

**Budget Amendment Request**  
 Virginia Department of Criminal Justice Services  
 1100 Bank Street, Richmond, VA 23219

<b>Subgrantee:</b>	<b>Grant Number:</b>
<b>Title:</b>	<b>Date:</b>

**LATEST APPROVED BUDGET**

Budget Categories	DCJS Funds		Subgrantee Match*	TOTALS
	Federal	State		
A. Personnel				
B. Consultants				
C. Travel				
D. Equipment				
E. Other				
<b>TOTAL PROJECT</b>				

**REVISED BUDGET REQUESTED**

Budget Categories	DCJS Funds		Subgrantee Match*	TOTALS
	Federal	State		
A. Personnel				
B. Consultants				
C. Travel				
D. Equipment				
E. Other				
<b>TOTAL PROJECT</b>				

<b>Signature</b>	<b>Title</b>	<b>Date</b>

**INSTRUCTIONS TO SUBGRANTEES**

*Submit an original copy for each request and each grant. A narrative statement must support each amendment. Signature must be affixed by the Program Administrator or Financial Officer of record with the DCJS.  
 If match is in-kind, please indicate by asterisk (\*) behind the figure.*

<b>DCJS APPROVAL</b>		
<i>(Do not use this space; For DCJS use only)</i>		
<b>Signature</b>	<b>Title</b>	<b>Date</b>