

# Budget and Service Delivery Targets Revision Request Instructions

## Procedures

1. Complete the “Budget and Service Delivery Targets Revision Request Form”
2. Complete the Budget Revision Excel Form
3. Include all required supporting documents.
4. Submit the Budget Revision packets with all required documents to your contract manger and copy [RyanWhiteServices@bphc.org](mailto:RyanWhiteServices@bphc.org).
5. Incomplete packets (missing information, inaccurate information, or missing documents) will be sent back to the agency before processing.

## Notes

- Please complete a Budget Revision form separately for each Service Category Budget awarded to the agency.
- It is recommended that the program and finance staff at the agency coordinate the submission of all budget revisions.
- The authorized representative is considered any Ryan White Part A designated contact that your contract manager has listed for your agency.
- Your assigned contract manager or another Ryan White Services Division staff will reach out to your program or fiscal contacts for additional information regarding your request if needed.

## Agency and Submission Information

**Agency:** Enter the name of the agency.

**Service Category:** Enter the name of the service category.

**Date of Request:** Enter the date submitted.

**Is this a resubmission of a previous request?**

- **Yes** = If additional information is required or the last revision was denied
- **No** = If this is an original request

### 1. Direct Service or Admin. Personnel Revision:

**Line Split:** A line item on the budget form may result from new personnel, changes in salaries, and FTE adjustments. If a line is split in the budget because of a personnel change to a respective position on the budget, mark yes. Insert the initial date that the line split begins and the end date of the line split. If a line is not splitting or the agency is requesting an additional line item, updating a TBA, or a name adjustment, mark no. You do not need to list each row that is created when a position is split to reflect adjustments within this section. You are required to indicate that line is being split.

**Start Date:** Enter the date a change in personnel will effectively start.

**End Date:** Enter the date a change in personnel will effectively end.

**Position:** Enter the official position title.

**Personnel Name:** Enter the legal name of the personnel.

**Reason for the adjustment:** Enter the reason for the adjustment or change of the line.

## 2. Other Direct Service or Admin. Budget Lines:

**Line Item:** Enter the assigned line item.

**Current Budget:** Enter the amount budgeted for the line item.

**New Budget:** If any funds have been invoiced to BPHC, list the culminated amount found on the most recently submitted Monthly Cost Reimbursement Invoice; Section D.

**Reason for Change:** Enter the reason for the adjustment or change of the line.

## 3. Supporting Documents

**Attachment:** If the packet includes any attachment, check “yes” to the corresponding document type.

**Document Types:** A list of standard documents RWSD requests for budget revisions. If the document with the Budget Revision does not fall into any of the document types, use the “other” category by inputting the document type.

**Comments:** Use this second to inform RWSD of any relevant information.

## 4. Service Delivery Targets

**Subservice:** Input the subservice as labeled in e2Boston.

**Original Target:** Input the target RWSD listed on your current scope of services.

**New Target:** Input the new target RWSD you are proposing.

**Reason for Change:** Enter the reason for the adjustment or change of the target.

## 5. Other Direct Service or Admin. Budget Lines:

**Name of Authorized Representative:** The authorized representative must be a person with budgetary decision-making authority.

**Title:** Input the title of the authorized representative.

**Email:** Input the email of the authorized representative.

**Signature:** Input the signature of the authorized representative.