

Office of Criminal Justice Assistance
Nevada Department of Public Safety

BULLET PROOF VEST
FINANCIAL REPORT

Subgrantee:	Project No:	Report No:
Address:	Date of Claim:	
Project Title: BULLETPROOF VEST PROGRAM		

STATUS OF FUNDS

1. Total expenditures previously reported	
2. Total expenditures this period	
3. Credits this period	
4. Expenditures this reporting period (line 2-3)	
5. Total expenditures to date (line 1 + 4)	
6. Less non-federal share of expenditures (50% match)	
7. Federal share of expenditures (line 5-6)	
8. Total federal funds authorized	
9. Unobligated balance of federal funds (line 8-7)	

BUDGET SUMMARY

Category	Budgeted Amounts	Previously Reported	Current Period Expenditures	Total Reported	Total Remaining
Equipment					

Total Federal funds requested on this claim

\$

I certify that to the best of my knowledge and belief, this report is correct and complete and that all expenditures and unpaid obligations are for the purposes set forth under the terms of the approved project.

Signature of Authorized Subgrantee Official

Title

Date