**BUDGET MODIFICATION JUSTIFICATION**

**MOA #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Personnel Costs Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Job Description(s) or Position Title(s):** | **Authorized**  **Hrs. or Mos.:** | **Authorized**  **Budget:** | **Adjustments**  **( + or - ):** | **Modified Budget Total:** |
|  |  |  |  |  |
|  |  |  |  |  |
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| --- | --- | --- | --- |
| **Fringe Benefit Breakdown by**  **% of Wage or Fixed Amount:** | **Authorized**  **Budget:** | **Adjustments**  **( + or - ):** | **Modified Budget Total:** |
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|  |  |  |  |

**Non-Personnel Costs Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description of Non-Personnel Line Items**  **& Basis for Valuation:** | **Authorized**  **Budget:** | **Adjustments**  **( + or - ):** | **Modified Budget Total:** |
| Travel: |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Space Costs (Rent/Lease): |  |  |  |
|  |  |  |  |
| Consumable Supplies: |  |  |  |
|  |  |  |  |
| Equipment Lease/Purchase: |  |  |  |
|  |  |  |  |
| Consultant Services: |  |  |  |
|  |  |  |  |
| Contract Services: |  |  |  |
|  |  |  |  |
| Subcontractors: |  |  |  |
|  |  |  |  |
| Other Costs *(Not included above)*: |  |  |  |
|  |  |  |  |
|  |  |  |  |