

GAN 1- Budget Modification Screen

Modify Budget GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	QTP MKC	Project Period:	01/01/2009 - 12/31/2011
Grantee Address:	,	Program Office:	BJA
Grantee DUNS Number:	70-488-8395	Grant Manager:	WinRunner Tester
Grantee EIN:	13-6947080	Application Number(s):	2009-H2601-VA-TL
Vendor #:	123456789	Award Number:	2009-TL-C2-0161
Project Title:	Descriptive Title	Award Amount:	\$1,000,000.00

Note: There is no Final Review for this award.

Budget Modification

* All editable Budget fields must contain a numeric value.

Categories	Approved Budget	Requested Changes to Budget	Revised Budget
A. Personnel	\$0	\$0	\$0
B. Fringe Benefits	\$0	\$0	\$0
C. Travel	\$0	\$0	\$0
D. Equipment	\$0	\$0	\$0
E. Supplies	\$0	\$0	\$0
F. Construction	\$0	\$0	\$0
G. Contractual	\$0	\$0	\$0
H. Other	\$0	\$0	\$0
TOTAL DIRECT COST	\$0	\$0	\$0
Total Direct Costs = (Sum of lines A-H)			
INDIRECT COST	\$0	\$0	\$0
TOTAL PROJECT COST	\$0	\$0	\$0
Total Project Costs = Total Direct Costs + Indirect Cost			
Total Project Costs = Federal Funds Approved + Non-Federal Funds + Program Income			
FEDERAL FUNDS APPROVED	\$1000000		\$1000000
NON-FEDERAL FUNDS APPROVED	\$0	\$0	\$0
PROGRAM INCOME	\$0	\$0	\$0

Required Justification for Budget Modification

Attachments:

Add Attachment

Actions:

Save Submit Cancel

GAN 2- Change Authorized Representative Screen

Change Grantee Authorized Signing Official GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	10/01/2008 - 09/30/2013
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Linda Hill-Franklin
Grantee EIN:	02-6002618	Application Number(s):	2009-H0906-NH-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0799
Project Title:	NH Byrne JAG program	Award Amount:	\$1,751,474.00

Change Grantee Authorized Signing Official

Specific documentation is required for changes to a Grantee Authorized Signing Official. Documentation can be the legal document that effected the change or a letter noting the official change authenticated (signed) by a proper official of the state having jurisdiction. Documentation must be electronically attached. If you cannot attach the documentation, please contact your Grant Manager.

Current Authorized Signing Official				New Authorized Signing Official			
Prefix	Ms.	Prefix	Chairman				
Prefix (Other)		Prefix (Other)					
First Name	Rosemary	First Name					
Middle Initial		Middle Initial					
Last Name	Faretra	Last Name					
Suffix	-- Not Selected --	Suffix	-- Not Selected --				
Suffix (Other)		Suffix (Other)					
Title	Director of Administratio	Title					
Address Line 1	33 Capitol Street	Address Line 1					
Address Line 2		Address Line 2					
City	Concord	City					
State	New Hampshire	State	Alabama				
Zip	03301 - 6397 Zip+4 Lookup	Zip	- Zip+4 Lookup				
Phone	603 271 1234 Ext	Phone	Ext				
Fax	603 223 6290	Fax					
Email	timothy.brackett@doj.nh.gov Email Help	Email	Email Help				

*Required Justification for Change Grantee Authorized Signing Official

Attachments:

[Add Attachment](#)

Actions:

GAN 3- Change Grantee Contact or Alternate Contact/Principal Investigator Screen

Change Grantee Contact or Alternate Contact/Principal Investigator GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	10/01/2008 - 09/30/2013
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Linda Hill-Franklin
Grantee EIN:	02-6002618	Application Number(s):	2009-H0906-NH-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0799
Project Title:	NH Byrne JAG program	Award Amount:	\$1,751,474.00

Change Grantee Contact or Alternate Contact/Principal Investigator

Contact

Either New Point of Contact Information or New Alternate Point of Contact Information is required.

Current Point of Contact Information

Prefix	Mr.
Prefix (Other)	
First Name	Timothy
Middle Initial	
Last Name	Brackett
Suffix	-- Not Selected --
Suffix (Other)	
Title	Grants Management Un
Address Line 1	33 Capitol Street
Address Line 2	
City	Concord
State	New Hampshire
Zip	03301 - 6397 Zip+4 Lookup
Phone	603 271 8090 Ext
Fax	603 223 6290
Email	timothy.brackett@doj.nh.gov Email Help

New Point of Contact Information

*Prefix	Chairman
*Prefix (Other)	
*First Name	
*Middle Initial	
*Last Name	
*Suffix	-- Not Selected --
*Suffix (Other)	
*Title	
*Address Line 1	
*Address Line 2	
*City	
*State	Alabama
*Zip	- Zip+4 Lookup
*Phone	Ext
*Fax	
*Email	Email Help

Alternate Contact/Principal Investigator

Current Alternate Point of Contact Information

Prefix	Chairman
Prefix (Other)	
First Name	
Middle Initial	
Last Name	
Suffix	-- Not Selected --
Suffix (Other)	
Title	
Address Line 1	
Address Line 2	
City	
State	Alabama
Zip	- Zip+4 Lookup
Phone	Ext
Fax	
Email	

New Alternate Point of Contact Information

*Prefix	Chairman
*Prefix (Other)	
*First Name	
*Middle Initial	
*Last Name	
*Suffix	-- Not Selected --
*Suffix (Other)	
*Title	
*Address Line 1	
*Address Line 2	
*City	
*State	Alabama
*Zip	- Zip+4 Lookup
*Phone	Ext
*Fax	
*Email	Email Help

Comments/Additional Information

Attachments:

[Add Attachment](#)

Actions:

[Save](#) [Submit](#) [Cancel](#)

GAN 4- Change DUNS Number Screen

Change Grantee DUNS Number GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	State of New Hampshire	Project Period:	10/01/2008 - 09/30/2014
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Veronica Munson
Grantee EIN:	02-6002618	Application Number(s):	2013-H0010-NH-J2 2009-H2822-MO-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0685
Project Title:	Christian County JAG Program	Award Amount:	\$119,712.00

Change Grantee DUNS Number

Specific documentation is required for changes to a Grantee DUNS Number. Documentation can be the legal document that effected the DUNS Number change or a letter noting the official DUNS Number change authenticated (signed) by a proper official of the state having jurisdiction. Documentation must be electronically attached for approval of this grant adjustment.

Current Grantee DUNS Number(s)	New Grantee DUNS Number
80-859-1127	<input type="text"/> - <input type="text"/> - <input type="text"/>

*Required Justification for Grantee DUNS Number Change

Attachments:

Add Attachment

Actions:

Save Submit Cancel

GAN 5- Change Mailing Address Screen

Change Grantee Mailing Address GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	State of New Hampshire	Project Period:	10/01/2008 - 09/30/2014
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Veronica Munson
Grantee EIN:	02-6002618	Application Number(s):	2013-H0010-NH-J2 2009-H2822-MO-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0685
Project Title:	Christian County JAG Program	Award Amount:	\$119,712.00

Change Grantee Mailing Address

Current Grantee Mailing Address		New Grantee Mailing Address	
* Address Line 1	<input type="text" value="33 Capitol Street"/>	* Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>	Address Line 2	<input type="text"/>
* City	<input type="text" value="Concord"/>	* City	<input type="text"/>
* State	<input type="text" value="New Hampshire"/>	* State	<input type="text"/>
* Zip	<input type="text" value="03301"/> - <input type="text" value="6397"/>	* Zip	<input type="text"/> - <input type="text"/>

For OJP Use Only

Current FMIS2 Address Line 1	<input type="text"/>	New FMIS2 Address Line 1	<input type="text"/>
Current FMIS2 Address Line 2	<input type="text"/>	New FMIS2 Address Line 2	<input type="text"/>
Current FMIS2 City	<input type="text"/>	New FMIS2 City	<input type="text"/>

* Required Justification for Grantee Mailing Address Change

Attachments:

Actions:

GAN 6- Change Grantee Name Screen

Change Grantee Name GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	State of New Hampshire	Project Period:	10/01/2008 - 09/30/2014
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Veronica Munson
Grantee EIN:	02-6002618	Application Number(s):	2013-H0010-NH-J2 2009-H2822-MO-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0685
Project Title:	Christian County JAG Program	Award Amount:	\$119,712.00

Change Grantee Name

Specific documentation is required for changes to a Grantee Name. Documentation can be the legal document that effected the change or a letter noting the official change authenticated (signed) by a proper official of the state having jurisdiction. Documentation must be electronically attached. If you cannot attach the documentation, please contact your Grant Manager.

Current Grantee Name		New Grantee Name	
Organization Name	State of New Hampshire	*Organization Name	<input type="text"/>

For OJP Use Only

Current Legal FMIS2 Name	<input type="text"/>	New Legal FMIS2 Name	<input type="text"/>
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*Required Justification for Grantee Name Change

Attachments:

Add Attachment

Actions:

Save Submit Cancel

GAN 7- Change Project Period Screen

Change Project Period GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	06/01/2009 - 09/30/2012
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	OJJDP
Grantee DUNS Number:	80-859-1127	Grant Manager:	Lawrence Fiedler
Grantee EIN:	02-6002618	Application Number(s):	2009-50291-NH-AH
Vendor #:	026002618	Award Number:	2009-AH-FX-0066
Project Title:	Enforcing Underage Drinking Laws New Hampshire Initiative	Award Amount:	\$360,000.00

Change Project Period

Current Grant Period:	Month: <input type="text" value="39"/> Day: <input type="text" value="29"/>	New Grant Period:	Month: <input type="text" value="39"/> Day: <input type="text" value="29"/>
Project Start Date:	<input type="text" value="06/01/2009"/>	* New Project Start Date:	<input type="text" value="06/01/2009"/>
Project End Date:	<input type="text" value="09/30/2012"/>	* New Project End Date:	<input type="text" value="09/30/2012"/>

*** Required Justification for Change Project Period:**

Attachments:

[Add Attachment](#)

Actions:

GAN 8- Change Project Scope Screen

Change Project Scope GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	10/01/2008 - 09/30/2013
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Linda Hill-Franklin
Grantee EIN:	02-6002618	Application Number(s):	2009-H0906-NH-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0799
Project Title:	NH Byrne JAG program	Award Amount:	\$1,751,474.00

Change Project Scope

*Scope Change Types

- | | |
|--|---|
| <input type="checkbox"/> Altering programmatic activities | <input type="checkbox"/> Altering the purpose of the project |
| <input type="checkbox"/> Changing the project site | <input type="checkbox"/> Change in organization with primary responsibility for implementation of grant |
| <input type="checkbox"/> Contracting out, sub-granting or otherwise obtaining the services of a third party to perform activities that are central to the purpose of the award | <input type="checkbox"/> Other (Please enter type of scope change below) <input type="text"/> |

*Required Justification for Change Project Scope:

Attachments:

Add Attachment

Actions:

Save Submit Cancel

GAN 9- Program Office Approvals Screen

Program Office Approvals GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	10/01/2008 - 09/30/2013
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Linda Hill-Franklin
Grantee EIN:	02-6002618	Application Number(s):	2009-H0906-NH-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0799
Project Title:	NH Byrne JAG program	Award Amount:	\$1,751,474.00

Program Office Approvals

*Approval Types

- | | |
|---|---|
| <input type="checkbox"/> Changes in Consultant rates (in excess of \$450/day) | <input type="checkbox"/> Publication Plan Submissions |
| <input type="checkbox"/> Purchase of Automatic Data Processing (ADP) Equipment and Software | <input type="checkbox"/> Funding for Criminal Justice Information and Communication Systems |
| <input type="checkbox"/> Foreign Travel Costs | <input type="checkbox"/> Other (Please enter type of Program Office Approval below)
<input type="text"/> |

*Required Justification for Program Office Approvals:

Attachments:

Add Attachment

Actions:

Save Submit Cancel

GAN 10- Sole Source Approval Screen

Sole Source Approval GAN



US DEPARTMENT OF JUSTICE
OFFICE OF JUSTICE PROGRAMS

GRANT ADJUSTMENT NOTICE

Grantee Information

Grantee Name:	New Hampshire Department of Justice	Project Period:	10/01/2008 - 09/30/2013
Grantee Address:	33 CAPITOL STREET CONCORD, 03301	Program Office:	BJA
Grantee DUNS Number:	80-859-1127	Grant Manager:	Linda Hill-Franklin
Grantee EIN:	02-6002618	Application Number(s):	2009-H0906-NH-DJ
Vendor #:	026002618	Award Number:	2009-DJ-BX-0799
Project Title:	NH Byrne JAG program	Award Amount:	\$1,751,474.00

Sole Source Approval

Organization to be sole source to

* Organization Name	<input type="text"/>
* Prefix	Chairman <input type="text"/>
Prefix (Other)	<input type="text"/>
* First Name	<input type="text"/>
Middle Initial	<input type="text"/>
* Last Name	<input type="text"/>
Suffix	-- Not Selected -- <input type="text"/>
Suffix (Other)	<input type="text"/>
* Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
* City	<input type="text"/>
* State	Alabama <input type="text"/>
* Zip	<input type="text"/> - <input type="text"/>
* Phone	<input type="text"/> - <input type="text"/> - <input type="text"/> Ext <input type="text"/>
* Amount of Sole Source	\$ <input type="text"/>

* Required Justification for Sole Source Approval

OCFMD Justification for Sole Source Approval

Not entered.

Attachments:

Add Attachment

Actions:

Save Submit Cancel