

**COLORADO DIVISION OF CRIMINAL JUSTICE
BUDGET REVISION (DCJ FORM 4-A)**

See page three to view full instructions for completing this form.

GRANTEE:	GRANT NUMBER:
PROJECT TITLE:	PROJECT DURATION FROM: _____ TO: _____
PREPARED BY: _____	PHONE: _____ DATE: _____

A GRANT MODIFICATION IS NOT AUTHORIZED UNTIL APPROVED IS RECEIVED IN WRITING FROM DCJ. To request a change, submit one signed form, including any required attachments, to DCJ. Once approved by DCJ, a copy will be returned for your records.

A. EXPLANATION OF BUDGET REVISION REQUEST & BUDGET NARRATIVE explaining and justifying the need for a budget revision (attach additional pages as needed).

B. BUDGET CHANGE (THE TOTAL AMOUNT OF THE FEDERAL/STATE AWARD CANNOT INCREASE OR DECREASE. TOTAL MATCH AMOUNT CHANGES MUST BE APPROVED.)

BUDGET CATEGORY	CURRENT APPROVED BUDGET				REQUESTED BUDGET CHANGE				AMOUNT of TOTAL CHANGE by line item + or (-)
	Federal/State Award	Cash Match *	In Kind Match *	Total	Federal/State Award	Cash Match *	In Kind Match*	Total	
Personnel									
Supplies & Operating									
Travel									
Equipment									
Consultants/ Contracts									
Indirect									
TOTAL									

* Cash and/or In Kind match may not apply. Refer to your Grant Agreement.

REQUIRED GRANTEE SIGNATURES: I certify that, to the best of my knowledge and belief, this report is correct and complete. I, hereby, also certify that the content of this form, other than the data entry required, has not been altered.

_____ PROJECT DIRECTOR _____ DATE _____ FINANCIAL OFFICER _____ DATE

*****Division of Criminal Justice Use Only*****

This Request (and all attachments) is: **APPROVED** by **General Approval and effective upon DCJ signature of this form****
 APPROVED by **Grant Agreement Modification and effective upon Modification Document Execution**
 DENIED

Reason: _____

_____ DCJ Grant Manager _____ Date

** All other terms and conditions of the original Grant Agreement & Approved Modifications are not altered by this approval.

INSTRUCTIONS FOR COMPLETING
BUDGET REVISION (DCJ FORM 4-A)

HEADING:

Grantee: This is the agency to which the grant award was made.

Grant Number: This is the grant number assigned to the project by DCJ. It can be found on the Grant Award Documents.

Project Title: This is the name of the project which is identified on the Grant Award Documents.

Project Duration: This is the period of the grant award. It can be found on the Grant Award Documents, and is changed only if the project requests and receives a grant extension.

Prepared by: This is the person completing this form. Include this person's 10-digit phone number.

Date: This is the date this form is completed.

- A. EXPLANATION OF BUDGET REVISION REQUEST & BUDGET NARRATIVE** explain and justify the need for a budget revision (attach additional pages as needed). Include an explanation on how costs were determined (i.e. what is being purchased, what is the individual costs, etc.).
- B. BUDGET CHANGE** (*THE TOTAL AMOUNT OF THE FEDERAL/STATE AWARD CANNOT INCREASE OR DECREASE. TOTAL MATCH AMOUNT CHANGES MUST BE APPROVED.*)

Current Approved Budget: If this is your first budget revision request, indicate the approved budget which can be found in the Grant Agreement.

If you have previously requested and received approval for a budget revision, please indicate your most recently approved budget.

Show the federal/state award, matching dollars, if any, and total by budget category. These amounts should be the same as shown on the most recent Grant Agreement or most recent approved budget revision.

Requested Budget Change: Please indicate your requested change in budget amounts for each category. You would generally be moving dollar amounts between categories. The total amount of the Federal/State award cannot increase or decrease from the current approved budget.

Amount of Total Change: In this column, show which budget categories have changed by indicating the dollar amount of the increase or decrease. Show decrease amounts in parentheses "()".

Since the purpose of this form is to move dollars between categories, the total change should be 0.

Signatures: Both the designated Financial Officer and the Project Director must sign this report. One signed form must be submitted to DCJ. If either the Fiscal Officer or the Project Director has changed since the last quarterly report, also complete and submit a Change in Project Official (DCJ Form 4-B) form.

BUDGET REVISIONS ARE NOT EFFECTIVE UNTIL APPROVED EITHER BY GENERAL APPROVAL OR BY A GRANT AGREEMENT MODIFICATION