

STATE OF NEVADA
 STATE HISTORIC PRESERVATION OFFICE
 NATIONAL PARK SERVICE SUBGRANT
PROJECT CHANGE REQUEST

Subgrantee: _____ Address: _____ _____ Project Title: _____ _____	Subgrant No. _____ Request No. _____
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BUDGET REVISION SUMMARY

Category	Current Budget	Request Budget	Net Change
Personnel			
Consultant/Contracts			
Travel			
Supplies/Operating			
Equipment			
Training			
Other			
TOTAL			

OTHER CHANGES:

Change Project Director: From: _____ To: _____

Change Grant Period: From: _____ To: _____

The subgrantee must provide a written explanation of what the requested changes are and why money needs to be shifted (increased/decreased) among other budget categories. Ordinarily, shifting of funds should not change the scope of the project. The subgrantee will receive a copy of the request and cannot act upon the request until it has been approved in writing.

_____ Signature of Project Director	_____ Date	_____ Signature of SHPO	_____ Date
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