

STATE OF NORTH CAROLINA

**Division of Child Development and Early Education
Budget Revision Justification
(NC Pre-K Program)**

Use this form for EACH budget revision

Section I

Contractor: _____ Contract # _____
 Revision # _____ Effective Date: _____
 Federal ID #: _____

Signature OF Authorized Official

Date

Section II

(1) Expenditure Category/Number and Line Item	2) Current Amount	(3) Increase/(Decrease)	(4) Revised Amount
Total			

Section III

Detail Justification: Add additional sheets as needed to ensure reasons for budget revisions are clearly explained.

Section IV

Approval Denial (Circle One)

Funds may **NOT** be moved from direct services allocations to increase administrative allocations. Funds **MAY** be moved from administrative allocations to increase direct services (line 11 d).

The budget revision is approved as submitted effective _____.

The budget revision is approved with changes/conditions indicated below effective _____.

The budget revision is denied for the reason stated below:

Changes/Conditions/Reason(s) for denial: _____

Signature (Contract Administrator) _____ Date _____