Appalachia HIDTA Budget Reprogramming Request

This form is to be used by Initative/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 <u>detailed</u> and <u>thorough</u> explanation of why this task force has a need for this

reprogramming.

Note:

Reprogram funds FROM: Reprogram funds TO: INITIATIVE/AGENCY-INITIATIVE/AGENCY-Amount Amount Category: Category: 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: Directors Signature: State Coordinator's Comments: Director's Comments:

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