

GRANT SUMMARY SHEET

Grant Name: Nashville Predator Foundation Weber Woof Pack 21-21

Department: HEALTH DEPARTMENT

Grantor: NASHVILLE PREDATORS FDN

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

Total Award this Action: \$5,000.00

Cash Match \$0.00

Department Contact: Brad Thompson
340-0407

Status: CONTINUATION

Program Description:

Grant from the Nashville Predators Foundation to pay for adoption fees as part of the "Clear the Shelter" event.

Plan for continuation of services upon grant expiration:

The services would be discontinued.

B.A. Initials

^{DS}
RW

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: Nashville Predator Foundation Weber Woof Pack 21-21					
Grantor: NASHVILLE PREDATORS FDN					
Grant Period From: 12/01/21		(applications only) Anticipated Application Date:			
Grant Period To: 12/31/21		(applications only) Application Deadline:			
Funding Type: FOUNDATION	Multi-Department Grant <input type="checkbox"/>		If yes, list below.		
Pass-Thru:	Outside Consultant Project: <input type="checkbox"/>				
Award Type: OTHER	Total Award: \$5,000.00				
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 checked="" type="checkbox"/>				
Project Description:		Applic. Submitted Electronically? <input type="checkbox"/>			
Grant from the Nashville Predators Foundation to pay for adoption fees as part of the "Clear the Shelter" event.					
Plan for continuation of service after expiration of grant/Budgetary Impact:					
The services would be discontinued					
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		24.82%	Indirect Cost of Grant to Metro:		\$1,241.00
*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	FY22			\$5,000.00	\$0.00		\$0.00	\$5,000.00	\$1,241.00	\$0.00
Yr 2	FY									
Yr 3	FY									
Yr 4	FY									
Yr 5	FY									
Total		\$0.00	\$0.00	\$5,000.00	\$0.00		\$0.00	\$5,000.00	\$1,241.00	\$0.00
Date Awarded:				01/18/22	Tot. Awarded:		\$5,000.00	Contract#: CHECK		
(or) Date Denied:					Reason:					
(or) Date Withdrawn:					Reason:					

Contact: trinity.weathersby@nashville.gov
vaughn.wilson@nashville.gov

GCP RECEIVED 1/18/22

GCP APPROVED 1/19/22

TW



METRO NASHVILLE
ANIMAL CARE & CONTROL

Receipt Number: **R21-213039** **Metro Animal Care And Control**
5125 Harding Place, Nashville, TN 37211
(615) 862-7928

Person Information: **NASHVILLE PREDA FOUNDATION**
501 BROADWAY
NASHVILLE, TN 37203
Phone: (615) 642-5758
Check / Card No:

Receipt Date: **Saturday, December 18, 2021**

PID: P243274

Item:	Animal ID:	Reference No:	Price:	Each:	Amount:
DONATION		#8527	\$5000.00	1	5,000.00
Total Fees Due:					\$5000.00
Payments:					
				Cash:	\$0.00
				Check:	\$5,000.00
				Credit Card:	\$0.00
Total Payments Received:					\$5000.00

Thank You!

Change: \$0.00
Balance Due: \$0.00

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.**

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

Nashville Predators Foundation
V-003841--Metro Animal Care and Control
Print As: Metro Animal Care and Control

5125 Harding Place
Nashville, TN 37211

8527
First Horizon
First TN-Foundation 1247
Date: 12/10/2021

Date	Bill #	Reference Number	Location	Amount Entered	Amount Paid
12/09/2021	2021 Donation	900	400	\$5,000.00	\$5,000.00
8100.1000--Contributions		2021 Donation - Clear the Shelter with NFD			
Net Amount:					\$5,000.00

REORDER FORM #075LB6

Nashville Predators Foundation
501 Broadway
Nashville, TN 37203

First Horizon
511 Union Street
Nashville, TN
37219

8527
Date: 12/10/2021

87-520/640

Pay Five Thousand Dollars

\$5,000.00

Pay Metro Animal Care and Control

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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

1/18/2022
Date

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

1/18/2022
Date

APPROVED AS TO AVAILABILITY OF FUNDS:

DocuSigned by:
Kelly Flannery/mjw
62377A2A8742168...
Director, Department of Finance

1/26/2022
Date

APPROVED AS TO RISK AND INSURANCE:

DocuSigned by:
Balogun Cobb
68804BF12FDZ416...
Director of Risk Management Services

1/27/2022
Date

APPROVED AS TO FORM AND LEGALITY:

DocuSigned by:
Nicki Eke
39FF064CB15190...
Metropolitan Attorney

1/27/2022
Date

FILED:

Metropolitan Clerk

Date