BUDGET REVISION SUMMARY			
Grantee: (Name of Program)		Effective Date of Change	
		(AOC Use Only)	
(Address)			
(Phone Number) (Fax Number)			
Name of individual submitting budget revision summary Date			
BUDGET REVISION SUMMA	ARY		
Category	Original Budget	Revised Budget	
Professional Services Treatment			
Counseling			
Residential/Housing (Mental Health Courts Mental Only)			
• In-Patient Residential (28 day with contract)			
Drug Testing /Supplies, etc.			
Drug Testing Equipment			
Drug Testing Confirmation			
Electronic Monitoring			
Salary & Benefits – Treatment (exclude city and county paid positions)			
Drug Court Coordinator Coop Manager			
• Case Manager			
• Drug Tester(s)			
• Case Worker			
• Other:			
Operating Expenses, office supplies, postage, telephone,			
printing, copying, etc. (Maximum \$2,400 per year)			
Bus Passes and/or Taxi Vouchers (Maximum \$10,000 per year)			
Incentives, gift certificate \$5-\$15 value, tokens, books, cookies,			
cake, pizza, and haircuts (Maximum \$5,000 per year)			
Basic Needs (hair cuts, clothing, hygiene items, etc.) \$10,000 max/year			
Housing with a Case Manager (Max 30% of award)			
Housing (Max 30% of award)			
Acquiring necessary capital goods, or using appropriate technology			
Team Training (not to exceed 5% of total allocation)			
Studying the management and operation of the program			
Other (describe):			
TOTAL:			
The above grantee is hereby revising their Fiscal Year allocation	on based on the amount	of funding received	

The above grantee is hereby revising their Fiscal Year allocation based on the amount of funding received. The grantee understands that the amendment can not exceed the original budget request. This request is only a request to revise the original budget submitted. The grantee may shift funds from one category to another as long as it is within the scope of the project. The Administrative Office of the Courts may request a written explanation.

By signing below you agree with the intent of the budget revision. Action should not be taken until this revision has been approved by the Specialty Court Program Analyst. The original budget revision summary will be returned to the grantee. *APPROVED BY:*

Specialty Court Judge/Chief Judge	Date	AOC Specialty Court Program Analyst	Date

Budget revision summaries will be approved within 30 days of receipt. The grantee will receive a copy of the approved request. Programs should not act upon the budget revision until the request has been approved. If you have questions, please contact Stephanie Gouveia, AOC Specialty Court Statewide Coordinator: sgouveia@nvcourts.nv.gov 702-486-9395