#### **GRANT SUMMARY SHEET**

**Grant Name:** Friends of MACC & Control Emergency Medical Care 21-21

**Department:** HEALTH DEPARTMENT

**Grantor:** FRIENDS OF MACC

**Pass-Through Grantor** 

(If applicable):

**Total Award this Action:** \$2,500.00 **Cash Match** \$0.00

**Department Contact:** Brad Thompson

340-0407

Status: CONTINUATION

#### **Program Description:**

This is a grant from the nonprofit Friends of Metro Animal Care & Control to provide emergency medical care to animals at Metro Animal Care and Control.

### Plan for continuation of services upon grant expiration:

N/A

Page 1 of 1

# Grants Tracking Form Part One

Pre-Appli	cation	0	Application O		Award Acceptance	● c	ontract Amendmer	nt O		
	Depar	tment	Dept. No.			Contact			Phone	Fax
HEALTH DE	PARTMEN <sup>®</sup>	IT ▼	038	Brad Thompson					340-0407	
Grant Na	me:		Friends of MACC &	Control Emergency	Medical Care 21-21					
Grantor:			FRIENDS OF MACC			▼	Other:			
Grant Per	riod Fron	m:	05/01/21		(applications only) A	nticipated Application	on Date:			
Grant Per	riod To:		06/30/21		(applications only) A	pplication Deadline:				
Funding '	Type:		FOUNDATION	•	N	//ulti-Department Gra	ant		► If yes, list be	elow
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Award Ty			OTHER	_		Total Award:	, 0,000.	\$2,500.00		
Status:	ро.		CONTINUATION			Metro Cash Match:		\$0.00		
Metro Ca	tegory:		Est. Prior.	▼		Metro In-Kind Match:		\$0.00		
CFDA#	logory.		N/A	•		s Council approval r		<b>₩</b>		
Project D	occrintic		I W/A			pplic. Submitted Ele	•			
			nds of Metro Animal C	are & Control to pro		lical care to animals a				
Plan for o	continuat	tion of service aft	er expiration of grar	nt/Budgetary Impac	et:		1			
How is M	atch Det	termined?								
Fixed Am	ount of \$	\$		or		% of Grant		Other:		
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Explanati			letermining match: e required local Metr	o cash match:						
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 $\begin{array}{ccc} \textbf{Contact:} & \underline{trinity.weathersby@nashville.gov} \\ & \underline{vaughn.wilson@nashville.gov} \end{array}$ 

Date Awarded:

(or) Date Denied:

(or) Date Withdrawn:

Rev. 5/13/13 5248

GCP Rec'd 05/24/21

05/18/21

Tot. Awarded:

Reason:

Reason:

GCP Approved 05/24/21

\$2,500.00

Contract#:

VW

CHECK

DocuSign Envelope ID: C10CD2F0-A7ED-442B-B3E9-E70DD0D5BE81

FRIENDS OF MACC 812 FATHERLAND STREET NASHVILLE, TN 37206	A dog is the only thing a 1014 87-1/640
Pay to the Metro Animal Care and Grid	\$ 2,500.00
Two thousand five hundred dollars a	Dollars & Security Sealure of Security Sealure of Security Sealure of Security Security of
REGIONS BANK	that loves you more than he loves himself.
For Emergency Medical Fund S	nalu K
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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

Tina Lester	5/18/2021
Interim Administrative Director Metro Public Health Department	Date
DocuSigned by:  Mex Jahangir  7507364040644016	5/18/2021
Chair, Board of Health  APPROVED AS TO AVAILABILITY OF FUNDS:	Date
Docusigned by:  Levin (rumbo/mfw  Director;4Department of Finance	6/1/2021 Date
APPROVED AS TO RISK AND INSURANCE:	
— Docusigned by: Balogun (obb Director of Risk Management Services	6/2/2021 Date
APPROVED AS TO FORM AND LEGALITY:	
— Docusigned by: <u>Muli Floution</u> Metropolitan Attorney	6/2/2021 Date
FILED:	Date
Metropolitan Clerk	Date