



BUDGET REVISION NARRATIVE

AGENCY NAME:	0	SUBGRANT NO:	0
CONTACT PERSON:	0	REVISION NO:	1
ADDRESS:	0	TELEPHONE:	-
	0	FAX:	-
PROJECT MONITOR:	0		

Budgeted amounts reflect anticipated costs and matching local contributions of the subgrant project. Good planning skills enable a subgrantee to design a budget that is adequate to cover the necessary costs, but even then actual expenses can run higher or lower than anticipated.

The subgrantee may identify the need to adjust a new subgrant budget after the subgrant's start date; therefore, budget revision requests will be considered after the completion of the first month of the project period. By the third quarter; however, subgrant expenditures should be well established, eliminating the need for additional adjustments. The administrator will not consider budget modification requests received within the last quarter of a subgrant period. Budget Revisions must be received by DFA/IGS, no later than 4:30 p.m. May 10th.

(1) Please explain below why you are requesting a budget revision. Be detailed and give specifics of how and why the costs of the subgrant expenditures and/or activities have changed; include what impact will the revisions have on your ability to carry out subgrant (project) goals.

(2) Please provide the details of each change made by identifying the line item and the amount of change (+/-). This narrative should match and reflect the Budget Revision Worksheet.

****Please complete and attach the Budget Revision Worksheet to depict the budget changes that are being proposed.**

BUDGET REVISION WORKSHEET

AGENCY NAME:	0	SUBGRANT NO:	0
CONTACT PERSON:	0	REVISION NO:	1
ADDRESS:	0	TELEPHONE:	-
PROJECT MONITOR:	0	FAX:	-

BUDGET CATEGORY	APPROVED SUBGRANT BUDGET		AMOUNT OF CHANGE		REVISED BUDGET	
	COAP 19	Local Match	COAP 19	Increase or (Decrease)	COAP 19	Local Match
SALARIES						
SALARIES 01	-	-			-	-
SALARIES 02	-	-			-	-
SALARIES 03	-	-			-	-
SALARIES 04	-	-			-	-
SALARIES 05	-	-			-	-
MANDATED BENEFITS						
FICA @ 7.65% X total salary	-	-			-	-
Worker's Comp. for all Positions @ .5%	-	-			-	-
Unemployment @ 3.6% (10,000 X positions)	-	-			-	-
EMPLOYER BENEFITS						
Health Insurance	-	-			-	-
Retirement	-	-			-	-
MAINTENANCE AND OPERATIONS						
M&O 01	-	-			-	-
M&O 02	-	-			-	-
PROFESSIONAL SERVICES						
PROFSERV 01	-	-			-	-
PROFSERV 02	-	-			-	-
PROFSERV 03	-	-			-	-
PROFSERV 04	-	-			-	-
TRAVEL/ TRAINING						
TRVL/TRG 01	-	-			-	-
TRVL/TRG 02	-	-			-	-
EQUIPMENT						
EQUIP 01	-	-			-	-
EQUIP 02	-	-			-	-
EQUIP 03	-	-			-	-
EQUIP 04	-	-			-	-
EQUIP 05	-	-			-	-
TOTALS	\$ -	\$ -	\$ -		\$ -	\$ -

Category	COAP 19	Local Match	COAP 19	Local Match	COAP 19	Local Match
SALARIES	-	-	-	-	-	-
MANDATED BENEFITS	-	-	-	-	-	-
EMPLOYER BENEFITS	-	-	-	-	-	-
MAINTENANCE AND OPERATIONS	-	-	-	-	-	-
PROFESSIONAL SERVICES	-	-	-	-	-	-
TRAVEL/ TRAINING	-	-	-	-	-	-
EQUIPMENT	-	-	-	-	-	-
CAPITAL OUTLAY	-	-	-	-	-	-
	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

AUTHORIZED OFFICIAL SIGNATURE

DATE OF SIGNATURE

EFFECTIVE DATE OF CHANGE

DFA/IGS USE ONLY	RECEIVED DATE:	REVIEWED DATE:	APPROVED:	DENIED:	SIGNATURE	COMMENTS
PROJECT MONITOR			<input type="checkbox"/>	<input type="checkbox"/>		
PROGRAM MANAGER			<input type="checkbox"/>	<input type="checkbox"/>		
ACCOUNTING MANAGER			<input type="checkbox"/>	<input type="checkbox"/>		

Subrecipient must provide a detailed explanation of the requested changes and why funds should be moved within and/or among budget categories. No new line items can be added. Modifying the approved budget must not change the scope of the project. The subrecipient will receive a copy of the approved or denied budget modification request. The subrecipient shall not deviate from the approved budget until the modification is approved. **A completed Budget Revision Narrative must accompany this worksheet.**



DEPARTMENT OF FINANCE AND ADMINISTRATION
OFFICE OF INTERGOVERNMENTAL SERVICES

APPROVED BUDGETS

AGENCY NAME:		SUBGRANT NO:		PROJECT PERIOD:			
0		0		August 15, 2020- July 30, 2022			
ORIGINAL_BUDGET				REVISION_1			
BUDGETED LINE ITEM	ORIGINAL BUDGET AMOUNT (COAP 19)	ORIGINAL BUDGET AMOUNT (L)	BUDGETED LINE ITEM	ORIGINAL BUDGET AMOUNT (COAP 19)	ORIGINAL BUDGET AMOUNT (L)		
SALARIES			SALARIES				
SALARIES 01			SALARIES 01				
SALARIES 02			SALARIES 02				
SALARIES 03			SALARIES 03				
SALARIES 04			SALARIES 04				
SALARIES 05			SALARIES 05				
SALARIES 06			SALARIES 06				
SALARIES 07			SALARIES 07				
MANDATED BENEFITS			MANDATED BENEFITS				
FICA @ 7.65% X total salary			FICA @ 7.65% X total salary				
Worker's Comp. for all Positions @ .5%			Worker's Comp. for all Positions @ .5%				
Unemployment @ 3.6% (10,000 X positions)			Unemployment @ 3.6% (10,000 X positions)				
EMPLOYER BENEFITS			EMPLOYER BENEFITS				
Health Insurance			Health Insurance				
Retirement			Retirement				
MAINTENANCE AND OPERATIONS			MAINTENANCE AND OPERATIONS				
M&O 01			M&O 01				
M&O 02			M&O 02				
PROFESSIONAL SERVICES			PROFESSIONAL SERVICES				
PROFSERV 01			PROFSERV 01				
PROFSERV 02			PROFSERV 02				
PROFSERV 03			PROFSERV 03				
PROFSERV 04			PROFSERV 04				
TRAVEL/ TRAINING			TRAVEL/ TRAINING				
TRVL/TRG 01			TRVL/TRG 01				
TRVL/TRG 02			TRVL/TRG 02				
TRVL/TRG 03			TRVL/TRG 03				
TRVL/TRG 04			TRVL/TRG 04				
EQUIPMENT			EQUIPMENT				
EQUIP 01			EQUIP 01				
EQUIP 02			EQUIP 02				
EQUIP 03			EQUIP 03				
CAPITAL OUTLAY			CAPITAL OUTLAY				
TOTAL	\$ -	\$ -	TOTAL	\$ -	\$ -	\$ -	\$ -

Signature of Authorized Official/Date

Signature of Fiscal Officer/Date

Category	COAP 19	Local	Category	COAP 19	Local
SALARIES	-	-	SALARIES	-	-
MANDATED BENEFITS	-	-	MANDATED BENEFITS	-	-
EMPLOYER BENEFITS	-	-	EMPLOYER BENEFITS	-	-
MAINTENANCE AND OPERATIONS	-	-	MAINTENANCE AND OPERATIONS	-	-
PROFESSIONAL SERVICES	-	-	PROFESSIONAL SERVICES	-	-
TRAVEL/ TRAINING	-	-	TRAVEL/ TRAINING	-	-
EQUIPMENT	-	-	EQUIPMENT	-	-
CAPITAL OUTLAY	-	-	CAPITAL OUTLAY	-	-
Total	\$ -	\$ -	Total	\$ -	\$ -

Category	COAP 19	Local	TOTALS
SALARIES	-	-	\$ -
MANDATED BENEFITS	-	-	\$ -
EMPLOYER BENEFITS	-	-	\$ -
MAINTENANCE AND OPERATIONS	-	-	\$ -
PROFESSIONAL SERVICES	-	-	\$ -
TRAVEL/ TRAINING	-	-	\$ -
EQUIPMENT	-	-	\$ -
CAPITAL OUTLAY	-	-	\$ -
Total	\$ -	\$ -	\$ -