

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION AUTHORIZING THE ADMINISTRATOR OF THE DEPARTMENT OF YOUTH AND FAMILY DEVELOPMENT TO ENTER INTO A RENTAL AGREEMENT WITH THE McCALLIE/GPS AQUATIC CLUB FOR SWIMMING MEETS FROM JULY 10, 2014 THROUGH JULY 12, 2014, FOR A CONTRACT RENTAL FEE IN THE AMOUNT OF ONE THOUSAND DOLLARS (\$1,000.00).

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BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF CHATTANOOGA, TENNESSEE, That the Administrator of the Department of Youth and Family Development is hereby authorized to enter into a Rental Agreement with the McCallie/GPS Aquatic Club for swimming meets from July 10, 2014 through July 12, 2014, for a contract rental fee in the amount of \$1,000.00.

ADOPTED: \_\_\_\_\_, 2014.

/mem

# City of Chattanooga



## Resolution/Ordinance Request Form

Date Prepared: 05/09/14

Preparer: Carla Johnson

Department: Youth & Family Development

Brief Description of Purpose for Resolution/Ordinance: Res./Ord. # \_\_\_\_\_ Council District # \_\_\_\_\_

Authorization for the Administrator of the Department of Youth and Family Development to enter into a Rental Agreement with the McCallie/GPS Aquatic Club from May 20, 2014 through August 1, 2014. The contract rental fee for the duration of this Agreement is Two Thousand Five Hundred and 00/100 (\$2,500.00).

Authorization for the Administrator of the Department of Youth and Family Development to enter into a Rental Agreement with the McCallie/GPS Aquatic Club for Swimming Meets July 10, 2014 through July 12, 2014. The contract rental fee of this Agreement is One Thousand and 00/100 (\$1,000.00).

Name of Vendor/Contractor/Grant, etc. \_\_\_\_\_  
Total project cost \$ \_\_\_\_\_  
Total City of Chattanooga Portion \$ \_\_\_\_\_  
City Amount Funded \$ \_\_\_\_\_  
New City Funding Required \$ \_\_\_\_\_  
City's Match Percentage % \_\_\_\_\_

New Contract/Project? (Yes or No) \_\_\_\_\_  
Funds Budgeted? (YES or NO) \_\_\_\_\_  
Provide Fund \_\_\_\_\_  
Provide Cost Center \_\_\_\_\_  
Proposed Funding Source if not budgeted \_\_\_\_\_  
Grant Period (if applicable) \_\_\_\_\_

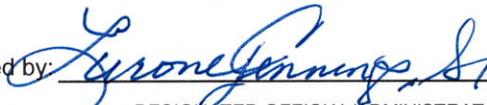
### List all other funding sources and amount for each contributor.

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:  DESIGNATED OFFICIAL/ADMINISTRATOR

Reviewed by: FINANCE OFFICE

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

Revised: October, 2011