Subgrant Financial Report for Project Income

Department of Criminal Justice Services
202 North Ninth Street, 10th Floor
Richmond, Virginia 23219

This form is to be used only by subgrantees in reporting income from grant activities. See attached detailed instructions for completing this form.

Subgrantee	**Grant Number**
Grant Period	**Prepared By** **Date**
Type of Report	**Project Activity During:**
Quarterly Ending[ ] Final[ ]	1st qtr [ ] 2nd qtr [ ] 3rd qtr[ ] 4th qtr [ ]

1. CASH BALANCE Beginning of Quarter G. _____

2. RECEIPTS (INCOME) BY SOURCE

Intervention/supervision fees _____

Other (specify): _____

Other (specify): _____

TOTAL RECEIPTS H. _____

3. EXPENDITURES (IF ANY)*

Personnel _____

Supplies & Operating _____

Travel _____

Equipment _____

Consultant/Professional Services _____

Other (Specify) _____

_____

TOTAL EXPENDITURES I. _____

4. CASH BALANCE End of Quarter Balance (G+H-I) J. _____

* The above expenditures were made for criminal justice purposes. Yes No

If any portion of these expenditures were for other activities, please attach a description of those activities.

Signature _____

Project Director/Finance Director