

**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](mailto:accounting@blounttn.org).

Requesting Department: Register of Deeds

Contact Person's Name, email, phone # (person applying for grant): Phyllis Crisp, pcrisp@blounttn.org, 273-5886

Financial Reporting Person's information (if different than contact): \_\_\_\_\_

Project/Program Director's Name, email, phone # \_\_\_\_\_

Name of Granting Agency: Tennessee State Library and Archives

Grant Name: Direct Grants to Local Government Archives

Is a grant application required? YES ☒ NO ☐

Is this a one-time grant? YES ☒ NO ☐ If no, is the grant recurring? \_\_\_\_\_

**Grant Funds Requested:** \$5,000

**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:** \$ 5,000

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

Scanning and binding repair of old bound books.

If the grant is in the application processes, what is the submission deadline? 11-Sep-17

Worksheet reviewed by - \_\_\_\_\_

Grant Accountant and/or Finance Director: Angelia Shamblee

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 \*\*\*\*