

<b>WEST VIRGINIA</b>		<b>Project Financial Report</b>	
<b>Division of Criminal Justice Services</b>			
Subgrantee: _____	Prepared By: _____	For Period _____ to _____	Project #: _____
Address: _____	Phone #: _____	Date Prepared: _____	Report #: _____
_____	FAX #: _____	Signature: _____	<b>Final Report</b>

CATEGORY	APPROVED BUDGET (If Applicable to Program)			EXPENDED THIS PERIOD (If Applicable to Program)			EXPENDED TO DATE (If Applicable to Program)			UNPAID OBLIGATIONS Grant Funds ONLY
	Grant Funds	Cash Match	In-Kind Match	Grant Funds	Cash Match	In-Kind Match	Grant Funds	Cash Match	In-Kind Match	
Personnel/ Contractual										
Travel/ Training										
Equipment										
Space										
Other										
<b>TOTALS</b>										

### INSTRUCTIONS

**The following instructions should be observed when preparing a Project Financial Report:**

**DUE DATES:** Reports are due in the Division of Criminal Justice Services by the C.O.B. on the 20th day of the month following the period of this report.

**SUBGRANTEE:** Enter the name and address of the State Agency, Unit of Local Government, or Non-Profit Agency that is designated as the grant recipient.

**PREPARED BY:** Type the name and phone number (including extension) of the person preparing this report. The preparer must sign in the space provided.

**FOR PERIOD \_\_\_\_\_ to \_\_\_\_\_:** Enter the month(s) covered by this report.

**FINAL REPORT:** Check this block if this is the last report.  
**DATE PREPARED:** Enter the date this report was prepared.

**PROJECT #:** Enter the number assigned by the Division of Criminal Justice Services.

**APPROVED BUDGET:** Enter the latest approved project budget.

**EXPENDED THIS PERIOD:** Enter expenditures made during this reporting period. Expenditure information should be based on actual disbursements and should not be rounded. Copies of the appropriate documentation supporting this period's expenditures must be attached to this form.

**REPORT #:** Assign consecutive numbers as each report is submitted.

**EXPENDED TO DATE:** Enter cumulative expenditures to date based on actual disbursements and not rounded.

**UNPAID OBLIGATIONS:** DCJS use only. Enter all obligations that have been incurred during this reporting period that have not been paid.

Submit original report to:  
**SARAH J. BROWN**  
**Division of Criminal Justice Services**  
**1204 Kanawha Boulevard, East**  
**Charleston, West Virginia 25301**

**QUESTIONS:** Phone 558-8814 extension 210  
or Email: sarah.j.brown@wv.gov  
Between 8:30 a.m. and 4:30 p.m.