

SHF CONTINGENCY USE AND BUDGET REVISION FORM

For contingency use or revisions greater than 10% of a budgeted line item contact the HP Specialist assigned to your project before filling out this form

STEP 1: COMPLETE GENERAL INFORMATION:

Project # _____ Project Title: _____

Grant Recipient: _____ Grant Recipient Contact: _____

STEP 2: PROVIDE A DETAILED EXPLANATION:

Please provide a detailed explanation describing the need to revise the Project Budget or use contingency funds (if available).

STEP 3: DETERMINE TYPE OF REVISION:

Select **ONLY ONE** option from those listed below.

☐ **Simple Project Budget Revision ONLY:** Select this box if you are only requesting to use cost savings from one line item(s) to apply to other line item(s). In order to increase any line item, there must be equal cost savings in other line items. The award amount cannot be increased. Additional review and approval by the Contracts Officer will be required for any budget change in excess of 24.99% of the originally contracted line item total. This revision does not utilize contingency. **Complete Section A.**

☐ **Contingency Use ONLY (ALERT: Contact your HP Specialist before selecting. Use of Contingency MUST be approved prior to expenditures):** Select this box if you are only requesting the use of contingency to be applied to line item(s). A request to use contingency funds is only applicable if contingency is a line item in your original contracted project budget (your Exhibit B). For projects with budgeted contingency funds, the use of contingency may be necessary to cover cost increases to budget line items due to unexpected conditions. **Complete Section B.**

☐ **Combined Budget Revision and Contingency Use:** Select this box if you are requesting to revise the Project Budget AND utilize contingency. For example, you may have a line item that is being bid over-budget due to unexpected conditions. In order to help cover the overage, you would like to utilize cost-savings from an under-budget line item (i.e. a Simple Project Budget Revision), although this cost-savings does not cover the entire overage. Therefore, you would like to utilize contingency in order to cover the remainder of the overage less the applied cost-savings. **Complete Sections A, then B.**

STEP 4: COMPLETE THE APPROPRIATE SECTION, AS DETERMINED ABOVE:

Section A: Project Budget Revision

Indicate the Project Budget task, as listed on Exhibit B: Project Budget of your contract with the State Historical Fund. List the currently budgeted amount for that line item. Circle either "addition" or "subtraction" to indicate if you are requesting to add to or subtract funds from that line item. Provide the revised total below. A marked copy of the project budget may be submitted as a substitution for section A.

Project Budget task _____	<table><tr><td>Total</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr></table>	Total	\$ _____	\$ _____	\$ _____
Total					
\$ _____					
\$ _____					
\$ _____					
Budgeted Amount					
Addition/subtraction (circle one)					
Revised Total					
Project Budget task _____	<table><tr><td>Total</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr></table>	Total	\$ _____	\$ _____	\$ _____
Total					
\$ _____					
\$ _____					
\$ _____					
Budgeted Amount					
Addition/subtraction (circle one)					
Revised Total					
Project Budget task _____	<table><tr><td>Total</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr></table>	Total	\$ _____	\$ _____	\$ _____
Total					
\$ _____					
\$ _____					
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Budgeted Amount					
Addition/subtraction (circle one)					
Revised Total					
Project Budget task _____	<table><tr><td>Total</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr><tr><td>\$ _____</td></tr></table>	Total	\$ _____	\$ _____	\$ _____
Total					
\$ _____					
\$ _____					
\$ _____					
Budgeted Amount					
Addition/subtraction (circle one)					

Section B: Use of Contingency:

- 1) Start by completing the table below:

Indicate the amount of available contingency, as identified on the Exhibit B: Project Budget of your contract. Enter the total amount of contingency requested. Indicate the remaining amount of contingency funds.

Budgeted Contingency Funds:	\$
Total Amount of Contingency Requested:	\$
Remaining Contingency Funds:	\$

- 2) Next, complete the tables below showing to what line items contingency will be applied:

Indicate the Project Budget task, as listed on the Exhibit B: Project Budget of your contract with the State Historical Fund. List the currently budgeted amount for that line item in the "Budgeted Amount" column. Indicate the amount of contingency funds to be applied to this line item. Calculate the revised total for the line item including the requested contingency amount.

Project Budget task

Budgeted Amount:
Amount of Contingency to be applied:
Revised Total including Contingency:

Total
\$
\$
\$

Project Budget task

Budgeted Amount:
Amount of Contingency to be applied:
Revised Total including Contingency:

Total
\$
\$
\$

Project Budget task

Budgeted Amount:
Amount of Contingency to be applied:
Revised Total including Contingency:

Total
\$
\$
\$

IMPORTANT
Complete Step 5!

STEP 5: REVIEW, SIGN AND DATE:

- ☐ Carefully review this request and correct any errors or miscalculations.
- ☐ Identify number of pages. If additional space is needed, please use an additional form.
Page # ___ of ___ Pages
- ☐ Sign and Date:

Grant Recipient/Program Director Signature

Date

Comments: _____