Please list all revenue not provided by AOC and all expenditures for a true cost of each court

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Date

Fiscal Year	2025	# of Participants	# of Participants	# of Participants	# of Participants
Report Preparer Name:					
Name of Specialty Court Fu	Inding Name:		Court Funding Code		

E-Mail Address:	Awarded			1		i –					
Specialty Court Award for Fiscal Year	Awarded										
Supreme Court/AOC award	\$ 10,000.00										
Expenditures Paid by the Program with NRS Revenue	Original Budget		st Quarter Inditures Jul- Sep	2nd Quarter Expenditures Oct - Dec		3rd Quarter • Expenditures Jan - Mar		4th Quarter Expenditures Apr - Jun		Total Expenditures	
Professional Services											
- Counseling		\$	5.00	\$	10.00					\$	15.00
 Residential/Housing (Mental Health Courts only) 		\$	1,000.00	\$	1,000.00	\$	2,000.00	\$	2,000.00	\$	6,000.00
- In-Patient Residential (28-day. Must have a contract with a						\$	500.00			\$	500.00
Drug Testing /Supplies, etc.										\$	-
Drug Testing Equipment										\$	-
Drug Testing Confirmation										\$	-
Electronic Monitoring										\$	-
Salary & Benefits - Treatment (exclude city & county paid											
- Drug Court Coordinator										\$	-
- Case Manager										\$	-
- Testers										\$	-
- Case Worker-										\$	-
- Other - Describe										\$	-
Operating Expenses, office supplies, copying, etc. (Maximum \$2,400 per year.)				\$	1,200.00					\$	1,200.00
Bus Passes and/or Taxi vouchers (Maximum \$10,000 per year.)										\$	-
Basic Needs (clothing, haircuts, hygene products) (Maximum\$10,000/year)										\$	-
Incentives, gift certificate \$5-\$15 value, tokens, books, etc (Maximum \$5,000 per year.)		\$	500.00							\$	500.00
Housing with a case manager (Maximum 40% of award.)										\$	-
Housing (Motel, Apartment, etc.) (Maximum 40% of award.)										\$	-
Acquiring necessary capital goods, or using appropriate technology										\$	-
Team Training (Maximum 20% of award)		\$	20.00	\$	20.00	\$	20.00	\$	20.00	\$	80.00
Studying the management and operation of the program										\$	-
Other (describe)										\$	-
Total Expenditures paid by the Program with NRS Revenue	\$ -	\$	1,525.00	\$	2,230.00	\$	2,520.00	\$	2,020.00	\$	8,295.00
Amount Balanced Forward to next fiscal ye	ar, reducing nex	t year'	s payments r	emitt	ted by the AOC	(Av	warded amount le	ss E	xpenditures)	\$	1,705.00

OTHER REVENUE THE PROGRAM RECEIVES	Original	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Client/participant payments made to the court (include court	Budget	Revenue	Revenue	Revenue	Revenue
ordered and voluntary participant payments.)					
Client/participant payments made to the treatment provider					
Appropriations received from cities or counties					
Federal or other grants					
Total Other Revenue the Program Receives	\$-	\$-	\$-	\$-	\$-
OTHER EXPENDITURES	Original	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
(List expense in column. Attach additional page if necessary.)	Budget	Expenditures	Expenditures	Expenditures	Expenditures
Counseling					
Outreach Coordinator					
Housing Manager on site					
	\$-				
Total Other Expenditures	\$-	\$-	\$-	\$-	\$ -
Total Cost to Operate the Specialty Court Program (Total Expenditures and Total Other Expenditures)	\$-	\$ 1,525.00	\$ 1,525.00	\$ 2,520.00	\$ 2,020.00

I hereby certify the information contained in this report to be true and correct to the best of my knowledge and that the program has maintained supporting documentation to substantiate all amounts.

Printed Name of Judge or Program Coordinator	Date	Signature of Judge or Program Coordinator

Receipts must be provided for all expenditures paid with AOC Revenue. Reports are due to the Supreme Court/AOC within 15 days after the of the report period. Please submit via email in PDF form if possible, to Stephanie Gouveia sgouveia@nvcourts.nv.gov Call (702)486-9395 with questions or for assistance. Verified Electronic Signature allowed. Please include all pending invoices listed on worksheet.