
GRANT SUMMARY SHEET

Grant Name: Residential Drug Court Treatment 23 Amend 1

Department: STATE TRIAL COURTS

Grantor: U.S. DEPT. OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

Pass-Through Grantor (If applicable): TN DEPT OF MENTAL HEALTH AND SUBSTANCE A

Total Award this Action: \$50,000.00

Cash Match Amount \$0.00

Department Contact: Annette Crutchfield
8803664

Status: AMENDMENT

Program Description:

Grant for the Davidson County Drug Court to operate a Certified Recovery Court Program. The grantor has provided funds for a workforce development rate increase.

Plan for continuation of services upon grant expiration:

We would seek other grants and funding to maintain the program.

Grants Tracking Form

Part One

Pre-Application <input type="radio"/>		Application <input type="radio"/>		Award Acceptance <input type="radio"/>		Contract Amendment <input checked="" type="radio"/>	
Department	Dept. No.	Contact			Phone	Fax	
STATE TRIAL COURTS	28	Annette Crutchfield			8803664		
Grant Name:		Residential Drug Court Treatment 23 Amend 1					
Grantor:		U.S. DEPT. OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES			Other:		
Grant Period From:		07/01/22		(applications only) Anticipated Application Date:			
Grant Period To:		06/30/23		(applications only) Application Deadline:			
Funding Type:		FED PASS THRU		Multi-Department Grant		<input type="checkbox"/> If yes, list below.	
Pass-Thru:		TN DEPT. OF MENTAL HEALTH AND SUI		Outside Consultant Project:		<input checked="" type="checkbox"/>	
Award Type:		FORMULA		Total Award:		\$50,000.00	
Status:		AMENDMENT		Metro Cash Match:		\$0.00	
Metro Category:		Est. Prior.		Metro In-Kind Match:		\$0.00	
CFDA #		93.959		Is Council approval required?		<input checked="" type="checkbox"/>	
Project Description:		Applic. Submitted Electronically? <input checked="" type="checkbox"/>					
Grant to operate a Certified Recovery Court Program at the Davidson County Drug Court. This grant is a combination of State Funds (\$500,000) and Federal Pass Thru funds (\$75,000). Amendment 1 provides funds for a workforce development rate increase. An additional \$50,000 is being added to the previous amount of \$575,000 for a new total of \$625,000.							
Plan for continuation of service after expiration of grant/Budgetary Impact:							
We would seek other grants and funding to maintain the program.							
How is Match Determined?							
Fixed Amount of \$		\$0.00		or		% of Grant	
Explanation for "Other" means of determining match:		Other: <input type="checkbox"/>					
For this Metro FY, how much of the required local Metro cash match:							
Is already in department budget?				Fund		Business Unit	
Is not budgeted?				Proposed Source of Match:			
(Indicate Match Amount & Source for Remaining Grant Years in Budget Below)							
Other:							
Number of FTEs the grant will fund:		9.00		Actual number of positions added:		0	
Departmental Indirect Cost Rate		23.10%		Indirect Cost of Grant to Metro:		\$144,375.00	
*Indirect Costs allowed? <input type="radio"/> Yes <input checked="" type="radio"/> No		% Allow.		Ind. Cost Requested from Grantor:		\$0.00	
*(If "No", please attach documentation from the grantor that indirect costs are not allowable. See Instructions)							
Draw down allowable? <input type="checkbox"/>							
Metro or Community-based Partners:							

Part Two



Grant Budget										
Budget Year	Metro Fiscal Year	Federal Grantor	State Grantor	Other Grantor	Local Match Cash	Match Source (Fund, BU)	Local Match In-Kind	Total Grant Each Year	Indirect Cost to Metro	Ind. Cost Neg. from Grantor
Yr 1	FY23	\$75,000.00	\$550,000.00		\$0.00			\$625,000.00	\$144,375.00	\$0.00
Yr 2	FY__							\$0.00		
Yr 3	FY__							\$0.00		
Yr 4	FY__							\$0.00		
Yr 5	FY__							\$0.00		
Total		\$75,000.00	\$550,000.00	\$0.00	\$0.00		\$0.00	\$625,000.00	\$144,375.00	\$0.00
Date Awarded:				01/26/23	Tot. Awarded:		\$50,000.00	Contract#:		
(or) Date Denied:					Reason:					
(or) Date Withdrawn:					Reason:					

Contact: juanita.paulsen@nashville.gov
vaughn.wilson@nashville.gov

GCP Received 01/27/2023

GCP Approved 02/01/2023



 <h2 style="margin: 0;">GRANT AMENDMENT</h2>					
Agency Tracking # No longer used		Edison ID 75223		Contract # See Edison ID	
Contractor Legal Entity Name Metropolitan Government of Davidson County					Amendment # 1
Edison Vendor ID 4					
Amendment Purpose & Effect(s) The purpose of this amendment is to add funding to grantee's contract to support the behavioral health workforce.					
Amendment Changes Contract End Date: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				End Date: June 30, 2023	
TOTAL Contract Amount INCREASE or DECREASE per this Amendment (zero if N/A):					\$ 50,000.00
Funding —					
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount
2023	\$500,000.00	\$75,000.00			\$575,000.00
2023	\$50,000.00				\$50,000.00
TOTAL:	\$550,000.00	\$75,000.00			\$625,000.00
Budget Officer Confirmation: There is a balance in the appropriation from which obligations hereunder are required to be paid that is not already encumbered to pay other obligations. 				<i>CPO USE</i>	
Speed Chart (optional)		Account Code (optional)			



STATE OF TENNESSEE
DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

6th FLOOR, ANDREW JACKSON BUILDING
500 DEADERICK STREET
NASHVILLE, TENNESSEE 37243

BILL LEE
GOVERNOR

MARIE WILLIAMS
COMMISSIONER

August 22, 2022

Re: FY23 TDMHSAS Provider Rate Increases

Dear Division of Substance Abuse Services Grantee:

The Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) is very excited to share that with the support of Governor Lee and the Tennessee General Assembly, TDMHSAS is receiving new, recurring state appropriations in FY23 (July 1st, 2022 – June 30th, 2023) to support provider rate increases for community behavioral health grant programs. These increases are in addition to recent federal block grant enhancements for FY23. Recognizing the recruitment and retention challenges that public behavioral health providers face, it is our hope these new dollars will positively impact direct service professionals who provide life-changing work daily.

Funding for provider rate increases will impact substance use and misuse prevention, treatment, and criminal justice services including recovery courts. You will be receiving additional information very soon from the Division of Substance Abuse Services regarding next steps, including information about the grant budget amendment process.

As always, please know how appreciative we are to consider you partners in this critical work. Thank you for all that you continue to do to support the behavioral health of Tennesseans.

Warmest regards,

Handwritten signature of Marie Williams in black ink.

Marie Williams, LCSW
Commissioner


Handwritten signature of Matt Yancey in black ink.

Matt Yancey, LCSW, MPA
Deputy Commissioner, Behavioral
Health Community Programs

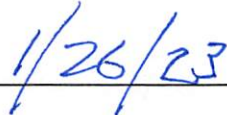
**SIGNATURE PAGE
FOR
GRANT NO.: FY 23 Certified Recovery Court Program – Grant Amendment 1 -
Tennessee Department of Mental Health and Substance Abuse Services**

IN WITNESS WHEREOF, the parties have by their duly authorized representatives set their signatures.

**METROPOLITAN GOVERNMENT OF
NASHVILLE AND DAVIDSON COUNTY**

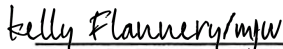


Tim D. Townsend
Trial Court Administrator, -State Trial Courts



Date

APPROVED AS TO AVAILABILITY
OF FUNDS:



Kelly Flannery, Director
Department of Finance

2/3/2023 | 7:51 AM PST

Date

APPROVED AS TO RISK AND INSURANCE:



Director of Insurance

2/3/2023 | 7:51 AM PST

Date

APPROVED AS TO FORM AND
LEGALITY:



Metropolitan Attorney

2/3/2023 | 7:51 AM PST

Date

John Cooper
Metropolitan Mayor

Date

ATTEST:

Metropolitan Clerk

Date

Crutchfield, Annette (STC)

From: Hobson, Janet (STC)
Sent: Friday, January 27, 2023 9:04 AM
To: Crutchfield, Annette (STC)
Subject: FW: FY23 TDMHSAS Provider Rate Increase

FYI

From: Jill Barrett <Jill.Barrett@tn.gov>
Sent: Friday, September 9, 2022 10:07 AM
To: Hobson, Janet (STC) <janethobson@iisnashville.gov>
Cc: Ailene J. Pamintuan <Ailene.J.Pamintuan@tn.gov>; Jennifer Walsh <Jennifer.Walsh@tn.gov>
Subject: FY23 TDMHSAS Provider Rate Increase

Attention: This email originated from a source external to Metro Government. Please exercise caution when opening any attachments or links from external sources.

Good Morning Janet, as noted in my previous email from, 8/29/2022, TDMHSAS has approved a work-force development rate increase which will impact the recovery courts. At this time, please see the contract(s) listed below, as well as, the adjusted rate increase.

Contact #: 75223
Current Budget: \$500,000
Increase (10%): \$50,000
New Contract Total: \$550,000

Before we begin the process to amend your current contract with these additional funds, please send a written proposal for how you plan to utilize this increase to develop or enhance your workforce. Please submit this no later than **September 16, 2022**. Once we have approved the proposal, we will send your budget workbook to you for revision.

Thank You,

Jill



Jill Barrett | Recovery Court Administrator
Office of Criminal Justice Services
Andrew Jackson Building, 5th Floor
500 Deaderick St, Nashville, TN 37243
c. 615.418.3232

Jill.Barrett@tn.gov
www.tn.gov/recoverycourts

[Facebook.com/TNMentalHealthSubstanceAbuseServices](https://www.facebook.com/TNMentalHealthSubstanceAbuseServices)

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**AMENDMENT ONE
OF GRANT CONTRACT 75223**

This Grant Contract Amendment is made and entered by and between the State of Tennessee, Department of Mental Health and Substance Abuse Services, hereinafter referred to as the "State" and Metropolitan Government of Davidson County, hereinafter referred to as the "Grantee." It is mutually understood and agreed by and between said, undersigned contracting parties that the subject Grant Contract is hereby amended as follows:

1. Grant Contract section C.1. Maximum Liability is deleted in its entirety and replaced with the following:
 - C.1. Maximum Liability. In no event shall the Maximum Liability of the Grantor State Agency under this Grant Agreement exceed Six Hundred Twenty Five Thousand Dollars (\$625,000.00) ("Maximum Liability"). The Grant Budget, attached and incorporated as Attachment One [1], is the maximum amount due the Grantee under this Grant Agreement. The Grant Budget line-items include, but are not limited to, all applicable taxes, fees, overhead, and all other direct and indirect costs incurred or to be incurred by the Grantee.
2. Grant Contract Attachment One (1) (Grant Budget) is deleted in its entirety and replaced with new Attachment One (1) (Grant Budget) attached hereto.

Required Approvals. The State is not bound by this Amendment until it is signed by the contract parties and approved by appropriate officials in accordance with applicable Tennessee laws and regulations (depending upon the specifics of this contract, said officials may include, but are not limited to, the Commissioner of Finance and Administration, the Commissioner of Human Resources, and the Comptroller of the Treasury).

Amendment Effective Date. The revisions set forth herein shall be effective once all required approvals are obtained. All other terms and conditions of this Grant Contract not expressly amended herein shall remain in full force and effect.

**FOR THE PROVISION OF THE TENNESSEE CERTIFIED RECOVERY COURT PROGRAM (TCRCP)
AT THE DAVIDSON COUNTY RESIDENTIAL DRUG COURT (DC4) PROGRAM:**

IN WITNESS WHEREOF,

METROPOLITAN GOVERNMENT OF DAVIDSON COUNTY:

SEE SIGNATURE PAGE

GRANTEE SIGNATURE

DATE

PRINTED NAME AND TITLE OF GRANTEE SIGNATORY (above)

DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES:

MARIE WILLIAMS, COMMISSIONER

DATE

GRANT BUDGET SUMMARY				
Agency Name: Metropolitan Government of Davidson County				
Program Code Name: Recovery Courts - Adult				
The grant budget line-item amounts below shall be applicable only to expense incurred during the following				
Applicable Period: BEGIN 7/1/2022 END: 6/30/2023				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1, 2	Salaries, Benefits & Taxes ²	\$566,483.00	\$0.00	\$566,483.00
4, 15	Professional Fee, Grant & Award ²	\$24,500.00	\$0.00	\$24,500.00
5, 6, 7, 8, 9, 10	Supplies, Telephone, Postage & Shipping, Occupancy, Equipment Rental & Maintenance, Printing & Publications ²	\$25,917.00	\$0.00	\$25,917.00
11, 12	Travel, Conferences & Meetings ²	\$8,100.00	\$0.00	\$8,100.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance ²	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost ²	\$0.00	\$0.00	\$0.00
24	In-Kind Expense ²	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$625,000.00	\$0.00	\$625,000.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A.*
https://www.tn.gov/content/dam/tn/finance/documents/fa_policies/policy3.pdf

² Applicable detail follows this page if line-item is funded.

GRANT BUDGET				
Agency Name: Metropolitan Government of Davidson County				
Program Code Name: Recovery Courts - Adult				
The grant budget line-item amounts below shall be applicable only to expense incurred during the following				
Applicable Period: BEGIN 7/1/2022 END: 6/30/2023				
POLICY 03 Object Line-item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1, 2	Salaries, Benefits & Taxes ²	\$491,483.00	\$0.00	\$491,483.00
4, 15	Professional Fee, Grant & Award ²	\$24,500.00	\$0.00	\$24,500.00
5, 6, 7, 8, 9, 10	Supplies, Telephone, Postage & Shipping, Occupancy, Equipment Rental & Maintenance, Printing & Publications ²	\$25,917.00	\$0.00	\$25,917.00
11, 12	Travel, Conferences & Meetings ²	\$8,100.00	\$0.00	\$8,100.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance ²	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost ²	\$0.00	\$0.00	\$0.00
24	In-Kind Expense ²	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$550,000.00	\$0.00	\$550,000.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A.* https://www.tn.gov/content/dam/tn/finance/documents/fa_policies/policy3.pdf

² Applicable detail follows this page if line-item is funded.

GRANT BUDGET LINE-ITEM DETAIL:

Agency Name: Metropolitan
 Government of
 Davidson County
 Program Code Name: Recovery Courts -
 Adult
 Begin Date: 7/1/2022
 End Date: 6/30/2023

SALARIES, BENEFITS & TAXES	AMOUNT
Salaries	\$356,147.00
Benefits and Taxes	\$135,336.00
TOTAL	\$491,483.00

PROFESSIONAL FEE, GRANT & AWARD	AMOUNT
Drug testing of residents participating in the Drug Court program.	\$24,500.00
TOTAL	\$24,500.00

SUPPLIES (includes "Sensitive Minor Equipment"), TELEPHONE, POSTAGE & SHIPPING, OCCUPANCY, EQUIPMENT RENTAL & MAINTENANCE, PRINTING & PUBLICATION	AMOUNT
Telephone, network access and cell phone charges for Drug Court employes.	\$25,917.00
TOTAL	\$25,917.00

TRAVEL, CONFERENCES & MEETINGS	AMOUNT
Travel to MTAADAC training	\$400.00
Cost for Senior Staff to attend the Tennessee Association of Recovery Court Professionals annual conference, MTAADAC training and National Association of Drug Court Professionals conference.	\$7,700.00
TOTAL	\$8,100.00

GRANT BUDGET				
Agency Name: Metropolitan Government of Davidson County				
Program Code Name: Integrated COD Court Program				
The grant budget line-item amounts below shall be applicable only to expense incurred during the following				
Applicable Period: BEGIN 7/1/2022 END: 6/30/2023				
POLICY 03 Object Line-Item Reference	EXPENSE OBJECT LINE-ITEM CATEGORY ¹	GRANT CONTRACT	GRANTEE PARTICIPATION	TOTAL PROJECT
1, 2	Salaries, Benefits & Taxes ²	\$75,000.00	\$0.00	\$75,000.00
4, 15	Professional Fee, Grant & Award ²	\$0.00	\$0.00	\$0.00
5, 6, 7, 8, 9, 10	Supplies, Telephone, Postage & Shipping, Occupancy, Equipment Rental & Maintenance, Printing & Publications ²	\$0.00	\$0.00	\$0.00
11, 12	Travel, Conferences & Meetings ²	\$0.00	\$0.00	\$0.00
13	Interest ²	\$0.00	\$0.00	\$0.00
14	Insurance ²	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals ²	\$0.00	\$0.00	\$0.00
17	Depreciation ²	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel ²	\$0.00	\$0.00	\$0.00
20	Capital Purchase ²	\$0.00	\$0.00	\$0.00
22	Indirect Cost ²	\$0.00	\$0.00	\$0.00
24	In-Kind Expense ²	\$0.00	\$0.00	\$0.00
25	GRAND TOTAL	\$75,000.00	\$0.00	\$75,000.00

¹ Each expense object line-item shall be defined by the Department of Finance and Administration Policy 03, *Uniform Reporting Requirements and Cost Allocation Plans for Subrecipients of Federal and State Grant Monies, Appendix A*.
https://www.tn.gov/content/dam/tn/finance/documents/fa_policies/policy3.pdf

² Applicable detail follows this page if line-item is funded.

GRANT BUDGET LINE-ITEM DETAIL:

Agency Name: Metropolitan
Government of
Davidson County
Program Code Name: Integrated COD Court
Program
Begin Date: 7/1/2022
End Date: 6/30/2023

SALARIES, BENEFITS & TAXES	AMOUNT
Salaries	\$69,670.00
Benefits and Taxes	\$5,330.00
TOTAL	\$75,000.00


Certificate Of Completion

Envelope Id: 8F0DE76DDFA64E5392CE3769E3AA62A1	Status: Completed
Subject: Complete with DocuSign: FY23 TDMHSAS Certified Recovery Court Program Grant Amendment 1- Ready.pdf	
Source Envelope:	
Document Pages: 15	Signatures: 6
Certificate Pages: 15	Initials: 1
AutoNav: Enabled	Envelope Originator:
Envelope Stamping: Enabled	Juanita Paulson
Time Zone: (UTC-06:00) Central Time (US & Canada)	730 2nd Ave. South 1st Floor
	Nashville, TN 37219
	Juanita.Paulsen@nashville.gov
	IP Address: 170.190.198.190

Record Tracking


Status: Original	Holder: Juanita Paulson	Location: DocuSign
2/2/2023 2:51:33 PM	Juanita.Paulsen@nashville.gov	
Security Appliance Status: Connected	Pool: StateLocal	
Storage Appliance Status: Connected	Pool: Metropolitan Government of Nashville and Davidson County	Location: DocuSign

Signer Events

Signer Events	Signature	Timestamp
Ernest Franklin		Sent: 2/2/2023 3:08:18 PM
Ernest.Franklin@nashville.gov		Viewed: 2/2/2023 3:09:30 PM
Security Level: Email, Account Authentication (None)		Signed: 2/2/2023 3:09:46 PM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.190	


Electronic Record and Signature Disclosure:

Accepted: 2/2/2023 3:09:30 PM
ID: 8e29d947-bc5d-4611-8ef5-3aca27edbd27

Tom Eddlemon		Sent: 2/2/2023 3:09:52 PM
Tom.eddlemon@nashville.gov		Viewed: 2/2/2023 3:41:27 PM
Director of Finance		Signed: 2/2/2023 3:42:28 PM
Security Level: Email, Account Authentication (None)	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.185	

Electronic Record and Signature Disclosure:

Accepted: 2/2/2023 3:41:27 PM
ID: bb15fe0b-81bb-447e-9a9a-59a7d4e738f7

Kelly Flannery/mjw		Sent: 2/2/2023 3:42:32 PM
MaryJo.Wiggins@nashville.gov		Viewed: 2/3/2023 9:30:27 AM
Security Level: Email, Account Authentication (None)		Signed: 2/3/2023 9:31:02 AM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.100	

Electronic Record and Signature Disclosure:

Accepted: 2/3/2023 9:30:27 AM
ID: 2d66f23c-0bae-41f0-9675-8fd31809e26f

Courtney Mohan		Sent: 2/3/2023 9:31:07 AM
Courtney.Mohan@nashville.gov		Viewed: 2/3/2023 9:44:04 AM
Security Level: Email, Account Authentication (None)		Signed: 2/3/2023 9:51:49 AM
	Signature Adoption: Pre-selected Style	
	Using IP Address: 170.190.198.144	

Signer Events	Signature	Timestamp
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Electronic Record and Signature Disclosure:

Accepted: 2/3/2023 9:44:04 AM
ID: 1b5f8fd0-c78f-40cb-824c-42f624cb2e17

Balogun Cobb
balogun.cobb@nashville.gov
Security Level: Email, Account Authentication (None)



Sent: 2/3/2023 9:51:53 AM
Viewed: 2/3/2023 10:08:23 AM
Signed: 2/3/2023 10:08:30 AM

Signature Adoption: Pre-selected Style
Using IP Address: 170.190.198.185

Electronic Record and Signature Disclosure:

Accepted: 2/3/2023 10:08:23 AM
ID: 77549369-432b-4382-b12a-772258a57271

In Person Signer Events	Signature	Timestamp
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Editor Delivery Events	Status	Timestamp
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Agent Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
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Certified Delivery Events	Status	Timestamp
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Carbon Copy Events	Status	Timestamp
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Danielle Godin
Danielle.Godin@nashville.gov
Security Level: Email, Account Authentication (None)

COPIED

Sent: 2/3/2023 10:08:33 AM
Viewed: 2/3/2023 10:40:33 AM

Electronic Record and Signature Disclosure:

Not Offered via DocuSign

Sally Palmer
sally.palmer@nashville.gov
Security Level: Email, Account Authentication (None)

COPIED

Sent: 2/3/2023 10:08:36 AM
Viewed: 2/3/2023 10:15:37 AM

Electronic Record and Signature Disclosure:

Accepted: 2/3/2023 8:05:37 AM
ID: b29f03c2-1114-444a-a365-6a8b228bf7b7

Witness Events	Signature	Timestamp
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Notary Events	Signature	Timestamp
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Envelope Summary Events	Status	Timestamps
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Envelope Sent	Hashed/Encrypted	2/2/2023 3:08:18 PM
Certified Delivered	Security Checked	2/3/2023 10:08:23 AM
Signing Complete	Security Checked	2/3/2023 10:08:30 AM
Completed	Security Checked	2/3/2023 10:08:36 AM

Payment Events	Status	Timestamps
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Electronic Record and Signature Disclosure