

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: Blount County Sheriff's Office

Contact Person's Name, email, phone # (person applying for grant): Angelie Shankle, ashankle@bcso.com, 273-5124

Financial Reporting Person's information (if different than contact): Angelie Shankle, ashankle@bcso.com, 273-5124

Project/Program Director's Name, email, phone # Chief Jarrod Millsaps, jmillsaps@bcso.com 273-5132

Name of Granting Agency: USDOJ, Bureau of Justice Assistance

Grant Name: Blount County Sheriff 2024-25 Edward Byrne Memorial JAG Local Solicitation.

Is a grant application required? YES X NO

Is this a one-time grant? YES NO X If no, is the grant recurring?

Grant Funds Requested: \$17,567.00

Are County Funds Required (Match)? If so when approved, a budget amendment for match will need to be included with this form No matching funds required. 100% federal funds

Total Amount of Grant: \$17,567.00

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

Grant to purchase Law Enforcement Equipment: requesting a special spotlight for special team situations, allowing for higher visibility during the working of cases/incidents.

If the grant is in the application processes, what is the submission deadline? 10/22/2024

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): CFDA #16.738

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 ****