

RESOLUTION NO. _____

A RESOLUTION AUTHORIZING THE GANG TASK FORCE COORDINATOR TO EXECUTE A PERSONAL SERVICES CONTRACT WITH JOHN HAYES, PH.D., NOT TO EXCEED TEN THOUSAND DOLLARS (\$10,000.00) FOR VARIOUS SERVICES TO BE ASSIGNED ON AN AS-NEEDED BASIS FOR GRANT WRITING, PROGRAM MONITORING, RESEARCH, AND EVALUATION, WITH A CONTRACT TERM UNTIL JUNE 30, 2013.

BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF CHATTANOOGA, that it is hereby authorizing the Gang Task Force Coordinator to execute a personal services contract with John Hayes, Ph.D., not to exceed \$10,000.00 for various services to be assigned on an as-needed basis for grant writing, program monitoring, research, and evaluation, with a contract term until June 30, 2013.

ADOPTED: _____, 2012

/mms

City of Chattanooga



Resolution Request Form

(This form is only required for resolutions requiring expenditure of City funds)

Date Prepared: 11/15/2012

Preparer: Boyd Patterson

Department: Mayor's Office/Gang Task Force

Brief Description of Purpose for Resolution:

Resolution Number (if approved by Council): _____

The Gang Task Force requests a personal services contract with John Hayes, Ph.D., not to exceed \$10,000 for various services

to be assigned on an as-needed basis for grant writing, program monitoring, research and evaluation.

All duties for Dr. Hayes will be assigned by Boyd Patterson, Coordinator, Gang Task Force.

This contract will be valid until June 30, 2013.

Name of Vendor/Contractor/Grant, etc.	<u>John Hayes, Ph.D.</u>
Total project cost \$	<u>10,000</u>
Total City of Chattanooga Portion \$	<u>10,000</u>
City Amount Funded \$	<u>10,000</u>
New City Funding Required \$	_____
City's Match Percentage %	<u>0%</u>

New Contract/Project? (Yes or No)	<u>Yes</u>
Funds Budgeted? (YES or NO)	<u>Yes</u>
Provide Fund	<u>1100</u>
Provide Cost Center	<u>B00105</u>
Proposed Funding Source if not budgeted	_____
Grant Period (if applicable)	_____

List all other funding sources and amount for each contributor.

Amount(s)

Grantor(s)

\$ _____

\$ _____

Agency Grant Number _____

CFDA Number if known: _____

Other comments: (Include contingency amount, contractor, and other information useful in preparing resolution)

Approved by: _____

Reviewed by: FINANCE OFFICE

DESIGNATED OFFICIAL/ADMINISTRATOR

Please submit completed form to @budget, City Attorney and City Finance Officer