

**AMENDMENT NO. 6**  
**BETWEEN VANDERBILT UNIVERSITY MEDICAL CENTER**  
**AND**  
**THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY ACTING BY AND**  
**THROUGH THE**  
**METROPOLITAN BOARD OF HEALTH**  
(VUMC 30633)

This **Sixth Amendment (“Amendment No. 6”)** entered into by and between the Metropolitan Government of Nashville and Davidson County, acting by and through the Metropolitan Board of Health (“hereinafter referred to as “MPHD” or “Metro”), a municipal corporation of the State of Tennessee, and Vanderbilt University Medical Center (“VUMC”), a Tennessee nonprofit corporation.

**WHEREAS**, pursuant to the Agreement MPHD provides duties for the conduct of TBTC studies in accordance with the protocols provided to VUMC from CDC, VAMC and TBTC; and

**WHEREAS**, the parties now desire to amend the Agreement in order to add additional funds.

**NOW, THEREFORE**, for the consideration described above and the promises and covenants set forth below, the parties agree as follows:

1. The following is hereby added to **Section 8** of the Agreement:

Attachment 1 (budget) is hereby added to the Agreement, attached to this Amendment No. 6 and incorporated herein by reference.

2. The parties agree that the effective dates for Attachment 1 are October 1, 2020 to September 30, 2021.

Except as provided herein, all other terms and conditions of the Agreement are unaltered and remain in full force and effect.

(signature page to follow)

IN WITNESS THEREOF, the parties hereto have caused this Amendment No. 6 to be executed by their duly authorized representatives.

**VANDERBILT UNIVERSITY MEDICAL CENTER**

Approved by:

**Libby  
Salberg**

Digitally signed  
by Libby Salberg  
Date: 2021.10.11  
09:26:32 -05'00'

BC

\_\_\_\_\_  
Libby D. Salberg  
Director, Office of Contracts Management

Recommended by:



\_\_\_\_\_  
Timothy R. Sterling, M.D.  
Principal Investigator

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY**

Signatures on next page.

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

**METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY**

DocuSigned by:  
*Gill C Wright III, MD* 11/22/2021  
8469AG24E4CC498...

Director, Metro Public Health Department Date

DocuSigned by:  
*Tené Hamilton Franklin* 11/29/2021  
BEBF0BBF14D14B0

Chair, Board of Health Date

APPROVED AS TO AVAILABILITY OF FUNDS:

DocuSigned by: <sup>DS</sup> *Kelly Flannery/mjw* <sup>DS</sup> *RW TE* 11/30/2021  
62377A2A8742469

Director, Department of Finance Date

APPROVED AS TO RISK AND INSURANCE:

DocuSigned by:  
*Balogun Colob* 11/30/2021  
68804BF12FD741C

Director of Risk Management Services Date

APPROVED AS TO FORM AND LEGALITY:

*Matthew Garth* 12/1/2021

Metropolitan Attorney Date

Metropolitan Mayor Date

ATTEST:

Metropolitan Clerk Date

## ATTACHMENT 1

## GRANT BUDGET - TBTC

(BUDGET PAGE 1)

<b>Metropolitan Government of Nashville &amp; Davidson County - TBTC</b>				
<b>APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning October 1, 2020, and ending September 30, 2021.</b>				
<b>POLICY 03 Object Line-Item Reference</b>	<b>EXPENSE OBJECT LINE-ITEM CATEGORY <sup>1</sup> (detail schedule(s) attached as applicable)</b>	<b>GRANT CONTRACT</b>	<b>GRANTEE PARTICIPATION</b>	<b>TOTAL PROJECT</b>
1	Salaries <sup>2</sup>	\$18,900.00	\$0.00	\$18,900.00
2	Benefits & Taxes	\$4,100.00	\$0.00	\$4,100.00
4, 15	Professional Fee/ Grant & Award <sup>2</sup>	\$0.00	\$0.00	\$0.00
5	Supplies	\$0.00	\$0.00	\$0.00
6	Telephone	\$0.00	\$0.00	\$0.00
7	Postage & Shipping	\$0.00	\$0.00	\$0.00
8	Occupancy	\$0.00	\$0.00	\$0.00
9	Equipment Rental & Maintenance	\$0.00	\$0.00	\$0.00
10	Printing & Publications	\$0.00	\$0.00	\$0.00
11, 12	Travel/ Conferences & Meetings <sup>2</sup>	\$0.00	\$0.00	\$0.00
13	Interest <sup>2</sup>	\$0.00	\$0.00	\$0.00
14	Insurance	\$0.00	\$0.00	\$0.00
16	Specific Assistance To Individuals <sup>2</sup>	\$0.00	\$0.00	\$0.00
17	Depreciation <sup>2</sup>	\$0.00	\$0.00	\$0.00
18	Other Non-Personnel <sup>2</sup>	\$0.00	\$0.00	\$0.00
20	Capital Purchase <sup>2</sup>	\$0.00	\$0.00	\$0.00
22	Indirect Cost (22% Salary/Benefits)	\$5,000.00	\$0.00	\$5,000.00
24	In-Kind Expense	\$0.00	\$0.00	\$0.00
25	<b>GRAND TOTAL</b>	<b>\$28,000.00</b>	<b>\$0.00</b>	<b>\$28,000.00</b>

<sup>1</sup> 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*. (posted on the Internet at: <http://www.tn.gov/finance/act/documents/policy3.pdf>).

<sup>2</sup> Applicable detail follows this page if line-item is funded.