



Appalachia HIDTA Budget Reprogramming Request

This form is to be used by Initiative/Task Force Commanders that would like to request a budget reprogramming/ budget adjustment in their current AHIDTA budget.

Initiative Name:	
Task Force Commander:	
Date of Request:	

Justification:
Provide a detailed and thorough explanation of why this task force has a need for this reprogramming.

Reprogram funds FROM:	Reprogram funds TO:
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INITIATIVE/AGENCY-		INITIATIVE/AGENCY-	
Category:	Amount	Category:	Amount
Personnel		Personnel	
Fringe		Fringe	
Overtime		Overtime	
Travel		Travel	
Facilities		Facilities	
Services		Services	
Equipment		Equipment	
Supplies		Supplies	
PEPI		PEPI	
Total		Total	

Task Force Commander Signature: _____

Printed Name: _____

Date: _____

	Yes or No		Yes or No
State Coordinator's Recommendation:		Director's Approval:	
Date:		Date:	
State Coordinator's Signature:		Director's Signature:	
State Coordinator's Comments:		Director's Comments:	

Note:
If this request includes a request for equipment, an AHIDTA Equipment Request Form must be submitted with this request.