## FY2015/16

## GRANTEE ORGANIZATION:

**PROGRAM:**

**CONTRACT NUMBER:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Line Item** | **Approved FTE** | **Approved Budget****(Date of last Modification if applicable\_\_\_\_\_\_\_\_)** | **Requested Modification** | **Requested Modified Budget** |
| **Personnel** |  |  |  |  |
| Staff Member 1  |  |  |  |  |
| Staff Member 2  |  |  |  |  |
| Staff Member 3  |  |  |  |  |
| Staff Member 4  |  |  |  |  |
| Benefits  |   |  |  |  |
| **Subtotal Personnel**  |   |  |  |  |
| **Operating Expenses**  |   |  |  |  |
| Rent & Utilities  |   |  |  |  |
| Office Supplies & Materials  |   |  |  |  |
| Telephone/Communications  |   |  |  |  |
| Postage/Mailing  |   |  |  |  |
| Reproduction/Copying  |   |  |  |  |
| Travel  |   |  |  |  |
| Training/Conferences  |   |  |  |  |
| Other  |   |  |  |  |
| **Subtotal Operating Expenses**  |  |  |  |  |
| **Subcontractors**  |  |  |  |  |
| Subcontractor 1 |  |  |  |  |
| Subcontractor 2 |  |  |  |  |
| **Subtotal Subcontractors**  |  |  |  |  |
| Indirect Costs |   |  |  |  |
| **Subtotal Indirect**  |   |  |  |  |
|   |   |  |  |  |
| **Grand Total Expenses**  |   |  |  |  |

Please answer all Budget Modification Justification Questions on Page 2.

Authorized Grantee Signature Date

First 5 Solano Executive Director Date

*First 5 Solano internal use only*

*Date: \_\_\_\_\_\_\_\_\_\_ Action Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Action Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date: \_\_\_\_\_\_\_\_\_\_ Action Taken\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_ Action Taken:* Updated in Persimmony*\_\_\_\_\_*

Recommend approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Program Manager

**Budget Modification Justification:**

1. If there are changes to Personnel, please explain. Are there changes to job duties? If there are decreases to a personnel line, how is that job going to be completed? Please clarify a change to FTE (example: 0.5 FTE to 0.75 FTE).
2. If there are changes to operating expenses, please explain. How do operating expenses differ than anticipated?
3. If there are changes to subcontractors, please explain.
4. If there are changes to indirect costs, please explain. *Please also attach your indirect cost rate plan.*
5. Are there any changes to matching/leveraged funds?

**Note: Changes to this fiscal year do not change future fiscal years’ budgets**