

IDAHO COUNCIL ON DOMESTIC VIOLENCE AND VICTIM ASSISTANCE BUDGET ADJUSTMENT AND REVISION REQUESTS

Budget Adjustment Request

1. Budget adjustments must be received prior to June 1st. Requests after this date will not be accepted.
2. The amount of the adjustment must be under \$3,000.
3. Requests over \$3,000 or adding a new budget line item requires a Revised Budget Form.
4. All budget adjustments (other than as cited in # 9) require pre-approval.
5. All requests must contain a detailed description as to why the adjustment is necessary. If you are requesting the adjustment in order to purchase equipment, furniture or advanced technologies, you must also supply the "Asset Acquisition Request". *
6. Please allow for a 30-day approval time.
7. Supplanting is not allowed.
8. A one-time budget adjustment of \$300 or less will be allowed once within the fiscal year. Programs may make one adjustment to their total budget of \$300 or less. This does not require approval; however we must be notified of the adjustment by submitting this form. The adjustment must occur by June 1st.

***NOTE: Asset Acquisition**

1. Any equipment, furniture, advanced technology, etc. must meet the approved *expenditure criteria of the specific funding source, and you must also supply the "Asset Acquisition Request"*.
2. Any assets acquired over \$300 without pre-approval will automatically be denied reimbursement.

Budget Revision Request

1. Cut off date for budget revision requests for the current grants will be June 1st. No requests will be accepted after this date.
2. Budget revisions are required when a change in approved budget is \$3,000 or more, or you are adding new line items.
3. All budget revisions require pre-approval.
4. Under some rare circumstances a fund that has been relied upon is no longer available, and the unavailability has not been anticipated. Revisions will be viewed very carefully to insure that state or federal funds are not supplanting other public or private funds that had been relied upon.
5. All requests must contain a detailed description as to why the revision is necessary.
6. Please allow for a 30-day approval time.
7. Budget revisions cannot combine funding sources (Permitted: VOCA to VOCA, Family Violence to Family Violence. Not permitted: VOCA to Family Violence.)

**IDAHO COUNCIL ON DOMESTIC VIOLENCE AND VICTIM ASSISTANCE
BUDGET ADJUSTMENT REQUEST**

GRANTEE: _____

ADDRESS: _____

CONTACT #: _____ **CONTRACT PERIOD:** July 1, _____ thru June 30, _____

SOURCE OF FUNDS: () VOCA () Family Violence () State DV () Recovery Act VOCA

BUDGET ADJUSTMENT SUMMARY

CATEGORY	Current Budget Balance	Requested Budget (note change + or -)	Adjusted Budget Balance
Administrative			
Salaries & Benefits			
Travel			
Printing			
Contractual			
Training Expenses			
Supplies			
Telephone			
Rent			
Operational Costs			
Equipment & Furniture			
Advanced Technologies			
Two Days in June Conf.			
Supplemental Training			
Grantee Training			
Other			

This is requested because:

_____ **DATE:** _____

REQUESTING PROGRAM DIRECTOR (Signature)

ICDVVA ACTION DATE: _____

APPROVED BY: _____ DENIED BY: _____

REASON FOR DENIAL: _____

**IDAHO COUNCIL ON DOMESTIC VIOLENCE AND VICTIM ASSISTANCE
BUDGET REVISION REQUEST**

GRANTEE: _____

ADDRESS: _____

CONTACT #: _____ **CONTRACT PERIOD:** July 1, _____ thru June 30, _____

SOURCE OF FUNDS: () VOCA () Family Violence () State DV () Recovery Act VOCA

BUDGET REVISION SUMMARY

CATEGORY	Current Budget Balance	Requested Budget (note change + or -)	Adjusted Budget Balance
Administrative			
Salaries & Benefits			
Travel			
Printing			
Contractual			
Training Expenses			
Supplies			
Telephone			
Rent			
Operational Costs			
Equipment & Furniture			
Advanced Technologies			
Two Days in June Conf.			
Supplemental Training			
Grantee Training			
Other			
This is requested because:			

_____ **DATE:** _____

REQUESTING PROGRAM DIRECTOR (Signature)

ICDVVA ACTION DATE: _____

APPROVED BY: _____ DENIED BY: _____

REASON FOR DENIAL: _____
