DATE: August 28, 2020  
TO: 911 Emergency Response Advisory Committee  
FROM: Tracy Moore, Sergeant  
Telephone: (775) 348-0285 Email: tmoore@washoeschools.net  
THROUGH: Jason Trevino, Chief of Police  
Telephone: (775) 348-0285 Email: jtrevino@washoeschools.net  
SUBJECT: REQUEST FOR REIMBURSEMENT FOR Body Worn Camera mounts $146.10  
[For possible action] – A review, discussion and possible action to approve reimbursement to the Washoe County School District School Police for purchase of four (4) rapid lock molle mounts $146.10. Total request not to exceed $146.10.

SUMMARY
The 79th Nevada Legislature passed Senate Bill 176 (SB 176), which requires uniformed peace officers employed by a law enforcement agency and who routinely interact with the public to wear a body worn camera device effective July 1, 2018. SB 176 expanded the permissible use of the county’s 911-telephone line surcharge fund to include the purchase and maintenance of body worn cameras.

The School Police Department through the Washoe County School District continues to operate the Body Worn Camera (BWC) and is requesting the Washoe County 911 Emergency Response Advisory Committee approve reimbursement to the School Police Department for purchase of 4 new body camera mounts.

NRS APPLICABLE:
NRS 244.7643 and NRS 244A.7645 Provides approval of costs associated to use of the county’s 911-telephone line surcharge fund to purchase and maintain body worn cameras.

STAKEHOLDER REVIEW(s)
Stakeholders are the Washoe County School District, Police Department.

PREVIOUS ACTION & BACKGROUND
On January 16, 2018, the BCC adopted the policy of the Use of 911 Surcharge Funds for the Body Camera Mandate set forth in Nevada Senate Bill 176.

On January 18, 2018, the Washoe County 911 Emergency Response Advisory Committee adopted the Five-Year Master Plan Update, prepared by the Galena Group Incorporated.

On February 20, 2018, the BCC adopted the Washoe County Regional 911 Emergency Response Advisory Committee Five Year Master Plan Update, prepared by the Galena Group Incorporated,
as recommended by the 911 Emergency Response Advisory Committee.

FISCAL IMPACT
The Enhanced 911 Fund is a special revenue fund, which receives revenue pursuant to NRS 244A.7643 in the form of telephone surcharges collected to support the emergency reporting system and the funding of body worn and fleet cameras for uniformed peace officers employed by a law enforcement agency who routinely interact with the public. Budget authority exists within the E911 Fund to reimburse the Washoe County School District for the expense.

The Washoe County School District has paid for and received equipment and services identified in this report and is requesting the Washoe County 911 Emergency Response Advisory Committee approve reimbursement to the agency up to $146.10 for the new camera mounts.

RECOMMENDATION
It is recommended that the E911 Emergency Response Advisory Committee approve the request for reimbursement to the Washoe County School District up to $146.10 for purchase of 4 new body camera mounts.

POSSIBLE MOTION
Move to approve the recommendation to the Board of County Commissioners to approve reimbursement to the Washoe County School District up to $146.10 for purchase of 4 new body camera mounts.
WASHOE COUNTY SCHOOL DISTRICT
Check Request Form

INSTRUCTIONS: Use this form for transactions which do not require a Purchase Order or may not be paid with a District Purchasing Card, such as:
   1. Conference/Seminar Registration (Requires approved leave request & registration form) (65802)
   2. Lodging (Attach confirmation from vendor) (65800)
   3. Dues, Fees, Permits (Attach invoice, statement or supporting documentation) (68100)
   4. Consultant Fees (For a one-time payment of non-district personnel only. Attach a completed Independent Contractor Agreement Form and W-9) (63200)
   5. Subscriptions (Non-library only - Attach completed subscription form) (66401)

FILL OUT THIS FORM COMPLETELY AND SUBMIT IT WITH THE SUPPORTING PAYMENT DOCUMENTATION TO:
Washoe County School District, Business Office, 425 East Ninth Street, Reno, NV 89512

PLEASE make any additional copies of registrations, etc. that are needed to accompany the check and submit with the Check Request.

IMPORTANT: It is IMPERATIVE that you PLAN AHEAD. The Business Office must strictly observe a schedule wherein requests received by Thursday 12:00 p.m. will have checks issued on the Friday of the following week. Requests received after this deadline will have checks issued the subsequent Friday. A Travel/Expense Claim Form may be used to request reimbursement for registration and lodging expenses paid by a personal check or credit card. This request will be processed only if funds are available.

Vendor Name: Axon
Vendor Address: PO Box 29661
               Department 2018
               Phoenix, AZ 85038-9661
School or Department: School Police
Vendor Number: 

Today's Date: 9/1/2020
Date Check Needed: Next Run
Disposition of Check (Choose One):
Mail check to addressed
Payee to pick up
School or Department to pick up
District Mail to: 
Other Mail to: 

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AMOUNT
$146.10

Check Amount $146.10

DESCRIPTION OF PAYMENT:
MUST BE COMPLETE
4 Mounts for the Body Worn Cameras (reimbursement expected) Credit Cards not accepted

REQUESTED BY: Julie Kemp
PHONE NUMBER: 775-348-0287
APPROVED BY
SIGNATURE: 
TYPE NAME: Jason Trevino

DUE TO THE ADDITIONAL COSTS, IT IS THE POLICY OF THE BUSINESS OFFICE NOT TO PRODUCE MANUAL CHECKS. ALL REQUESTS FOR A MANUAL CHECK MUST BE HAND DELIVERED AND ACCOMPANIED BY DOCUMENTATION OF EXTENUATING CIRCUMSTANCES. ALTERNATE MEANS OF PAYMENT WILL BE RECOMMENDED. THE BUSINESS OFFICE HAS FINAL DETERMINATION OF WHEN A MANUAL CHECK IS REQUIRED.

Date: 09/01/11, Revision C
A/P-F001
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BILL TO:

WASHOE CO SCHOOL DISTRICT PD
425 EAST NINTH ST
RENO, NV 89512
USA

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Please see https://www.axon.com/legal/sales-terms-and-conditions for all sales terms and conditions

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RETURN THIS PORTION WITH YOUR PAYMENT

WASHOE CO SCHOOL DISTRICT PD
425 EAST NINTH ST
RENO, NV 89512
USA

For ACH Payments:(Preferred Method)
Account Name: Axon Enterprise, Inc.
Account Number: 634912729
Bank Routing/Transit: 122100024
Reference Number: SI-1665930

For Wire Transfers:
Beneficiary: Axon Enterprise, Inc.
Account Number: 634912729
Bank Routing/Transit: 021000021
SWIFT Code: CHASUS33
Reference Number: SI-1665930

For Lockbox Payments Mail To:
Axon Enterprise, Inc.
PO BOX 29661
DEPARTMENT 2018
PHOENIX, AZ 85038-9661
Reference Number: SI-1665930

Please reference the invoice number on your ACH, Wire or Check payment

Important Note: By selecting the wire transfer payment method, you agree to accept the processing & transaction fees charged by the bank relating to this wire transfer

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