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:	Records Management & Archives Department
Contact Person's Name, email, phone # (person applying for grant):	Logan Tallent, Italient@blounttn.org
Financial Reporting Person's information (if different than	
contact):	Jackie Glenn
Project/Program Director's Name, email, phone #	Jackie Glenn, jglenn@blounttn.org ph.#865-380-4295
Name of Granting Agency:	TN State Library and Archives, THRAB - SBPG grant
Grant Name:	State Board Programming Grant
Is a grant application required?	Yes _X_ NO If no, is the grant recurring?
Is this a one-time grant?	YesX NO If no, is the grant recurring?
Grant Funds Requested:	\$ 5,000.00
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.)	Digitizing and repairing approx 18 County Court Minute Books
If the grant is in the application processes, what is the submission deadline?	25-Sep-17
Worksheet reviewed by -	25-3ep-17
Grant Accountant and/or Finance Director:	
Date of Commission approval:	
Please provide the remaining information once the Grant is a	pproved.
Grant CFDA# (Catalog of Federal Domestic Assistance):	
Date of Grant Award:	·
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 ****