
GRANT SUMMARY SHEET

Grant Name: Friends of MACC Grant Allocation #5 24

Department: HEALTH DEPARTMENT

Grantor: FRIENDS OF METRO ANIMAL CARE & CONTROL

**Pass-Through Grantor
(If applicable):**

Total Award this Action: \$19,638.00

Cash Match Amount \$0.00

Department Contact: Brad Thompson
340-0407

Status: CONTINUATION

Program Description:

This is a donation from the nonprofit Friends of Metro Animal Care & Control for the provision of animals. Emergency Medical received \$12,500, Safety Net received \$3750, the Foster Program received \$2500, and the Rabies program received \$888.

Plan for continuation of services upon grant expiration:

Grants Tracking Form

Part One

Pre-Application <input type="radio"/>		Application <input type="radio"/>		Award Acceptance <input checked="" type="radio"/>		Contract Amendment <input type="radio"/>	
Department	Dept. No.	Contact				Phone	Fax
HEALTH DEPARTMENT	038	Brad Thompson				340-0407	
Grant Name:	Friends of MACC Grant Allocation #5 24						
Grantor:	FRIENDS OF METRO ANIMAL CARE & CONTROL	Other:					
Grant Period From:	07/01/23	(applications only) Anticipated Application Date:					
Grant Period To:	06/30/24	(applications only) Application Deadline:					
Funding Type:	FOUNDATION	Multi-Department Grant		If yes, list below.			
Pass-Thru:		Outside Consultant Project:					
Award Type:	OTHER	Total Award:		\$19,638.00			
Status:	CONTINUATION	Metro Cash Match:		\$0.00			
Metro Category:	Est. Prior.	Metro In-Kind Match:		\$0.00			
CFDA #	N/A	Is Council approval required?		<input type="checkbox"/>			
Project Description:	Applic. Submitted Electronically?					<input type="checkbox"/>	
This is a donation from the nonprofit Friends of Metro Animal Care & Control for the provision of animals. Emergency Medical received \$12,500, Safety Net received \$3750, the Foster Program received \$2500, and the Rabies program received \$888.							
Plan for continuation of service after expiration of grant/Budgetary Impact:							
How is Match Determined?							
Fixed Amount of \$		or	% of Grant	Other: <input type="checkbox"/>			
Explanation for "Other" means of determining match:							
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:	0.00	Actual number of positions added:		0.00			
Departmental Indirect Cost Rate	21.47%	Indirect Cost of Grant to Metro:		\$4,216.28			
*Indirect Costs allowed?	<input type="radio"/> Yes <input checked="" type="radio"/> No	% Allow.	0.00%	Ind. Cost Requested from Grantor:		\$0.00 in budget	
*(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	FY24	\$0.00	\$0.00	\$19,638.00	\$0.00		\$0.00	\$19,638.00	\$4,216.28	\$0.00
Yr 2	FY									
Yr 3	FY									
Yr 4	FY									
Yr 5	FY									
Total		\$0.00	\$0.00	\$19,638.00	\$0.00		\$0.00	\$19,638.00	\$4,216.28	\$0.00
Date Awarded:		05/10/24			Tot. Awarded:	\$19,638.00	Contract#:			
(or) Date Denied:					Reason:					
(or) Date Withdrawn:					Reason:					

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

Rev. 5/13/13
5832

GCP Received 05/14/2024

GCP Approved 05/14/2024



METRO NASHVILLE
ANIMAL CARE & CONTROL

Receipt Number: **R24-288606** **Metro Animal Care And Control**
5125 Harding Place, Nashville, TN 37211
(615) 862-7928

Person Information: **FRIENDS OF MACC**
P.O. BOX 291621
NASHVILLE, TN 37229
Phone: (615) 545-1675
Check / Card No:

Receipt Date: **Tuesday, April 23, 2024**
PID: P207600

Item:	Animal ID:	Reference No:	Price:	Each:	Amount:
DONATION		EMER. MEDIC,	\$12500.00	1	12,500.00
DONATION		FOSTER	2500.00	1	2,500.00
DONATION		SAFETY NET	3750.00	1	3,750.00
DONATION		RABIES CLINIK	888.00	1	888.00

Total Fees Due: **\$19638.00**

Payments: Cash: \$0.00
Check: \$19,638.00
Credit Card: \$0.00

Total Payments Received: **\$19638.00**

Thank You!

Change: \$0.00
Balance Due: \$0.00

FRIENDS OF MACC
812 FATHERLAND STREET
NASHVILLE, TN 37206

A dog is the only thing... **1130**
87-1/640

4/23/24 Date

Pay to the Order of **MACC** \$ 19,638^{00/100}

nineteen thousand six hundred thirty eight Dollars

REGIONS BANK #12,500 Emerg Med
~~12,500~~ 2,500 Foster
For \$888 Rabies 3,750 Safety Net
Clive

that loves you more than he loves himself.

Melody Lind

If your new pet becomes sick... control and our veterinarian will examine the animal. If you choose to take your sick pet to a private veterinarian, you will be responsible for all costs incurred. **No refunds of the adoption fee offered after ten (10) days.**

Adoption and Reclaim Hours
Sunday-Saturday 10 AM-4 PM
Thursday 10 AM-6 PM

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
0460AC21E1CC408...
Director, Metro Public Health Department

5/10/2024
Date

DocuSigned by:
Tené Hamilton Franklin
BEBF0BBF14D14B0...
Chair, Board of Health

5/14/2024
Date

APPROVED AS TO AVAILABILITY OF FUNDS:

Kevin Crumbo/mjw
Director, Department of Finance

5/17/2024 | 9:04 AM CDT
Date

APPROVED AS TO RISK AND INSURANCE:

Balogun Cole
Director of Risk Management Services

5/21/2024 | 6:42 AM CDT
Date

APPROVED AS TO FORM AND LEGALITY:

Courtney Mohan
Metropolitan Attorney

5/20/2024 | 9:39 AM CDT
Date

FILED:

Metropolitan Clerk

Date