



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Quarterly Administrative Fee & Usage Report

The contractor shall submit a "Quarterly Administrative Fee & Usage Report" to the Department of Administration, Purchasing Division (Purchasing) for all purchases made under the contract **for which payment has been received by the contractor during the reporting quarter**. The contractor must submit the "Quarterly Administrative Fee & Usage Report" to Purchasing no later than the 45th calendar day of the quarter following the "Reporting Quarter". The contractor shall complete the "Quarterly Administrative Fee & Usage Report" in accordance with the definitions and requirements stated below. Please contact the Nevada State Purchasing Division's Central Contract Unit at NVQltyReport@admin.nv.gov or (775) 684-0170 if you have specific questions about your contract area, the submission of this report, or payment of the administrative fee.

Admin Fee Report Tab

| | |
|----------------------------------|--|
| Contractor Name | Contractor name as it appears on the contract. |
| Statewide Contract Number | Statewide contract number as listed on the first page of your contract or participating addendum with the State of Nevada. |
| Date Report Submitted | Date Administrative Fee Report is submitted. |
| Report Contact Name | Name of the person completing the report on behalf of the contractor. |
| Contact Phone Number | Phone number for person completing the report. |
| Contact Email Address | Email address for the person completing the report. |

Administrative Fee Payment Calculation - The total amount in payments received (minus returns & credits) from state agency(ies), political subdivision(s), universities, and governmental entities in other states, the Overall Total Payments Received, and the Total Administrative Fee Payment (calculated as 1% of the Overall Total Payments Received) for the Reporting Quarter.

In accordance with NRS 353.1467, all payments in excess of \$10,000 must be made by electronic transfer of money (EFT). To establish an EFT Account, you may contact the Central Contract Unit at (775) 684-0170.

If no payments were received during the Reporting Quarter, check the box below: Complete section if applicable.

| | |
|--------------------------|---|
| Reporting Quarter | Quarter for which the contractor is reporting purchases for which payment has been received. This must be in format QX, where X is the Quarter number as follows: |
| | Q1: January 1 - March 31 Q3: July 1 - September 30 Q2: April 1 - June 30 Q4: October 1 - December 31 |

Signature of Responsible Party for Report Content: The signature and title of the person completing the report on behalf of the contractor and the date the report was completed.

Usage Report Tab

The contractor may provide additional usage data at its discretion in a format already available to the contractor on condition that the data element information as contained on the usage report tab for the Reporting Quarter is included.

Nevada Purchasing Division Statewide Contract Quarterly Administrative Fee Report

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|--|--|--|
| Contractor Name: | | |
| Statewide Contract Number: | | |
| Date Report Submitted: | | |
| Administrative Fee Payment Calculation: (If no payments received during Reporting Quarter, Skip to next section) | | |
| Total Payments Received (minus returns & credits) from Nevada State Agencies during the Reporting Quarter: | | |
| Total Payments Received (minus returns & credits) from Nevada Political Subdivisions (cities, counties, etc.) during the Reporting Quarter: | | |
| Total Payments Received (minus returns & credits) from Nevada Universities (Higher Education) during the Reporting Quarter: | | |
| Total Payments Received (minus returns & credits) from Governmental Entities in Other States during the Reporting Quarter: | | |
| Overall Total Payments Received (minus returns & credits) during the Reporting Quarter: | | |
| <i>1% Administrative Fee (Multiply Overall Total Payments by 1% to determine Total Administrative Fee Payment)</i> | | |
| Total Administrative Fee Payment for the Reporting Quarter: | | |
| If no payments were received during the Reporting Quarter, check the box below: | | |
| <input type="checkbox"/> No payments were received this calendar quarter for any purchases on the contract identified above. | | |
| Report Contact Name: | | |
| Contact Phone Number: | | |
| Contact Email Address: | | |
| Reporting Quarter (check one): | | |
| <input type="checkbox"/> January 1 – March 31 | | <input type="checkbox"/> April 1 – June 30 |
| <input type="checkbox"/> July 1 – September 30 | | <input type="checkbox"/> October 1 – December 31 |
| Submit this report to the Division of Purchasing (Purchasing) using one of the methods below: | | |
| 1) Mail: Department of Administration, Purchasing Division 515 E. Musser Street, Suite 300, Carson City, NV 89701 2) Email: NVQtyReport@admin.nv.gov | | |
| Indicate below the method of payment used for submitting the Total Administrative Fee Payment for the Reporting Quarter and date of payment submission (EFT is recommended for all payments): | | |
| Method of Payment Used: | | |
| <input type="checkbox"/> EFT (required for payments \$10,000>) | | |
| <input type="checkbox"/> Company check | | |
| Date of Payment Submission: | | |
| <input type="checkbox"/> The Quarterly Usage Report has been completed will be submitted along with this form. | | |
| Signature of Responsible Party for Report Content: | | |
| Signature: | | |
| Title: | | Date: |