
GRANT SUMMARY SHEET

Grant Name: ELC Detection and Mitigation of COVID in Confinement Facilities 21-23 Amend 2

Department: SHERIFF

Grantor: U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Pass-Through Grantor (If applicable): TENN. DEPT. OF HEALTH

Total Award this Action: \$0.00

Cash Match Amount \$0.00

Department Contact: Kristie Bratcher, Assistant Director of Finance
862-8222

Status: AMENDMENT

Program Description:

Funding for COVID mitigation and increased effort to encourage and promote distancing and infection control practices within confinement facilities. Specifically, this funding will improve and expand the virtual services offered to incarcerated individuals. Virtual visitation, court appearances and other services reduce the number of inmate to public interaction and reduce the risk of virus spread. Amendment 1 to extend the end date of the contract to June 30,2024. Amend 2 To rollover remaining \$304,271.53 FY23 funds to FY24.

Plan for continuation of services upon grant expiration:

Virtual services will be absorbed into the operating budget at the end of the grant period.

Grants Tracking Form

Part One

| | | | | | |
|---|-----------------------|---|--|----------------------|--|
| <input type="radio"/> Pre-Application <input type="radio"/> Application <input type="radio"/> Award Acceptance <input checked="" type="radio"/> Contract Amendment | | | | | |
| Department | Dept. No. | Contact | | Phone | Fax |
| SHERIFF | 030 | Kristie Bratcher, Assistant Director of Finance | | 862-8222 | |
| Grant Name: ELC Detection and Mitigation of COVID in Confinement Facilities 21-23 Amend 2 | | | | | |
| Grantor: U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Other: | | | | | |
| Grant Period From: 08/01/21 | | (applications only) Anticipated Application Date: | | | |
| Grant Period To: 06/30/24 | | (applications only) Application Deadline: | | | |
| Funding Type: | STATE | Multi-Department Grant <input type="checkbox"/> → If yes, list below. | | | |
| Pass-Thru: | TENN. DEPT. OF HEALTH | Outside Consultant Project: <input type="checkbox"/> | | | |
| Award Type: | OTHER | Total Award: \$0.00 | | | |
| Status: | AMENDMENT | Metro Cash Match: \$0.00 | | | |
| Metro Category: | Est. Prior. | Metro In-Kind Match: \$0.00 | | | |
| CFDA # | 93.323 | Is Council approval required? <input checked="" type="checkbox"/> | | | |
| Project Description: | | Applic. Submitted Electronically? <input type="checkbox"/> | | | |
| Funding for COVID mitigation and increased effort to encourage and promote distancing and infection control practices within confinement facilities. Specifically, this funding will improve and expand the virtual services offered to incarcerated individuals. Virtual visitation, court appearances and other services reduce the number of inmate to public interaction and reduce the risk of virus spread. Amendment 1 to extend the end date of the contract to June 30,2024. Amend 2 To rollover remaining \$304,271.53 FY23 funds to FY24. | | | | | |
| Plan for continuation of service after expiration of grant/Budgetary Impact: | | | | | |
| Virtual services will be absorbed into the operating budget at the end of the grant period. | | | | | |
| 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 | | 21.62% | Indirect Cost of Grant to Metro: | | \$162,150.00 |
| *Indirect Costs allowed? <input checked="" type="radio"/> Yes <input type="radio"/> No % Allow. | | 18.66% | Ind. Cost Requested from Grantor: | | \$139,982.24 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: | | | | | |
| Davidson County Sheriffs Office | | | | | |

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 | \$0.00 | \$445,728.47 | \$0.00 | \$0.00 | | \$0.00 | \$445,728.47 | \$96,366.50 | \$83,192.10 |
| Yr 2 | FY24 | \$0.00 | \$304,271.53 | \$0.00 | \$0.00 | | \$0.00 | \$304,271.53 | \$65,783.50 | \$56,790.14 |
| Yr 3 | FY | | | | | | | | | |
| Yr 4 | FY | | | | | | | | | |
| Yr 5 | FY | | | | | | | | | |
| Total | | \$0.00 | \$750,000.00 | \$0.00 | \$0.00 | | \$0.00 | \$750,000.00 | \$162,150.00 | \$139,982.24 |
| Date Awarded: | | 09/01/22 | | Tot. Awarded: | | \$0.00 | | Contract#: | | |
| (or) Date Denied: | | | | Reason: | | | | | | |
| (or) Date Withdrawn: | | | | Reason: | | | | | | |

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



GRANT SUMMARY SHEET

Grant Name: ELC Detection and Mitigation of COVID in Confinement Facilities 21-23 Amend 1

Department: SHERIFF

Grantor: U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Pass-Through Grantor (If applicable): TENN. DEPT. OF HEALTH

Total Award this Action: \$0.00

Cash Match Amount \$0.00

Department Contact: Kristie Bratcher, Assistant Director of Finance
862-8222

Status: AMENDMENT

Program Description:

Funding for COVID mitigation and increased effort to encourage and promote distancing and infection control practices within confinement facilities. Specifically, this funding will improve and expand the virtual services offered to incarcerated individuals. Virtual visitation, court appearances and other services reduce the number of inmate to public interaction and reduce the risk of virus spread. Amendment 1 is to extend the end date of the contract from 6/30/2023 to 6/30/2024

Plan for continuation of services upon grant expiration:

Virtual services will be absorbed into the operating budget at the end of the grant period.

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 |
| SHERIFF | 030 | Kristie Bratcher, Assistant Director of Finance | 862-8222 | |
| Grant Name: ELC Detection and Mitigation of COVID in Confinement Facilities 21-23 Amend 1 | | | | |
| Grantor: U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES | | | | |
| Grant Period From: 08/01/21 | | (applications only) Anticipated Application Date: | | |
| Grant Period To: 06/30/24 | | (applications only) Application Deadline: | | |
| Funding Type: STATE | | Multi-Department Grant <input type="checkbox"/> → If yes, list below. | | |
| Pass-Thru: TENN. DEPT. OF HEALTH | | Outside Consultant Project: <input type="checkbox"/> | | |
| Award Type: OTHER | | Total Award: \$0.00 | | |
| Status: AMENDMENT | | Metro Cash Match: \$0.00 | | |
| Metro Category: Est. Prior. | | Metro In-Kind Match: \$0.00 | | |
| CFDA # 93.323 | | Is Council approval required? <input checked="" type="checkbox"/> | | |
| Project Description: | | Applic. Submitted Electronically? <input type="checkbox"/> | | |
| Funding for COVID mitigation and increased effort to encourage and promote distancing and infection control practices within confinement facilities. Specifically, this funding will improve and expand the virtual services offered to incarcerated individuals. Virtual visitation, court appearances and other services reduce the number of inmate to public interaction and reduce the risk of virus spread. Amendment 1 is to extend the end date of the contract from 6/30/2023 to 6/30/2024 | | | | |
| Plan for continuation of service after expiration of grant/Budgetary Impact: | | | | |
| Virtual services will be absorbed into the operating budget at the end of the grant period. | | | | |
| 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 | | 21.62% | Indirect Cost of Grant to Metro: \$162,150.00 | |
| *Indirect Costs allowed? <input checked="" type="radio"/> Yes <input type="radio"/> No % Allow. 18.66% | | | Ind. Cost Requested from Grantor: \$139,982.24 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: | | | | |
| Davidson County Sheriffs Office | | | | |

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 | \$0.00 | \$750,000.00 | \$0.00 | \$0.00 | | \$0.00 | \$750,000.00 | \$162,150.00 | \$139,982.24 |
| Yr 2 | FY24 | | | | | | | | | |
| Yr 3 | FY | | | | | | | | | |
| Yr 4 | FY__ | | | | | | | | | |
| Yr 5 | FY__ | | | | | | | | | |
| Total | | \$0.00 | \$750,000.00 | \$0.00 | \$0.00 | | \$0.00 | \$750,000.00 | \$162,150.00 | \$139,982.24 |
| Date Awarded: | | | | 09/01/22 | Tot. Awarded: | | \$0.00 | Contract#: | | |
| (or) Date Denied: | | | | | Reason: | | | | | |
| (or) Date Withdrawn: | | | | | Reason: | | | | | |

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

DGA 75218



GRANT AMENDMENT

| | | | |
|---|----------------------------|----------------------------------|-------------------------|
| Agency Tracking # 34349-05523 | Edison ID 263574 | Contract # Z-23-263574 | Amendment # 2 |
|---|----------------------------|----------------------------------|-------------------------|

| | |
|----------------------------------|------------------------------|
| Davidson County Sheriff's Office | Edison Vendor ID 4 |
|----------------------------------|------------------------------|

Amendment Purpose & Effect(s)
To Rollover remaining FY23 funds to FY24

Amendment Changes Contract End Date: YES NO **End Date:** June 30, 2024

TOTAL Contract Amount INCREASE or DECREASE per this Amendment (zero if N/A): **\$ 0**

| Funding — | | | | | |
|---------------|-------|--------------|-------------------|-------|-----------------------|
| FY | State | Federal | Interdepartmental | Other | TOTAL Contract Amount |
| 2023 | 0 | \$445,728.47 | | | \$445,728.47 |
| 2024 | 0 | \$304,271.53 | | | \$304,271.53 |
| | | | | | |
| | | | | | |
| TOTAL: | | \$750,000.00 | | | \$750,000.00 |

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.

CPO USE

Z-23-263574-02

Eric Buchholz

| | |
|---|--|
| Speed Chart (optional) HL00018531 | Account Code (optional) 71301000 |
|---|--|

**AMENDMENT TWO
OF GRANT CONTRACT Z-23-263574**

This Grant Contract Amendment is made and entered by and between the State of Tennessee Dept. of Health, hereinafter referred to as the "State" and Davidson County Sheriff's Office, 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 Attachment 3 is deleted in its entirety and replaced with the new attachment 3 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.

IN WITNESS WHEREOF,

DAVIDSON COUNTY SHERIFF'S OFFICE:



10.4.2023

GRANTEE SIGNATURE

DATE

Daron Hall, Sheriff

PRINTED NAME AND TITLE OF GRANTEE SIGNATORY (above)

DEPARTMENT OF HEALTH:

RALPH ALVARADO, MD, FACP, COMMISSIONER

DATE

**SIGNATURE PAGE
FOR
GRANT NO. Z-23-263574**

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

**METROPOLITAN GOVERNMENT OF
NASHVILLE AND DAVIDSON COUNTY**



Sheriff Department

10.4.2023
Date

APPROVED AS TO AVAILABILITY
OF FUNDS:



Director of Finance

10/24/2023 | 1:58 PM CDT
Date

APPROVED AS TO RISK AND INSURANCE:



Director of Insurance

10/24/2023 | 3:57 PM CDT
Date

APPROVED AS TO FORM AND
LEGALITY:



Metropolitan Attorney

10/24/2023 | 3:54 PM CDT
Date

Freddie O'Connell
Metropolitan Mayor

Date

ATTEST:

Metropolitan Clerk

Date

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 1)

| DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19 | | | | |
|---|---|---------------------|----------------------------|---------------------|
| APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning August 1, 2021 and ending June 30, 2024. | | | | |
| POLICY 03 Object Line-Item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
| 1 | Salaries ² | \$268,096.00 | \$0.00 | \$268,096.00 |
| 2 | Benefits & Taxes | \$115,287.00 | \$0.00 | \$115,287.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$7,000.00 | \$0.00 | \$7,000.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 | \$219,634.76 | \$0.00 | \$219,634.76 |
| 22 | Indirect Cost (% and method) | \$139,982.24 | \$0.00 | \$139,982.24 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$750,000.00 | \$0.00 | \$750,000.00 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 2)

DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning August 1, 2021 and ending June 30, 2022.

| POLICY 03 Object Line-Item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
|---|---|----------------|----------------------------|---------------|
| 1 | Salaries ² | \$0.00 | \$0.00 | \$0.00 |
| 2 | Benefits & Taxes | \$0.00 | \$0.00 | \$0.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$0.00 | \$0.00 | \$0.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 (22.948% PER LOCAP/IDCRP) | \$0.00 | \$0.00 | \$0.00 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$0.00 | \$0.00 | \$0.00 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 3)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|------|-------------|-----|----------------------------|--------|
| GROCE, K; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| GOURLEY, C; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| ROUNDED TOTAL | | | | | \$0.00 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT |
|--------------------------------|--------|
| TRAVEL FOR TRAINING | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| INTEREST | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| DEPRECIATION | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| CAPITAL PURCHASE | AMOUNT |
|------------------------------------|--------|
| 20" Dell Monitor 15 | \$0.00 |
| wyse thin client w/mgmt license 16 | \$0.00 |
| ups for mobile system 14 | \$0.00 |
| secure computer enclosure 3 | \$0.00 |
| wall mount 36 | \$0.00 |
| surge protectors 20 | \$0.00 |
| Headsets 9 | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 4)

| DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19 | | | | |
|---|---|---------------------|----------------------------|---------------------|
| APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2022 and ending June 30, 2023. | | | | |
| PROJECT'S Object Line-Item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
| 1 | Salaries ² | \$239,772.59 | \$0.00 | \$239,772.59 |
| 2 | Benefits & Taxes | \$100,703.99 | \$0.00 | \$100,703.99 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$0.00 | \$0.00 | \$0.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 | \$26,076.44 | \$0.00 | \$26,076.44 |
| 22 | Indirect Cost (22.948% PER LOCAP/IDCRP) | \$79,175.45 | \$0.00 | \$79,175.45 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$445,728.47 | \$0.00 | \$445,728.47 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 5)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|-------------|-------------|-----|----------------------------|--------------|
| GROCE, K; VIRTUAL SERVICES SPECIALIST | \$9,493.97 | 12 | | 110.00 | \$114,037.59 |
| GOURLEY, C; VIRTUAL SERVICES SPECIALIST | \$10,400.00 | 12 | | 935.00 | \$125,735.00 |
| ROUNDED TOTAL | | | | | \$239,772.59 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT |
|--------------------------------|------------|
| TRAVEL FOR TRAINING | \$7,000.00 |
| ROUNDED TOTAL | \$7,000.00 |

| INTEREST | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| DEPRECIATION | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| CAPITAL PURCHASE | AMOUNT |
|--|-------------|
| Logitech Conference Cam (6) @\$500.00 | \$0.00 |
| Mobile TV Stand 22 | \$8,800.00 |
| 65" TV for mobile units 25 | \$12,750.00 |
| 70" TV | \$1,700.00 |
| 20" Dell Monitor 40 | \$0.00 |
| Dell Laptops 25 | \$0.00 |
| Video Cables 50 | \$500.00 |
| WAP and licensing 25 | \$0.00 |
| Cabling and Data Drops | \$0.00 |
| web cams 100 | \$0.00 |
| wyse thin client w/mgmt license 60 | \$0.00 |
| ups for mobile system 30 | \$0.00 |
| secure computer enclosure 25 | \$0.00 |
| wall mount 15 | \$0.00 |
| Surge protectors | \$217.00 |
| hardware 150 | \$0.00 |
| printer 2 | \$0.00 |
| Rugged laptops for use by staff inside facility (10) | \$0.00 |
| Cisco Phones 3 | \$0.00 |
| Peripherals (Keyboard, mouse, HDMI/Cables | \$1,000.00 |
| Reinforced computer cabinets for Max | \$0.00 |
| Antenna (65) | \$0.00 |
| VC Camera for BCC (2) | \$0.00 |
| UPS to supply uninterrupted power to monitors | \$1,050.00 |
| cisco desk phone 2 | \$0.00 |
| Headsets 100 | \$59.44 |
| ROUNDED TOTAL | \$26,076.44 |

ATTACHMENT 3
GRANT BUDGET ROLL-UP
 (BUDGET PAGE 6)

| DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19 | | | | |
|--|---|---------------------|----------------------------|---------------------|
| APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2023 and ending June 30, 2024. | | | | |
| POLICY 03 Object Line-Item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
| 1 | Salaries ² | \$28,323.41 | \$0.00 | \$28,323.41 |
| 2 | Benefits & Taxes | \$14,583.01 | \$0.00 | \$14,583.01 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$7,000.00 | \$0.00 | \$7,000.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 | \$193,558.32 | \$0.00 | \$193,558.32 |
| 22 | Indirect Cost (22.948% PER LOCAP/IDCRP) | \$60,806.79 | \$0.00 | \$60,806.79 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$304,271.53 | \$0.00 | \$304,271.53 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 7)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|------------|-------------|-----|----------------------------|-------------|
| GROCE, K: VIRTUAL SERVICES SPECIALIST | \$2,360.67 | 6 | | | \$14,163.41 |
| GOURLEY, C: VIRTUAL SERVICES SPECIALIST | \$2,360.00 | 6 | | | \$14,160.00 |
| ROUNDED TOTAL | | | | | \$28,323.41 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT |
|--------------------------------|------------|
| TRAVEL FOR TRAINING | \$7,000.00 |
| ROUNDED TOTAL | \$7,000.00 |

| INTEREST | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| DEPRECIATION | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| CAPITAL PURCHASE | AMOUNT |
|--|--------------|
| Logitech Conference Cam (6) @\$500.00 | \$3,000.00 |
| Mobile TV Stand 22 | \$0.00 |
| 65" TV for mobile units 25 | \$0.00 |
| 70" TV | \$0.00 |
| 20" Dell Monitor 40 | \$8,066.00 |
| Dell Laptops 25 | \$25,000.00 |
| Video Cables 50 | \$0.00 |
| WAP and licensing 25 | \$37,049.22 |
| Cabling and Data Drops | \$11,500.00 |
| web cams 100 | \$4,500.00 |
| wyse thin client w/mgmt license 80 | \$30,000.00 |
| ups for mobile system 30 | \$5,255.00 |
| secure computer enclosure 25 | \$12,001.84 |
| wall mount 15 | \$2,865.90 |
| Surge protectors | \$0.00 |
| hardware 150 | \$3,000.00 |
| printer 2 | \$1,000.00 |
| Rugged laptops for use by staff inside facility (10) | \$30,000.00 |
| Cisco Phones 3 | \$1,350.00 |
| Peripherals (Keyboard, mouse, HDMI/Cables | \$0.00 |
| Reinforced computer cabinets for Max | \$8,000.00 |
| Antenna (65) | \$1,650.00 |
| VC Camera for BCC (2) | \$6,000.00 |
| UPS to supply uninterrupted power to monitors | \$0.00 |
| cisco desk phone 2 | \$1,600.00 |
| Headsets 100 | \$3,720.36 |
| ROUNDED TOTAL | \$193,668.32 |

**AMENDMENT 1
OF CONTRACT Z-23-263574-00**

This Amendment is made and entered by and between the State of Tennessee, Department of Health, hereinafter referred to as the "State" and The State of Tennessee, DAVIDSON County Sheriff's Office, hereinafter referred to as the "Contractor." For good and valuable consideration, the sufficiency of which is hereby acknowledged, it is mutually understood and agreed by and between said, undersigned contracting parties that the subject contract is hereby amended as follows:

- 1. Contract section B. TERM OF CONTRACT is deleted in its entirety and replaced with the following:

B. TERM OF CONTRACT:

This Grant Contract shall be effective on August 1, 2021 ("Effective Date") and extend for a period of Thirty-five (35) months after the Effective Date ("Term"). The State shall have no obligation to the Grantee for fulfillment of the Scope outside the Term.

- 2. Grant Contract Attachment 2 and 3 are deleted in their entirety and replaced with the new attachment 2 and 3 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 Contract not expressly amended herein shall remain in full force and effect.

IN WITNESS WHEREOF,

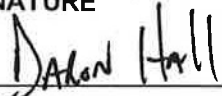
DAVIDSON COUNTY SHERIFF'S OFFICE:



4-20-23

SIGNATURE

DATE



PRINTED NAME AND TITLE OF SIGNATORY (above)

DEPARTMENT OF HEALTH:

Ralph Alvarado

Digitally signed by Ralph Alvarado
DN: cn=Ralph Alvarado, o, ou,
email=lindsay.r.oliveras@tn.gov, c=US
Date: 2023.05.05 14:41:59 -05'00'

RALPH ALVARADO, MD, FACP, COMMISSIONER

DATE

**SIGNATURE PAGE
FOR
GRANT NO. Z-23-263574**

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

**METROPOLITAN GOVERNMENT OF
NASHVILLE AND DAVIDSON COUNTY**



Sheriff Department

9-14-23

Date

APPROVED AS TO AVAILABILITY
OF FUNDS:



Director of Finance

10/24/2023 | 1:58 PM CDT

Date

APPROVED AS TO RISK AND INSURANCE:



Director of Insurance

10/24/2023 | 3:57 PM CDT

Date

APPROVED AS TO FORM AND
LEGALITY:



Metropolitan Attorney

10/24/2023 | 3:54 PM CDT

Date

Freddie O'Connell
Metropolitan Mayor

Date

ATTEST:

Metropolitan Clerk

Date

ATTACHMENT 2**Federal Award Identification Worksheet**

| | |
|---|---|
| Subrecipient's name (must match name associated with its Unique Entity Identifier (SAM)) | Metropolitan Government of Nashville and Davidson County |
| Subrecipient's Unique Entity Identifier (SAM) | |
| Federal Award Identification Number (FAIN) | NU50CK000528 |
| Federal award date | 08/05/2021 |
| Subaward Period of Performance Start and End Date | 08/01/2020 – 07/31/2024 |
| Subaward Budget Period Start and End Date | 08/01/2019 – 07/31/2024 |
| Assistance Listing number (formerly known as the CFDA number) and Assistance Listing program title. | 93.323 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) |
| Grant contract's begin date | 08/01/2021 |
| Grant contract's end date | 06/30/2024 |
| Amount of federal funds obligated by this grant contract | \$750,000.00 |
| Total amount of federal funds obligated to the subrecipient | |
| Total amount of the federal award to the pass-through entity (Grantor State Agency) | \$31,366,278.00 |
| Federal award project description (as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA)) | ELC Detection and mitigation of COVID in Confinement Facilities |
| Name of federal awarding agency | The Centers for Disease Control and Prevention |
| Name and contact information for the federal awarding official | Robert Williams GMS Qji0@cdc.gov 404-498-4034 |
| Name of pass-through entity | State of Tennessee Department of Health |
| Name and contact information for the pass-through entity awarding official | Valerie Oliver Director, Fiscal Services Valerie.oliver@tn.gov 615-532-7121 |
| Is the federal award for research and development? | No |
| Indirect cost rate for the federal award (See 2 C.F.R. §200.331 for information on type of indirect cost rate) | 13.1% at the time of this contract. |

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 1)

DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning August 1, 2021 and ending June 30, 2024.

| POLICY 03 Object Line-item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
|---|---|---------------------|----------------------------|---------------------|
| 1 | Salaries ² | \$268,100.00 | \$0.00 | \$268,100.00 |
| 2 | Benefits & Taxes | \$115,283.00 | \$0.00 | \$115,283.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$7,000.00 | \$0.00 | \$7,000.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 | \$219,634.76 | \$0.00 | \$219,634.76 |
| 22 | Indirect Cost (% and method) | \$139,982.24 | \$0.00 | \$139,982.24 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$750,000.00 | \$0.00 | \$750,000.00 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 2)

| DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19 | | | | |
|---|---|----------------|----------------------------|---------------|
| APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning August 1, 2021 and ending June 30, 2022. | | | | |
| POLICY 03 Object Line-item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
| 1 | Salaries ² | \$0.00 | \$0.00 | \$0.00 |
| 2 | Benefits & Taxes | \$0.00 | \$0.00 | \$0.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$0.00 | \$0.00 | \$0.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 (22.948% PER LOCAP/IDCRP) | \$0.00 | \$0.00 | \$0.00 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$0.00 | \$0.00 | \$0.00 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 3)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|------|-------------|-----|----------------------------|--------|
| GROCE, K; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| GOURLEY, C; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| ROUNDED TOTAL | | | | | \$0.00 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT |
|--------------------------------|--------|
| TRAVEL FOR TRAINING | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| INTEREST | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| DEPRECIATION | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| CAPITAL PURCHASE | AMOUNT |
|------------------------------------|--------|
| 20" Dell Monitor 15 | \$0.00 |
| wyse thin client w/mgmt license 16 | \$0.00 |
| ups for mobile system 14 | \$0.00 |
| secure computer enclosure 3 | \$0.00 |
| wall mount 36 | \$0.00 |
| surge protectors 20 | \$0.00 |
| Headsets 9 | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 4)

DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19

APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2022 and ending June 30, 2023.

| PROJECT 03 Object Line-item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
|--|---|---------------------|----------------------------|---------------------|
| 1 | Salaries ² | \$268,100.00 | \$0.00 | \$268,100.00 |
| 2 | Benefits & Taxes | \$115,283.00 | \$0.00 | \$115,283.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$7,000.00 | \$0.00 | \$7,000.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 | \$219,634.76 | \$0.00 | \$219,634.76 |
| 22 | Indirect Cost (22.948% PER LOCAP/IDCRP) | \$139,982.24 | \$0.00 | \$139,982.24 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$750,000.00 | \$0.00 | \$750,000.00 |

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*. (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
(BUDGET PAGE 5)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|---------------|-------------|-----|----------------------------|--------------|
| GROCE, K; VIRTUAL SERVICES SPECIALIST | \$10,238.00 | 12 | | 110.00 | \$122,966.00 |
| GOURLEY, C; VIRTUAL SERVICES SPECIALIST | \$12,020.00 x | 12 | | 935.00 | \$145,175.00 |
| ROUNDED TOTAL | | | | | \$268,100.00 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT |
|--------------------------------|------------|
| TRAVEL FOR TRAINING | \$7,000.00 |
| ROUNDED TOTAL | \$7,000.00 |

| INTEREST | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| DEPRECIATION | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT |
|---|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 |
| ROUNDED TOTAL | \$0.00 |

| CAPITAL PURCHASE | AMOUNT |
|--|--------------|
| Logitech Conference Cam (6) @\$500.00 | \$3,000.00 |
| Mobile TV Stand 22 | \$8,800.00 |
| 65" TV for mobile units 25 | \$12,750.00 |
| 70" TV | \$1,700.00 |
| 20" Dell Monitor 40 | \$8,066.00 |
| Dell Laptops 25 | \$25,000.00 |
| Video Cables 50 | \$500.00 |
| WAP and licensing 25 | \$37,049.22 |
| Cabling and Data Drops | \$11,500.00 |
| web cams 100 | \$4,500.00 |
| wyse thin client w/mgmt license 60 | \$30,000.00 |
| ups for mobile system 30 | \$5,255.00 |
| secure computer enclosure 25 | \$12,001.84 |
| wall mount 15 | \$2,865.90 |
| Surge protectors | \$217.00 |
| hardware 150 | \$3,000.00 |
| printer 2 | \$1,000.00 |
| Rugged laptops for use by staff inside facility (10) | \$30,000.00 |
| Cisco Phones 3 | \$1,350.00 |
| Peripherals (Keyboard, mouse, HDMI/Cables | \$1,000.00 |
| Reinforced computer cabinets for Max | \$6,000.00 |
| Antenna (65) | \$1,650.00 |
| VC Camera for BCC (2) | \$6,000.00 |
| UPS to supply uninterrupted power to monitors | \$1,050.00 |
| cisco desk phone 2 | \$1,600.00 |
| Headsets 100 | \$3,779.80 |
| ROUNDED TOTAL | \$219,634.76 |

ATTACHMENT 3

GRANT BUDGET ROLL-UP

(BUDGET PAGE 6)

| DAVIDSON COUNTY - ELC CONFINEMENT FACILITIES GRANT FOR THE DETECTION AND MITIGATION OF COVID 19 | | | | |
|---|---|----------------|----------------------------|---------------|
| APPLICABLE PERIOD: The grant budget line-item amounts below shall be applicable only to expense incurred during the period beginning July 1, 2023 and ending June 30, 2024. | | | | |
| POLICY 03 Object Line-Item Reference | EXPENSE OBJECT LINE-ITEM CATEGORY ¹ (detail schedule(s) attached as applicable) | GRANT CONTRACT | GRANTEE MATCH ³ | TOTAL PROJECT |
| 1 | Salaries ² | \$0.00 | \$0.00 | \$0.00 |
| 2 | Benefits & Taxes | \$0.00 | \$0.00 | \$0.00 |
| 4, 15 | Professional Fee/ Grant & Award ² | \$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 ² | \$0.00 | \$0.00 | \$0.00 |
| 13 | Interest ² | \$0.00 | \$0.00 | \$0.00 |
| 14 | Insurance | \$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 (22.948% PER LOCAP/IDCRP) | \$0.00 | \$0.00 | \$0.00 |
| 24 | In-Kind Expense | \$0.00 | \$0.00 | \$0.00 |
| 25 | GRAND TOTAL | \$0.00 | \$0.00 | \$0.00 |

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*, (posted on the Internet at: <https://www.tn.gov/finance/looking-for/policies.html>).

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

ATTACHMENT 3 (continued)
GRANT BUDGET LINE-ITEM DETAIL
 (BUDGET PAGE 7)

| SALARIES | Rate | # of Months | Pct | (Longevity, if applicable) | AMOUNT |
|---|------|-------------|-----|----------------------------|--------|
| GROCE, K; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| GOURLEY, C; VIRTUAL SERVICES SPECIALIST | | | | | \$0.00 |
| ROUNDED TOTAL | | | | | \$0.00 |

| PROFESSIONAL FEE/ GRANT & AWARD | AMOUNT | |
|---|--------|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| TRAVEL/ CONFERENCES & MEETINGS | AMOUNT | |
|--------------------------------|--------|--------|
| TRAVEL FOR TRAINING | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| INTEREST | AMOUNT | |
|---|--------|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| SPECIFIC ASSISTANCE TO INDIVIDUALS | AMOUNT | |
|---|--------|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| DEPRECIATION | AMOUNT | |
|---|--------|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| OTHER NON-PERSONNEL | AMOUNT | |
|---|--------|--------|
| SPECIFIC, DESCRIPTIVE, DETAIL (REPEAT ROW AS NECESSARY) | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |

| CAPITAL PURCHASE | AMOUNT | |
|---------------------------------------|--------|--------|
| Logitech Conference Cam (6) @\$500.00 | \$0.00 | |
| Mobile TV Stand 22 | \$0.00 | |
| 65" TV for mobile units 25 | \$0.00 | |
| 70" TV | \$0.00 | |
| 20" Dell Monitor 40 | \$0.00 | |
| ROUNDED TOTAL | | \$0.00 |


Certificate Of Completion

| | |
|---|-------------------------------|
| Envelope Id: E5EBC942CB594ED188628001800D8A51 | Status: Completed |
| Subject: Complete with DocuSign: SHOC5E~1.PDF | |
| Source Envelope: | |
| Document Pages: 27 | Signatures: 10 |
| 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 |

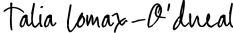
Record Tracking

| | | |
|--------------------------------------|--|--------------------|
| Status: Original | Holder: Juanita Paulson | Location: DocuSign |
| 10/19/2023 10:12:29 AM | 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 |
|--|---|--------------------------------|
| Amanda Brown |  | Sent: 10/19/2023 10:22:32 AM |
| Amanda.Brown@nashville.gov | | Viewed: 10/19/2023 10:30:36 AM |
| Security Level: Email, Account Authentication (None) | | Signed: 10/19/2023 10:30:42 AM |
| | Signature Adoption: Pre-selected Style | |
| | Using IP Address: 170.190.198.185 | |

Electronic Record and Signature Disclosure:
 Accepted: 10/19/2023 10:30:36 AM
 ID: 36e4475f-4e93-464d-91bb-9373ea68917d

| | | |
|--|---|--------------------------------|
| Talia Lomax-O'dneal |  | Sent: 10/19/2023 10:30:44 AM |
| talia.lomaxodneal@nashville.gov | | Resent: 10/24/2023 11:43:41 AM |
| Dep Dir of Finance | | Viewed: 10/24/2023 11:44:37 AM |
| Security Level: Email, Account Authentication (None) | Signed: 10/24/2023 11:45:02 AM | |
| | Signature Adoption: Pre-selected Style | |
| | Using IP Address: 170.190.198.190 | |

Electronic Record and Signature Disclosure:
 Accepted: 10/24/2023 11:44:37 AM
 ID: f78e0159-b2f4-4535-9617-f5ce0470c1db

| | | |
|--|---|-------------------------------|
| Kevin Crumbo/mjw |  | Sent: 10/24/2023 11:45:05 AM |
| MaryJo.Wiggins@nashville.gov | | Viewed: 10/24/2023 1:55:41 PM |
| Security Level: Email, Account Authentication (None) | | Signed: 10/24/2023 1:58:31 PM |
| | Signature Adoption: Pre-selected Style | |
| | Using IP Address: 170.190.198.190 | |

Electronic Record and Signature Disclosure:
 Accepted: 10/24/2023 1:55:41 PM
 ID: 6faa9e16-7a25-4bc8-b368-3219e3eb6d14

| | | |
|--|---|-------------------------------|
| Courtney Mohan |  | Sent: 10/24/2023 1:58:34 PM |
| Courtney.Mohan@nashville.gov | | Viewed: 10/24/2023 3:07:23 PM |
| Security Level: Email, Account Authentication (None) | | Signed: 10/24/2023 3:54:01 PM |
| | Signature Adoption: Pre-selected Style | |
| | Using IP Address: 170.190.198.185 | |

| Signer Events | Signature | Timestamp |
|---------------|-----------|-----------|
|---------------|-----------|-----------|

Electronic Record and Signature Disclosure:
Accepted: 10/24/2023 3:07:23 PM
ID: deed3542-03a9-44e1-865b-6d0d6cdf9948

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



Sent: 10/24/2023 3:54:03 PM
Viewed: 10/24/2023 3:57:17 PM
Signed: 10/24/2023 3:57:34 PM

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

Electronic Record and Signature Disclosure:
Accepted: 10/24/2023 3:57:17 PM
ID: 9f89bf98-485c-4a6a-9eb7-ead42014e1c8

| In Person Signer Events | Signature | Timestamp |
|-------------------------|-----------|-----------|
|-------------------------|-----------|-----------|

| Editor Delivery Events | Status | Timestamp |
|------------------------|--------|-----------|
|------------------------|--------|-----------|

| Agent Delivery Events | Status | Timestamp |
|-----------------------|--------|-----------|
|-----------------------|--------|-----------|

| Intermediary Delivery Events | Status | Timestamp |
|------------------------------|--------|-----------|
|------------------------------|--------|-----------|

| Certified Delivery Events | Status | Timestamp |
|---------------------------|--------|-----------|
|---------------------------|--------|-----------|

| Carbon Copy Events | Status | Timestamp |
|--------------------|--------|-----------|
|--------------------|--------|-----------|

Danielle Godin
Danielle.Godin@nashville.gov
Security Level: Email, Account Authentication (None)

COPIED

Sent: 10/24/2023 3:57:36 PM

Electronic Record and Signature Disclosure:
Not Offered via DocuSign

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

COPIED

Sent: 10/24/2023 3:57:37 PM
Viewed: 10/25/2023 8:15:12 AM

Electronic Record and Signature Disclosure:
Accepted: 10/19/2023 8:31:41 AM
ID: 564644b2-e8bd-4939-98fb-03e95f1255e2

| Witness Events | Signature | Timestamp |
|----------------|-----------|-----------|
|----------------|-----------|-----------|

| Notary Events | Signature | Timestamp |
|---------------|-----------|-----------|
|---------------|-----------|-----------|

| Envelope Summary Events | Status | Timestamps |
|-------------------------|--------|------------|
|-------------------------|--------|------------|

| | | |
|---------------------|------------------|------------------------|
| Envelope Sent | Hashed/Encrypted | 10/19/2023 10:22:32 AM |
| Envelope Updated | Security Checked | 10/24/2023 11:43:40 AM |
| Envelope Updated | Security Checked | 10/24/2023 11:43:41 AM |
| Envelope Updated | Security Checked | 10/24/2023 11:43:41 AM |
| Envelope Updated | Security Checked | 10/24/2023 11:43:41 AM |
| Certified Delivered | Security Checked | 10/24/2023 3:57:17 PM |
| Signing Complete | Security Checked | 10/24/2023 3:57:34 PM |
| Completed | Security Checked | 10/24/2023 3:57:37 PM |

| Payment Events | Status | Timestamps |
|----------------|--------|------------|
|----------------|--------|------------|

| Electronic Record and Signature Disclosure |
|--|
|--|