

Blount County, Tennessee Grant (Contract) Worksheet

(adopted February 21, 2013)

Please provide the information below for any Grant being applied for or recently awarded.

Once completed, return the worksheet via e-mail to the Grant Accountant at accounting@blounttn.org.

Requesting Department: Circuit Court Clerk
Contact Person's Name, email, phone # (person applying for grant): Tamra Walker twalker@blounttn.org 865-273-5461
Financial Reporting Person's information (if different than contact): _____
Project/Program Director's Name, email, phone # Chris Cantrell ccantrell@bcso.com 865-273-5000
Name of Granting Agency: TN Administrative Office of the Courts
Grant Name: Courtroom Security Grant Application 2023-2024
Is a grant application required? YES NO _____
Is this a one-time grant? YES NO _____ If no, is the grant recurring? _____

Grant Funds Requested: \$ 10,288.32

Are County Funds Required (Match)? If so when approved, a budget amendment for match will need to be included with this form
No

Total Amount of Grant: 10,288.32

Brief Description for Use of Grant Funds: (Equipment, Gear, Personnel, etc.)

Install new cameras in Entrance ,2nd & 3rd Floor Holding cells
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If the grant is in the application processes, what is the submission deadline? Missed first deadline but can still submit

Worksheet reviewed by - _____
Grant Accountant and/or Finance Director: _____

Date of Commission approval: _____

Please provide the remaining information once the Grant is approved.

Grant CFDA# (Catalog of Federal Domestic Assistance): _____

Date of Grant Award: _____

Grant Period: (such as: Oct 1 - Sept 30) _____

Expiration Date of Grant, as established by the Granting Agency: _____

Anticipated Closing Date of Grant Project: _____

How will we receive the Grant Funds? (direct deposit, check, other) _____

How often will the Grant Funds be sent? (monthly, quarterly, one payment, other) _____

**** Attach Budget Amendment(s) to this form when grant approved ****