency client services, client transportation, etc. Stipends or scholarships that are a component of a larger project or program may be included ehre, but require special justification.		
Counseling/support group supplies	\$0.00	
Brochures/flyers/educational information for program	\$0.00	
Public Presentations	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
Justification: Include narrative to explain generalized line items such as emergency client services (motel nights, etc.), transportation (gas card, bus pass, etc.) , supplies, etc.		

TOTAL DIRECT CHARGES	\$93,107.00
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Indirect	Total:	\$0.00
Indirect costs represent the expenses of doing business that are not readily identified with a particular grant, contract, project function, or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. This will be a percentage that cannot exceed 10% of Modified Total Direct Cost. Note that the formula in Cell F124 will automatically calculate 10%. Applicants may override this formula only if requesting a LOWER rate or providing a copy of their current Federally Approved Indirect Cost Rate Letter. If you have a federallyapproved indirect rate, please adjust the formula in F145)		
Identify Indirect Expenses (List what items Indirect will be allocated to)	\$	-
TOTAL BUDGET	Total:	\$93,107.00

Applicant Name:

Non-Federal (Match)

BUDGET NARRATIVE - SFY24

Total Personnel & Fringe Costs				Total:	\$31,036.00
List Staff, positions, percent of time to be spent on the project, rate of pay, and total cost to this grant.					
Name of Employee (if known, otherwise state new position) and Position	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested
Clark County Attorney	\$ 19,768.00	57%	100%	12	\$31,036.00
Prosecutes Sexual Assault Cases					
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested
					\$0.00
*Insert brief details to describe position duties as it relates to the funding.					
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested
					\$0.00
*Insert brief details to describe position duties as it relates to the funding.					
Name of Employee (if known, otherwise state new position).	Annual Salary	Fringe Rate	% of Time	Months	Amount Requested
					\$0.00
*Insert brief details to describe position duties as it relates to the funding.					
Total Fringe Cost		\$11,268.00	Total Personnel (w/o Fringe):		\$19,768.00

Travel/Training					Total:	\$0.00
Identify staff who will travel, the purpose, frequency, and projected costs. Utilize GSA rates for per diem and lodging (go to www.gsa.gov) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification.						
		# of Mile	Mileage Rate			
Mileage			0.655			
Justification of need. Mileage is only reimbursable if it is for client transport, client assistance, or if it is a justifiable expense to provide client services. It is not reimbursable from employees home to/from workstation.						\$0.00
Out-of-State Travel						\$0.00
Title of Trip & Destination such as CDC Conference: San Diego, CA		Cost	# of Trips	# of Days	# of Staff	
Registration fee						\$0.00
Airfare: Cost per trip (origin & destination) x # of trips x # of staff						\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff						\$0.00

*Revise as needed to include multiple trips.

Per Diem: \$ per day per GSA rate for area x # of trips x # of staff	\$0.00
Lodging: \$ per day +\$ tax = total \$ x # of trips x #of nights x # of staff	\$0.00
Ground Transportation: \$ per r/trip x # of trips x # of staff	\$0.00
Parking: \$ per day x # of trips x # of days x # of staff	\$0.00
Justification:	
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allowabilities.	
If traveling to more than 1 out-of-state destination, copy section above, revise formula in Cell F33 and complete for each trip	
In-State Travel	
	\$0.00
<u>Origin & Destination</u>	<u>Cost</u> <u># of Trips</u> <u># of Days</u> <u># of Staff</u>
Registration fee	\$0.00
Airfare: cost per trip (origin & designation) x # of trips x # of staff	\$0.00
Baggage fee: \$ amount per person x # of trips x # of staff	\$0.00
Per Diem: \$ per day per GSA rate for area x # of trips x # of staff	\$0.00
Lodging: \$ per day + \$ tax = total \$ x # of trips x # of nights x # of staff	\$0.00
Ground Transportation/Motor Pool:(\$ car/day + ## miles/day x \$ rate per mile) x # trips x # days	\$0.00
Parking: \$ per day x # of trips x # of days x # of staff	\$0.00
Justification:	
Who will be traveling, when and why, tie into program objective(s) or indicate required by funder. Travel/Training must be related to grant objectives and allowabilities.	
If traveling to more than 1 in-state destination, copy section above, revise formula in F48 and complete for each trip.	

Supplies/Operating	Total:	\$0.00
List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated agency expenses should be included.		
Rent Office: \$ per month x 12 months x allocation %	\$0.00	
Communications Internet/phone Office: \$ per month x 12 months x allocation %	\$0.00	
Utilities Office: \$ per month x 12 months x allocation %	\$0.00	
Supplies Office: \$ per month x 12 months x allocation %	\$0.00	
Janitorial Office: \$ per month x 12 months x allocation %	\$0.00	
Printing services/rental: \$ per month x 12 months x allocation %	\$0.00	
Insurance	\$0.00	
Audit	\$0.00	
Client software (specify, eg: Apricot, Datafirm, etc.)	\$0.00	
Justification:		
Provide narrative to explain specifics of line items. Example: Utilities include power, water, sewer, etc.		

Equipment	Total:	\$0.00
List Equipment purchase costing \$5,000 or more, and justify these expenditures. Also list any computers, cellular phones, iPods, iPads, Tablets, etc. to be purchased regardless of cost. All other equipment costing less than \$5,000 should be listed under Operating.		
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Describe equipment	\$0.00	
Provide narrative to explain specifics of line items.		

Contractual	Total:	\$0.00
Agency must be able to provide documentation for full and open competition, develop clear descriptions of duties provided by Contractor, ensure maximum open and free competition, and verify that Contractor is not on the suspended and debarred list (SAM.gov). Agencies must follow their procurement policies to enter into contracts. Copies of contracts are required.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		
Justification: Define if sole source method and explain how it is sole source; explain contract approval.		
Method of Accountability:		
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		
Justification: Define if sole source method and explain how it is sole source; explain contract approval.		
Method of Accountability:		
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.		
Name of Contractor/Subrecipient:		\$0.00
Method of Selection: Explain, i.e. sole source or competitive bid		
Period of Performance: July 1, 2023 - July 31, 2024		
Scope of Work: Briefly Define Scope of Work		

*Revise this formula as needed to include each Contractor listed

Justification: Define if sole source method and explain how it is sole source; explain contract approval.

Method of Accountability:
Define - Describe how the progress and performance of the consultant will be monitored. Identify who is responsible for supervising the consultant's work.

*Add additional Contractor/Subrecipients here with justification or delete this row.

Other	Total:	\$0.00
Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as emergency client services, client transportation, etc. Stipends or scholarships that are a component of a larger project or program may be included here, but require special justification.		
Counseling/support group supplies	\$0.00	
Brochures/flyers/educational information for program	\$0.00	
Public Presentations	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
	\$0.00	
Justification: Include narrative to explain generalized line items such as emergency client services (motel nights, etc.), transportation (gas card, bus pass, etc.) , supplies, etc.		

TOTAL DIRECT CHARGES	\$31,036.00
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Indirect	Total:	\$0.00
Indirect costs represent the expenses of doing business that are not readily identified with a particular grant, contract, project function, or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. This will be a percentage that cannot exceed 10% of Modified Total Direct Cost. Note that the formula in Cell F124 will automatically calculate 10%. Applicants may override this formula only if requesting a LOWER rate or providing a copy of their current Federally Approved Indirect Cost Rate Letter. If you have a federallyapproved indirect rate, please adjust the formula in F145)		
Identify Indirect Expenses (List what items Indirect will be allocated to)		
	\$	-
TOTAL BUDGET	Total:	\$31,036.00

Budget Summary

<u>Category</u>	<u>Total Federal Costs</u>	<u>Detailed Non-Federal Costs</u>	<u>Total Project Costs</u>
1. Personnel	\$ 64,140.00	\$ 19,768.00	\$ 83,908.00
2. Fringe	\$ 27,919.00	\$ 11,268.00	\$ 39,187.00
3. Travel	\$ 1,048.00	\$ -	\$ 1,048.00
4. Supplies/Operating	\$ -	\$ -	\$ -
5. Equipment	\$ -	\$ -	\$ -
6. Consultants/Contracts	\$ -	\$ -	\$ -
7. Other	\$ -	\$ -	\$ -
8. Indirect	\$ -	\$ -	\$ -
Total Direct	\$ 93,107.00	\$ 31,036.00	\$ 124,143.00
Total Indirect	\$ -	\$ -	\$ -
Sum Total	\$ 93,107.00	\$ 31,036.00	\$ 124,143.00

AGENCY SELF-ASSESSMENT

This questionnaire is used for monitoring fiscal and program compliance requirements as well as determining risk of our subrecipients. Please complete and include in your STOP/SASP application packet.

Section A: GENERAL INFORMATION			
Organization Name	Clark County		
Fiscal Point of Contact	Name: Michael Li		Title: Senior Management Analyst
	Address: 200 Lewis Avenue Las Vegas NV, 89101		
	Phone: 702-671-0988	Email: Michael.li@clarkcountyda.com	Fax: 702-455-2294
Program Point of Contact	Name: Michael Li		Title: Senior Management Analyst
	Address: 200 Lewis Avenue Las Vegas NV, 89101		
	Phone: 702-671-0988	Email: Michael.li@clarkcountyda.com	Fax: 702-455-2294
Organization Info	DUNS #: 117486331	EIN #: 88-6000028	URL: clarkcounty.nv.gov
	State Vendor #:	# of Employees: 15,000	
	Registered with SAM.gov? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Expiration Date: <u>02/15/2024</u>		
	Is your organization or its principles presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from transactions by any federal department or agency? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
	(If yes, please skip the rest of questionnaire, sign and return)		
1. Type of Organization (check all that apply):			
<input type="checkbox"/> University <input type="checkbox"/> Foundation <input type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For-Profit <input type="checkbox"/> Government Entity – City <input type="checkbox"/> Government Entity – District <input checked="" type="checkbox"/> Government Entity – County <input type="checkbox"/> Government Entity – State <input type="checkbox"/> Other: _____			
2. Organizational Fiscal Year (Month and Year): July 2023			
3. Name of Cognizant Federal Agency (if applicable):			Approved Indirect Rate:
4. Approximate total organization-wide annual operating budget:			
	Previous Fiscal Year	Current Fiscal Year	
Federal Funds	\$34,654,721	\$31,291,846	
Non-Federal Funds	\$1,822,808,722	\$1,727,685,308	
5. Did your organization expend more than \$750,000 in Federal funds combined? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
6. Has your organization annual financial statements been audited by an independent audit Firm? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

7. Has your organization received funds for activities which are similar to, or the same as the currently proposed subgrant award? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
8. Has your organization managed federal or state funds in the last 5 years? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
9. Organization Director has been in place for:			
<input type="checkbox"/> Less than 1 year	<input type="checkbox"/> 1-2 years	<input type="checkbox"/> 3-5 years	<input checked="" type="checkbox"/> 5+ years
10. Fiscal key personnel have been in place for:			
<input type="checkbox"/> Less than 1 year	<input type="checkbox"/> 1-2 years	<input type="checkbox"/> 3-5 years	<input checked="" type="checkbox"/> 5+ years
11. Program key personnel have been in place for:			
<input type="checkbox"/> Less than 1 year	<input type="checkbox"/> 1-2 years	<input type="checkbox"/> 3-5 years	<input checked="" type="checkbox"/> 5+ years
12. Certify that checked policies and procedures exist within your organization:			
<input checked="" type="checkbox"/> Personnel (including Time and Attendance, Pay Rate & Benefits, Time and Effort, Discipline and Conflict of Interest) <input checked="" type="checkbox"/> Travel <input checked="" type="checkbox"/> Financial Management (including Purchasing, Receivables, and Payables) <input checked="" type="checkbox"/> Internal Controls <input checked="" type="checkbox"/> Equipment & Inventory <input checked="" type="checkbox"/> All National Policy Regulations (i.e., Civil Rights, Disability etc.)			
Section B: BUDGET FORMATION & ADMINISTRATION			
1. Does the organization have an operating budget for each of its grants? (UG §200.302) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
2. Who are the people responsible for developing and reviewing the budget(s) for your organization?			
Names and titles: Jessica Colvin- Chief Financial Officer , Anna Danchick-Comptroller			
3. Does the organization have fiscal controls that result in (UG §200.303):			
a. Control of expenditures within the approved operating budget? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO b. Management review and approval prior to issuing budget amendments or incurring obligations or expenditures that deviate from the operating budget? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
4. Is there timely, periodic financial reporting to management that permits (UG §200.308):			
a. Comparison of actual expenditures with the budget for the same period? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO b. Comparison of revenue estimates with actual revenue (including program income, if applicable) for the same period? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
5. Is the responsibility for maintain budget control established at all appropriate levels? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
6. What steps are taken if projected revenues were insufficient to cover actual expenditures?			
Describe: Reduction of expenditures			
Section C: INTERNAL CONTROLS			
1. Describe your organization-wide segregation of responsibilities in context of checks and balances and advise where they reside within your policies or procedures regarding segregation of responsibilities:			
2. Are specific officials designated to approve payrolls and financial transactions at various dollar levels? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
3. Do the procedures for cash receipts and disbursements include the following safeguards?			
a. Receipts are promptly logged, restrictively endorsed and deposited in an insured bank account. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO b. Bank statements are promptly reconciled to the accounting records and are reconciled by someone other than the individuals handling cash, disbursements and maintaining accounting records. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO c. All disbursements (except petty cash and electronic disbursements) are made with pre-numbered checks. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

- d. Supporting documents (e.g., purchase orders, invoices, etc.) accompany the checks submitted for signature, and are marked paid or otherwise prominently noted after payments are made.

☒ YES ☐ NO

- e. Checks drawn to "cash" and advance signing of checks are prohibited. ☒ YES ☐ NO

- f. Multiple signatures are required on checks. ☒ YES ☐ NO

4. Are individuals of trust required to take leave and delegate their duties to others while on leave?

☐ YES ☒ NO

Section D: ACCOUNTING

1. Does the organization have written accounting policies and procedures to assure uniform practice in the following areas?

- | | | |
|---|---|-----------------------------|
| a. Procurement | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. Contract Administration | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| c. Payroll | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| d. Records to justify costs of salaries and wages | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| e. Inventory | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| f. Vendor payments | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| g. Federal draws | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| h. Grants budgeting and accounting | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| i. Cash management | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| j. Audit resolution | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| k. Cash receipts | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| l. Disbursements | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| m. Records retention | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

2. Does the organization use the same policies and procedures for accounting for, and expending federal funds as it does for its organization funds? ☒ YES ☐ NO

3. Are all appropriate accounting staff trained on current federal policies, procedures and instructions on accounting for, and expending, federal funds? ☒ YES ☐ NO

4. What accounting system does your organization use (e.g. QuickBooks, Peachtree, Socrates Media or custom)?

Describe:SAP

How long has it been in use:17

5. Which accounting basis is used by your organization? ☐ Cash basis ☒ Accrual basis ☐ Modified Accrual

6. Are grant funds accounting for separately in your financial management system? ☒ YES ☐ NO

Describe. Different module

7. Does your organization use a chart of accounts and accounting manual? ☒ YES ☐ NO

8. For each grant, does the accounting system provide the following information?

- | | | |
|-------------------------|---|-----------------------------|
| a. Authorizations | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. Obligations | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| c. Funds received | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| d. Program income | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| e. Subawards | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| f. Outlays | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| g. Unobligated balances | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

9. Are obligations records by:

- | | | |
|-------------------|---|-----------------------------|
| a. Funding source | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. Object codes | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO |

10. Are accounting records supported by source documentation (e.g. canceled checks, paid bills, payrolls, contract and subaward documents, etc.) ☒ YES ☐ NO

11. Are purchasing and payment functions separate? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
12. Do accounting staff review the following items prior to entry into the system:		
a. Authorizations	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Purchase Orders	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
c. Payments	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
13. Are there controls to preclude:		
a. Over-obligation	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Under-or overstatement of unliquidated obligations	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
c. Duplicate payments	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
d. Inappropriate charges to grants	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
14. Does the organization have effective control over, and accountability for, all funds, property and other assets? The organization must adequately safeguard all assets and assure they are used solely for authorized purposes (UG §200.302) <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
15. Does the organization reconcile bank statements (at least) monthly? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
16. Are vouchers or supporting documents identified by grant, number, date and expense classifications? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
17. Are checks submitted for signature accompanied by supporting documents? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
18. Are invoices and vouchers approved in advance by authorized officials, prior to payment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
19. For credit cards:		
a. Does the bank provide the subrecipient with a list of credit-card users?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. Are the balances of credit cards capped?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
c. Are credit card purchases used for business purposes only?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Organization Authorized Representative

By signing below, the authorized representative certifies, all information submitted on this form is accurate and complete.

Signature Michael Li Date 11/16/2023

Printed Name & Title Michael Li Sr Management Analyst

For OAG Use Only

Notes:

Reviewer Name, title, date

Application Content Checklist

Please place an 'x' next to each item included in your application packet. **This Checklist must be submitted with your application packet to assist in application review.**

- x Title Page
- x Purpose Area Page
- x Applicant Summary Letter
- x Project Narrative (Parts A through I)
- x STOP Certification
- x Confidentiality Acknowledgement
- x Standard Certifications
- x Standard Assurances
- x Nevada Attorney General's Office Acknowledgement Form
- x Certification of Non-Discrimination
- x Letter of Collaboration (for law enforcement, prosecution or court applicants)
- x Letter regarding supplanting
- ☐ Current IRS determination letter of non-profit status 501(c)(3), if applicable
- x VAWA-informed and victim-centered confidentiality policy
- x Organizational Chart
- ☐ List of Board of Directors with contact information, if applicable
- ☐ Executive compensation disclosure, if applicable
- x Cost Allocation Plan
- ☒ Budget Form w/Justification
- ☐ Certificates of Liability Insurance, if applicable;
- ☐ Federally negotiated indirect cost rate agreement, if applicable.
- ☐ Letter of Commitment from service venue if services are to be delivered at a location other than the applicant's agency (if applicable).
- Memorandum of Understanding, if applicable
- x Agency self-assessment

*Reminder: Please remember to include this completed checklist with your application. This Application Content Checklist should be the last page of your application.