## Budget and Service Delivery Targets Revision Request Form

BOSTON
PUBLIC
HEALTH
COMMISSION
(27)

Ryan White Services Division Budget and Service Delivery Targets Revision Request Form Fiscal Year 2023

Agency	
Service Category	
Date of Request	
Is the Budget Revision a resubmission?	□ Yes □ No

For BPHC Use Only	Date	Initial
Client Services Review		
Client Services Approval		
Fiscal Processing		
Approval Letter Sent		

1. Change of Position, FTE, Salary, and Titles: Include only the adjustment, removal, or addition of an employee. Complete the Budget Revision Excel Form to account for financial adjustments. Do not include additional lines created from line-item splits in the excel document on this form. Check yes to indicate a line was split for the respective position.

Line Split	Start	End	Position	Personnel Name	Reason for Change
□Yes					
□ No					
□Yes					
□ No					
□Yes					
□ No					
☐ Yes					
□No					
☐ Yes					
□ No					
☐ Yes					
□No					
☐ Yes					
□No					
☐ Yes					
□No					
☐ Yes					
□No					
☐ Yes					
□ No					

Subservice	Onininal Tana	Name Tanana	Decree for Chance
Subservice	Original Target	New Target	Reason for Change
Name of Authorized Re	epresentative		
Email			
Signature			
For BPHC use only:  Contract			
Management Review Comments			
Supervisory Review Comments			
Fiscal Review Comments			

2.	Changes of Other	Direct Service or	r Indirect Service	ce Lines:	Include any	budgetary	adjustments.
----	------------------	-------------------	--------------------	-----------	-------------	-----------	--------------

Line Item	Current Budget	New Budget	Reason for Change
	_		

3. Supporting Document: Check yes for supporting documents attached with this form.

Attachment	Document Type	Comments
□ Yes	Offer Letter	
□ Yes	Job Description	
□ Yes	Resume	
□ Yes	Quotes or estimates	
□ Yes	Vendor Description	
□ Yes	Payroll Forms	
□ Yes	HHS Negotiated Rate	
□ Yes	Other:	
□ Yes	Other:	
□ Yes	Other:	