**VICTIM ASSISTANCE AND LAW ENFORCEMENT FUND**

**TWENTY-FIRST JUDICIAL DISTRICT**

**QUARTERLY GRANT FINANCIAL REPORT**

|  |  |
| --- | --- |
| Project Title:           | Grant Number:       |
| Grantee Agency:           | Project Duration: 12 MONTHSFrom:       To:       |
| Prepared By: (Name, Mailing Address, Telephone & Email)                      | Report Covers Project Activity During the Following Calendar Quarter of 202  :Jan. 1 – March 31: [ ]  April 1 – June 30: [ ] July 1 – Sept 30: [ ]  Oct 1 – Dec 31: [ ]  |

AWARD STATUS

|  |  |
| --- | --- |
|  | Local VALE Funds |
| 1. Total Award | $0.00 |
| 2 Grant Funds Received YTD | $0.00 |
| 3. Grant Funds Remaining  | $0.00 |
| 4. Funds Received this Quarter |       |

EXPENDITURES

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Budget Category | ATotal Approved VALE Budget | BVALE Expenditures at Beginning of Quarter | CVALE Expenditures this Quarter | DTotal VALE Expenditures to Date(Column B + Column C ) | EVALE Funds Remaining |
| 5. Personnel | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| 6. Supplies & Operating | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| 7. In-State Travel | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| 8. Equipment | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| 9. Professional Consultants/Services | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |
| 10. TOTAL | $0.00 | $0.00 | $0.00 | $0.00 | $0.00 |

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 in the grant award documents.

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Financial Officer Signature / Date Project Director or Authorized Official Signature / Date