Grants Tracking Form

					Part	One				
Pre-Appli	ication	0	Application	Э	Award Acceptance	e 💿	Contract Amendme	ent O		
	Departm	nent	Dept. No.			Contact			Phone	Fax
HEALTH DE	PARTMENT	•	038	Brad Thompson					340-0407	
Grant Na	me:		Friends of MACC A	Allocation #2 23						
Grantor:			FRIENDS OF METRO	ANIMAL CARE & CONT	ROL		▼ Other:			
Grant Per	riod From:	:	07/01/22		(applications only)	Anticipated Applic	ation Date:			
Grant Per	riod To:		06/30/23			Application Deadli				
Funding	Type		FOUNDATION			Multi-Department			► If yes, list b	elow
Pass-Thru	•••		TOUNDATION			Outside Consultar				ciow.
Award Ty			OTHER	_		Total Award:	it i roject.	\$14,000.00		
Status:	/pe.		OTHER			Metro Cash Match	h.	\$0.00	+	
	togony					Metro In-Kind Mat		\$0.00	+	
Metro Ca	itegory.		Est. Prior.	, <u>*</u>	Is Council approval required?		\$0.00			
			N/A				•			
Project Description: Applic. Submitted Electronically? This is a donation from the nonprofit Friends of Metro Animal Care & Control for the provision of animals. Emergency Medical Fund is granted \$6,000.00, Foster Behavioral Support is granted \$3,000.00, and Safety Net is granted \$5,000.00.					ort is granted					
Plan for o	continuation	on of service at	ter expiration of gr	ant/Budgetary Impa	ct:					
How is M	latch Deter	rmined?								
Fixed Am	nount of \$			or		% of Grant		Other:		
Explanati	ion for "Ot	ther" means of	determining match	1:						
			e required local Me	etro cash match:						
Is already in department budget?						Fur		Business Unit		
Is not but						Prop	osed Source of Mato	:n:		
	Match Amo	ount & Source	for Remaining Grai	nt Years in Budget E	Below)					
Other:										
		e grant will fun	d:		0.00	Actual number of	·		0.00	
Departme	ental Indire	ect Cost Rate				1			\$3,474.80	
*Indirect	Costs allo	wed?	Yes No	% Allow.	0.00%	Ind. Cost Request	ed from Grantor:		\$0.00	in budget
*(If "No",	please atta	ach documenta	tion from the gran	tor that indirect cos	ts are not allowabl	le. See Instructions	s)			
	wn allowab									
Metro or	Communit	ty-based Partn	ers:							
					Part Tw	0				
						rant Budget				
Budget	Metro	Federal			Local Match	Match Source (Fu	nd, Local Match	Total Grant Each	Indirect Cost	Ind. Cost Neg.
Year	Fiscal	Grantor	State Grantor	Other Grantor	Cash	BU)	In-Kind	Year	to Metro	from Grantor
Yr 1	Year			\$14,000.00	\$0.00		\$0.00	\$14,000,00	\$3,474.80	\$0.00
Yr 2	FY23 FY			\$14,000.00	φυ.υυ		φυ.υυ	\$14,000.00	ψ3,474.60	φυ.υυ
Yr 3	FY									
Yr 4	FY									
Yr 5	EV/				i					
Tot	FY	\$0.00	¢0.00	\$14,000,00	\$0.00		\$0.00	\$14,000,00	\$3 /17/ 90	¢0.00
Tot	tal	\$0.00	\$0.00				\$0.00		•	\$0.00
Tot	tal Date	e Awarded:	\$0.00		Tot. Awarded:	\$14,000.00	\$0.00 Contract#:	\$14,000.00 CHEC		\$0.00
Tot	Date (or)									\$0.00

Contact: <u>trinity.weathersby@nashville.gov</u> <u>vaughn.wilson@nashville.gov</u>

Rev. 5/13/13 5463 TW

GCP RECEIVED 6/20/22 GCP APPROVED 6/22/22

GRANT SUMMARY SHEET

Grant Name: Friends of MACC Allocation #2 23

Department: HEALTH DEPARTMENT

Grantor: FRIENDS OF METRO ANIMAL CARE & CONTROL

Pass-Through Grantor

(If applicable):

Total Award this Action: \$14,000.00

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 Fund is granted \$6,000.00, Foster Behavioral Support is granted \$3,000.00, and Safety Net is granted \$5,000.00.

Plan for continuation of services upon grant

N/A





Receipt Number: R22-231456 Metro Animal Care And Control

5125 Harding Place, Nashville, TN 37211

(615) 862-7928

Person Information: FRIENDS OF MACC

812 FATHERLAND ST NASHVILLE, TN 37206

Phone: (615) 545-1675

Check / Card No:

Receipt Date: Saturday, May 14, 2022

PID: P207600

Item:	Animal ID:	Reference No:	Price:	Each:	Amount:
DONATION		EMERGENCY	\$6000.00	1	6,000.00
DONATION		SAFETY NET (5000.00	1	5,000.00
DONATION		TRAINING/FOS	3000.00	1	3,000.00
			Total Fees Due:		\$14000.00
			Payments:	Cash:	\$0.00
			•	Check:	\$14,000.00
			Cre	dit Card:	\$0.00
		To	otal Payments R	eceived:	\$14000.00

Thank You!

Change:

\$0.00

Balance Due:

\$0.00

FRIENDS OF MACC 812 FATHERLAND STREET NASHVILLE, TN 37206 87-1/640 5 1/4/2 Date
Pay to the Mofra animal are & antral \$ 14,000 m/00
REGIONS BANK FLOOD Emerg Med Soloo Safeth Night to the state of the
O64000017* 0237177699#* 1075

Despite our best efforts, we can not guarantee the health of the animal you have adopted. If your new pet becomes sick within 72 hours (3 working days), please return the animal to Metro Animal Care and 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.

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

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

DocuSigned by:	
Gill (Wright III, MD)	6/13/2022
Director, Metro Public Health Department	Date
DocuSigned by:	
Tené Hamilton Franklin	6/14/2022
Chair, Board of Health	Date
APPROVED AS TO AVAILABILITY OF FUNDS:	
— DocuSigned by:	6/29/2022
telly_Plannery Diffector, Department of Finance	Date
APPROVED AS TO RISK AND INSURANCE:	
DocuSigned by:	6/29/2022
<u>Balogun (obb</u> Directorof⁴Risk Management Services	Date
APPROVED AS TO FORM AND LEGALITY:	
— DocuSigned by:	6/29/2022
<u> Mcki Eke</u> Merropolitan Attorney	Date
FILED:	
Metropolitan Clerk	Date