



The Navajo Nation **DR. BUU NYGREN** *PRESIDENT*
Yideeskáądi Nitsáhákees **RICHELLE MONTOYA** *VICE PRESIDENT*

July 23, 2024

TRANSMITTAL

TO : Arbin Mitchell, Executive Director
 Division of Community Development (DCD)

FROM : *[Signature]*
 Cordell Shortley, Contracting Officer
 Contracts & Grants Section (CGS) / OMB

SUBJECT : BU on Projects / Activities for Churchrock Chapter, Iyanbito Chapter, Mariano Lake Chapter, Pinedale Chapter, Smith Lake Chapter, and Thoreau Chapter- ARPA Funds Allocated to Delegate Arviso Region

I. Information on Contract (per Original Award):

Churchrock Chapter, Iyanbito Chapter, Mariano Lake Chapter, Pinedale Chapter, Smith Lake Chapter, and Thoreau Chapter	U.S. Treasury American Recovery Plan Act (ARPA)	21.027
<u>Title of Contract</u>	<u>Funding Agency</u>	<u>CFDA No. - Federal</u>
CMY-28-24; NABIMA-18-24; CAU-73-23; CMY-39-23; CAP-11-23	\$ 8,802,340.00	2022
<u>Grant No.</u>	<u>Amount</u>	<u>Fiscal Year</u>
		03/11/2021 to 12/31/2026
		<u>Term - Begin and End Date</u>

II. Data Entered in FMIS Regarding:

New Contract or Grant Company No. 8059 Business Unit (K#) See attachment Exhibit 1

Contract Mod No. Internal Modification No. 4

Amt of Budget Decrease \$7,707,134.58 \$7,707,134.58 to \$0.00

AMOUNT FROM TO

Budget Period - Extend End Date: From To

Other, specify:

Authorizing Document - Attached:

Contract / Agreement - Date executed

NNC / Committee Resolution - No. & Date

Other, specify: NN Council Resolution CMY-28-24

III. Comments by CGS:

This is 5th Transmittal on \$8.8 mil ARPA funds allocated to CD Steven Arviso Region. Budget on twenty-one (21) projects entered in FMIS previously is deobligated per Resolution CMY-28-24 and concurred by Navajo Nation Recovery Fund (NNFRF) Office by memorandum of July 22, 2024.

Attachment
 Copy: Contract files
 Contract Accounting / OOC / DPM
 Lisa Jymm, Executive Director - NN FRF Office

[Handwritten signature]
 7/23/24

CD Region - Steven Arviso

"Exhibit 1"

Revenue Replacement Reserve		Obligated ARPA	
✓ 1	K2115184 \$ 200,000.00	1	\$ -
✓ 2	K2115185 \$ 100,000.00	2	\$ -
✓ 3	K2115186 \$ 50,000.00	3	\$ -
✓ 4	K2115187 \$ 40,000.00	4	\$ -
✓ 5	K2115188 \$ 112,209.12	5	\$ -
✓ 6	K2115189 \$ 400,000.00		
✓ 7	K2115217 \$ 350,000.00		
✓ 8	K2115218 \$ 400,000.00		
✓ 9	K2115219 \$ 200,000.00		
✓ 10	K2115220 \$ 733,528.56		
✓ 11	K2115221 \$ 733,528.56		
✓ 12	K2115222 \$ 467,056.00		
✓ 13	K2115223 \$ 1,257,056.67		
✓ 14	K2115330 \$ 10,000.00		
✓ 15	K2115331 \$ 49,999.00		
✓ 16	K2115332 \$ 350,000.00		
✓ 17	K2115333 \$ 300,000.00		
✓ 18	K2115334 \$ 467,056.67		
✓ 19	K2115505 \$ 181,851.00		
✓ 20	K2115506 \$ 1,019,678.00		
✓ 21	K2115507 \$ 285,171.00		
	Total \$ 7,707,134.58	Total	\$ -

ARPA Allocated Amount \$ 7,707,134.58

Obligated ARPA Projects \$ -

Deobligated Amount \$ 7,707,134.58

	\$ 902,209.12
Previous ARPA	\$ 4,141,169.79
Allocation	\$ 1,177,055.67
	\$ 1,486,700.00
Total	\$ 7,707,134.58

to me
7/22/24



The Navajo Nation **DR. BUU NYGREN** *PRESIDENT*
Yideeskáądi Nitsáhákees **RICHELLE MONTOYA** *VICE PRESIDENT*

MEMORANDUM



TO : Dominic Beyal, Director
 Navajo Nation Office of Management & Budget

Cordell Shortey, Contracting Officer
 Navajo Nation Office of Management & Budget

FROM : *Lisa Jymm*
 Lisa Jymm, Executive Director
 Navajo Nation Fiscal Recovery Fund Office

DATE : July 22, 2024

SUBJECT : Summary of Change forms for Delegate Steven Arviso's Delegate Region.

The Navajo Nation Fiscal Recovery Fund Office (NNFRFO) has attached twenty-one (21) Summary of Change forms for Steven Arviso Delegate Region per CMY-28-24, Section Six, identified as General Funds/Revenue Replacement Reserve (GF/RRR). Attached is the detailed worksheet of the ARPA/FRF and RRR/GF balances of the approved projects and the Summary of Change forms totaling the GF/RRR given.

No. of Summary Of Change forms	Delegate	GF/RRR
21	Delegate Steven Arviso	\$8,802,339.50 7-22-24 \$7,707,134.58
	TOTAL:	\$8,802,339.50 \$7,707,134.58 7-22-24

If you have any questions, please feel free to contact our office by phone at (928) 309-5535 or by email at ljymm@navajo-nsn.gov. Thank you.

CC: Germaine Jones, Deputy Contracting Officer, OMB/OCG
 Christine Chavez, Accounting Manager, OOC/CA

Ljymm
7/22/24

**DISTRIBUTION of APPROVED REGIONAL CHAPTER PROJECT FUNDING
ARPA/NNFRF vs. REVENUE REPLACEMENT RESERVE/GF**

Pursuant to CMY-28-24
June 15, 2024

Honorable Council Delegate: STEVEN ARVISO

Delegate Region: Churchrock, Iyanbito, Mariano Lake, Pinedale, Smith Lake, Thoreau (6) Chapters.

Legislation	BL #	Description	AOS	PROJECT ALLOCATIONS		DISTRIBUTION of \$211,256.648		
				Original Budget	Revised Budget	FRF/ARPA	RRR/GF	
1. CAP-11-23								
	1	K2115184 UST - IYANBITO CH HSE SR	DCD	\$ 200,000.00	\$ 200,000.00	\$ -	\$ 200,000.00	
	2	K2115185 UST - THOREAU CH WD-STV	DCD	\$ 100,000.00	\$ 100,000.00	\$ -	\$ 100,000.00	
	3	K2115186 UST - THOREAU CH FC C19	DCD	\$ 50,000.00	\$ 50,000.00	\$ -	\$ 50,000.00	
	4	K2115187 UST - THOREAU CH WD/WD PL	DCD	\$ 40,000.00	\$ 40,000.00	\$ -	\$ 40,000.00	
	5	K2115188 UST - MARIANO LK EMG SRV	DCD	\$ 112,209.12	\$ 112,209.12	\$ -	\$ 112,209.12	
	6	K2115189 UST - CHURCH RK CH BRDBD	BB	\$ 400,000.00	\$ 400,000.00	\$ -	\$ 400,000.00	
		Note: 1 of 4 NNC Resolutions. See last page of this report.		\$ 902,209.12	\$ 902,209.12	\$ -	\$ 902,209.12	
2. CMY-39-23								
	7	K2115217 UST - SMITH LAKE HOME RE	DCD	\$ 350,000.00	\$ 350,000.00	\$ -	\$ 350,000.00	
	8	K2115218 UST - CHURCHROCK HSE ROO	DCD	\$ 400,000.00	\$ 400,000.00	\$ -	\$ 400,000.00	
	9	K2115219 UST - CHURCHROCK RURAL	DCD	\$ 200,000.00	\$ 200,000.00	\$ -	\$ 200,000.00	
	10	K2115220 UST - PINEDALE MANU HOME	DCD	\$ 733,528.56	\$ 733,528.56	\$ -	\$ 733,528.56	
	11	K2115221 UST - PINEDALE HOME IMPR	DCD	\$ 733,528.56	\$ 733,528.56	\$ -	\$ 733,528.56	
	12	K2115222 UST - CHURCHROCK BR RENO	DCD	\$ 467,056.00	\$ 467,056.00	\$ -	\$ 467,056.00	
	13	K2115223 UST - IYANBITO HM REPAIR	DCD	\$ 1,257,056.67	\$ 1,257,056.67	\$ -	\$ 1,257,056.67	
		Note: 2 of 4 NNC Resolutions. See last page of this report.		\$ 4,141,169.79	\$ 4,141,169.79	\$ -	\$ 4,141,169.79	
3. CAU-73-23								
	14	K2115330 UST - IYANBITO CHPTR-HOUSE FIN ASSIS	DCD	\$ 10,000.00	\$ 10,000.00	\$ -	\$ 10,000.00	
	15	K2115331 UST - MARIANO LAKE CHPT SPCL DUTY PA	DCD	\$ 49,999.00	\$ 49,999.00	\$ -	\$ 49,999.00	
	16	K2115332 UST - SMITH LAKE CHPTR-HOUSE CONSTR	DCD	\$ 350,000.00	\$ 350,000.00	\$ -	\$ 350,000.00	
	17	K2115333 UST - SMITH LAKE CHPTR- PEP WORKFORC	DCD	\$ 300,000.00	\$ 300,000.00	\$ -	\$ 300,000.00	
	18	K2115334 UST - SMITH LAKE CHPTR- COM FIN ASST	DCD	\$ 467,056.67	\$ 467,056.67	\$ -	\$ 467,056.67	
		Note: 3 of 4 NNC Resolutions. See last page of this report.		\$ 1,177,055.67	\$ 1,177,055.67	\$ -	\$ 1,177,055.67	
4. NABIMA-18-24								
	19	K2115505 UST - THOREAU TEMP PERSONNEL	DCD	\$ 181,851.00	\$ 181,851.00	\$ -	\$ 181,851.00	
	20	K2115506 UST - MARIANO LAKE POWERLINE	DCD	\$ 1,019,678.00	\$ 1,019,678.00	\$ -	\$ 1,019,678.00	
	21	K2115507 UST - MARIANO LAKE UTILITY	DCD	\$ 285,171.00	\$ 285,171.00	\$ -	\$ 285,171.00	
		Note: 4 of 4 NNC Resolutions. See last page of this report.		\$ 1,486,700.00	\$ 1,486,700.00	\$ -	\$ 1,486,700.00	
5. CJN-29-22	UNALLOCATED / REMAINING BALANCE from \$8,802,339.50 (See Below):						\$1,095,204.92	
				TOTAL:	\$ 7,707,134.58	\$ 7,707,134.58	\$ -	\$ 8,802,339.50

NOTES:

- * No expenses or encumbrances recorded in FMIS.
- * Remaining Balance Available for Chapter Projects →
- * No SRA's

Per CJN-29-22:	\$ 8,802,339.50
Project Allocations:	\$ (7,707,134.58)
Unallocated/Remaining Balance:	\$ 1,095,204.92

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to Initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

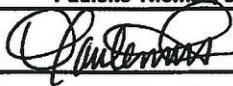

Title of Program: Iyanbito Chapter & Senior Center UPGRADE FMIS Business Unit No. K2115184 ✓
 Title of Grant : ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 4200	NON CAPITAL ASSETS	80,000	(80,000)	-
✓ 4410	OPERATING SUPPLIES	20,000	(20,000)	-
✓ 6200	EXTERNAL CONTRACTORS	100,000	(100,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 200,000	(200,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/5/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416324

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job: K2115184 US TREASURY-IVANBITO CH HSE SR
Project:

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	B N	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1710	Program Revenue	Program Revenue	6	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1800	Revenues	Revenues	3	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
4200	Non Capital Assets	Non Capital Assets	6	B N	80,000.00	80,000.00			80,000.00	1.00	1.00
4200	Non Capital Assets	Non Capital Assets	6	T	80,000.00	80,000.00			80,000.00	1.00	1.00
4180	Office Supplies & Equipm	Office Supplies & Equipm	5	T	80,000.00	80,000.00			80,000.00	1.00	1.00
4410	Operating Supplies	Operating Supplies	6	B N	20,000.00	20,000.00			20,000.00	1.00	1.00
4410	Operating Supplies	Operating Supplies	6	T	20,000.00	20,000.00			20,000.00	1.00	1.00
4400	Operating Supplies	Operating Supplies	5	T	20,000.00	20,000.00			20,000.00	1.00	1.00
4000	Supplies	Supplies	4	T	100,000.00	100,000.00			100,000.00	1.00	1.00
6200	External Contractors	External Contractors	6	B N	100,000.00	100,000.00			100,000.00	1.00	1.00
6200	External Contractors	External Contractors	6	T	100,000.00	100,000.00			100,000.00	1.00	1.00
6100	Plant, Property & Equipm	Plant, Property & Equipm	5	T	100,000.00	100,000.00			100,000.00	1.00	1.00
6000	Repairs & Maintenance	Repairs & Maintenance	4	T	100,000.00	100,000.00			100,000.00	1.00	1.00
2000	Expenses	Expenses	3	T	200,000.00	200,000.00			200,000.00	1.00	1.00

Job K2115184 US TREASURY-YANBITO GH HSE SR
Project
Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	200,000.00-						
1710	Program Revenue	Program Revenue	6	T	200,000.00-						
1705	CG Revenue	CG Revenue	5	T	200,000.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	200,000.00-						
1000	Revenues	Revenues	3	T	200,000.00-						
4200	Non Capital Assets	Non Capital Assets	6	BN	80,000.00						
4200	Non Capital Assets	Non Capital Assets	6	T	80,000.00						
4100	Office Supplies & Equipme	Office Supplies & Equipme	5	T	80,000.00						
4410	Operating Supplies	Operating Supplies	6	BN	20,000.00						
4410	Operating Supplies	Operating Supplies	6	T	20,000.00						
4400	Operating Supplies	Operating Supplies	5	T	20,000.00						
4000	Supplies	Supplies	4	T	100,000.00						
6200	External Contractors	External Contractors	6	BN	100,000.00						
6200	External Contractors	External Contractors	6	T	100,000.00						
6100	Plant, Property & Equipme	Plant, Property & Equipme	5	T	100,000.00						
6000	Repairs & Maintenance	Repairs & Maintenance	4	T	100,000.00						
2000	Expenses	Expenses	3	T	200,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Thoreau Chapter Wood Stove FMIS Business Unit No. K2115185 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8020	SOCIAL	100,000	(100,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 100,000	(100,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				



* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416325

Verified & Recommend Approval:  7/22/24 Contract Analyst - Signature / Date
 Approval for FMIS Entry:  7-22-24 Contracting Officer - Signature / Date

Job K2115185 US TREASURY- THOREAU CH WD-STV
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	B N	100,000.00-	100,000.00-			100,000.00-	1.00	1.00
1710	Program Revenue	Program Revenue	6	T	100,000.00-	100,000.00-			100,000.00-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	100,000.00-	100,000.00-			100,000.00-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	100,000.00-	100,000.00-			100,000.00-	1.00	1.00
1000	Revenues	Revenues	3	T	100,000.00-	100,000.00-			100,000.00-	1.00	1.00
8020	Social	Social	6	B N	100,000.00	100,000.00			100,000.00	1.00	1.00
8020	Social	Social	6	T	100,000.00	100,000.00			100,000.00	1.00	1.00
8010	Public	Public	5	T	100,000.00	100,000.00			100,000.00	1.00	1.00
8000	Assistance	Assistance	4	T	100,000.00	100,000.00			100,000.00	1.00	1.00
2000	Expenses	Expenses	3	T	100,000.00	100,000.00			100,000.00	1.00	1.00

Job K2115185 US-TREASURY-THOREAU CH WD-STV
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE CUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	100,000.00-						
1710	Program Revenue	Program Revenue	6	T	100,000.00-						
1705	CG Revenue	CG Revenue	5	T	100,000.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	100,000.00-						
1000	Revenues	Revenues	3	T	100,000.00-						
8020	Social	Social	6	BN	100,000.00						
8020	Social	Social	6	T	100,000.00						
8010	Public	Public	5	T	100,000.00						
8000	Assistance	Assistance	4	T	100,000.00						
2000	Expenses	Expenses	3	T	100,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:



Title of Program: Thoreau Chapter Facility COVID-19 FMIS Business Unit No. K2115186 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6110	SUPPLIES	50,000	(50,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 50,000	(50,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.


PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

BATCH # 1416326

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job K2115186 US TREASURY- THOREAU CH FC C19
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE CUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	50,000.00-	50,000.00-			50,000.00-	1.00	1.00
1710		Program Revenue	6	T	50,000.00-	50,000.00-			50,000.00-	1.00	1.00
1705		CG Revenue	5	T	50,000.00-	50,000.00-			50,000.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	50,000.00-	50,000.00-			50,000.00-	1.00	1.00
1000		Revenues	3	T	50,000.00-	50,000.00-			50,000.00-	1.00	1.00
6110		Supplies	6	BN	50,000.00	50,000.00			50,000.00	1.00	1.00
6110		Supplies	6	T	50,000.00	50,000.00			50,000.00	1.00	1.00
6100		Plant, Property & Equipme	5	T	50,000.00	50,000.00			50,000.00	1.00	1.00
6000		Repairs & Maintenance	4	T	50,000.00	50,000.00			50,000.00	1.00	1.00
2000		Expenses	3	T	50,000.00	50,000.00			50,000.00	1.00	1.00

Job K2115186 US TREASURY-THOREAU CH FC C19

Cost Code	Cost Type	Description	L P M	DEC UM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 BN	50,000.00-						
1710		Program Revenue		6 T	50,000.00-						
1705		CG Revenue		5 T	50,000.00-						
1700		External C/G Revenue Source		4 T	50,000.00-						
1000		Revenues		3 T	50,000.00-						
6110		Supplies		6 BN	50,000.00						
6110		Supplies		6 T	50,000.00						
6100		Plant, Property & Equipme		5 T	50,000.00						
6000		Repairs & Maintenance		4 T	50,000.00						
2000		Expenses		3 T	50,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

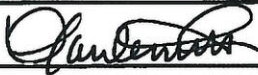

Title of Program: Thoreau Chapter Fire Wood / Wood Pellet FMIS Business Unit No. K2115187 ✓
 Title of Grant : ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8020	SOCIAL	40,000	(40,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 40,000	(40,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1414328

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7.22.24
 Contracting Officer - Signature / Date

Job K3115187 US TREASURY-THREAU CH WDWWD PL
Project

Cost Code	Cost Type	Description	L P M	DE CUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 B N	40,000.00-	40,000.00-			40,000.00-	1.00	1.00
1710		Program Revenue		6 T	40,000.00-	40,000.00-			40,000.00-	1.00	1.00
1705		CG Revenue		5 T	40,000.00-	40,000.00-			40,000.00-	1.00	1.00
1700		External C/G Revenue Source		4 T	40,000.00-	40,000.00-			40,000.00-	1.00	1.00
1000		Revenues		3 T	40,000.00-	40,000.00-			40,000.00-	1.00	1.00
8020		Social		6 B N	40,000.00	40,000.00			40,000.00	1.00	1.00
8020		Social		6 T	40,000.00	40,000.00			40,000.00	1.00	1.00
8010		Public		5 T	40,000.00	40,000.00			40,000.00	1.00	1.00
8000		Assistance		4 T	40,000.00	40,000.00			40,000.00	1.00	1.00
2000		Expenses		3 T	40,000.00	40,000.00			40,000.00	1.00	1.00

Job K2115187 US TREASURY-THEREAU CH W/D/W/D PL
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE CUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 B N	40,000.00-						
1710		Program Revenue		6 T	40,000.00-						
1705		CG Revenue		5 T	40,000.00-						
1700		External C/G Revenue Sourc		4 T	40,000.00-						
1000		Revenues		3 T	40,000.00-						
8020		Social		6 B N	40,000.00						
8020		Social		6 T	40,000.00						
8010		Public		5 T	40,000.00						
8000		Assistance		4 T	40,000.00						
2000		Expenses		3 T	40,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:


Title of Program: Mariano Lake Emergency Services FMIS Business Unit No. K2115188 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 2310	TEMPORARY	112,209.12	(112,209.12)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 112,209.12	(112,209.12)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				


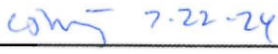
* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/12/24 Signature/Date:  7/22/24

PART IV. CGS / OMB USE ONLY

Batch # 1416330

Verified & Recommend Approval:  7/22/24 Contract Analyst - Signature / Date
 Approval for FMIS Entry:  7-22-24 Contracting Officer - Signature / Date

Job K2115188 US TREASURY-MARIANO LK EMG SRV
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	112,209.12-	112,209.12-			112,209.12-	1.00	1.00
1710	Program Revenue	Program Revenue	6	T	112,209.12-	112,209.12-			112,209.12-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	112,209.12-	112,209.12-			112,209.12-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	112,209.12-	112,209.12-			112,209.12-	1.00	1.00
1000	Revenues	Revenues	3	T	112,209.12-	112,209.12-			112,209.12-	1.00	1.00
2310	Temporary	Temporary	6	BN	112,209.12	112,209.12			112,209.12	1.00	1.00
2310	Temporary	Temporary	6	T	112,209.12	112,209.12			112,209.12	1.00	1.00
2300	Temporary	Temporary	5	T	112,209.12	112,209.12			112,209.12	1.00	1.00
2001	Personnel Expenses	Personnel Expenses	4	T	112,209.12	112,209.12			112,209.12	1.00	1.00
2000	Expenses	Expenses	3	T	112,209.12	112,209.12			112,209.12	1.00	1.00

Job K2115188 US TREASURY-MARIANO I.K. EMG SRV
Project

Cost Code	Cost Type	Description	L P M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6 BN	112,209.12-						
1705	CG Revenue	CG Revenue	5 T	112,209.12-						
1700	External C/G Revenue Source	External C/G Revenue Source	4 T	112,209.12-						
1000	Revenues	Revenues	3 T	112,209.12-						
2310	Temporary	Temporary	6 BN	112,209.12						
2310	Temporary	Temporary	6 T	112,209.12						
2300	Temporary	Temporary	5 T	112,209.12						
2001	Personnel Expenses	Personnel Expenses	4 T	112,209.12						
2000	Expenses	Expenses	3 T	112,209.12						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Churchrock Chapter Broadband FMIS Business Unit No. K2115189
 Title of Grant: ARPA OF 2021 Grant No.: CAP-11-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 9020	INFRASTRUCTURE	400,000.00	(400,000.00)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 400,000.00	(400,000.00)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch# 1416331

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Copy: Contract files Contract Accounting/OOC FY'24 NN BIM

Job K2115189 US TREASURY-CHURCH RK CH BRDBD
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1710	Program Revenue	Program Revenue	6	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1000	Revenues	Revenues	3	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
9020	Infrastructure	Infrastructure	6	BN	400,000.00	400,000.00			400,000.00	1.00	1.00
9020	Infrastructure	Infrastructure	6	T	400,000.00	400,000.00			400,000.00	1.00	1.00
9001	Real Property	Real Property	5	T	400,000.00	400,000.00			400,000.00	1.00	1.00
9000	Capital Outlay	Capital Outlay	4	T	400,000.00	400,000.00			400,000.00	1.00	1.00
2000	Expenses	Expenses	3	T	400,000.00	400,000.00			400,000.00	1.00	1.00

Job K2115189 US TREASURY-CHURCH RR CH BRDBD
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 BN	400,000.00-						
1710		Program Revenue		6 T	400,000.00-						
1705		CG Revenue		5 T	400,000.00-						
1700		External C/G Revenue Source		4 T	400,000.00-						
1000		Revenues		3 T	400,000.00-						
9020		Infrastructure		6 BN	400,000.00						
9020		Infrastructure		6 T	400,000.00						
9001		Real Property		5 T	400,000.00						
9000		Capital Outlay		4 T	400,000.00						
2000		Expenses		3 T	400,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Smith Lake Home Renovation FMIS Business Unit No. K2115217 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6020	SUPPLIES	350,000.00	(350,000.00)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 350,000.00	(350,000.00)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416332

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Copy: Contract files Contract Accounting/OOC FY'24 NN BIM

Job K2115217 US TREASURY-SMITH LAKE HOME RE
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	B N	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1710		Program Revenue	6	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1705		CG Revenue	5	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1000		Revenues	3	T	350,000.00-	350,000.00-			350,000.00	1.00	1.00
6020		Supplies	6	B N	350,000.00	350,000.00			350,000.00	1.00	1.00
6020		Supplies	6	T	350,000.00	350,000.00			350,000.00	1.00	1.00
6010		Building	5	T	350,000.00	350,000.00			350,000.00	1.00	1.00
6000		Repairs & Maintenance	4	T	350,000.00	350,000.00			350,000.00	1.00	1.00
2000		Expenses	3	T	350,000.00	350,000.00			350,000.00	1.00	1.00

Job K2115217 US TREASURY-SMITH LAKE HOME RE
Project

Cost Code	Cost Type	Description	L P M	DE C UM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	350,000.00-						
1710		Program Revenue	6	T	350,000.00-						
1705		CG Revenue	5	T	350,000.00-						
1700		External C/G Revenue Source	4	T	350,000.00-						
1000		Revenues	3	T	350,000.00-						
6020		Supplies	6	BN	350,000.00						
6020		Supplies	6	T	350,000.00						
6010		Building	5	T	350,000.00						
6000		Repairs & Maintenance	4	T	350,000.00						
2000		Expenses	3	T	350,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Churchrock House Roof Renovation FMIS Business Unit No. K2115218 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 9050	BUILDING	400,000	(400,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 400,000	(400,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416333

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job K2115218 US TREASURY-CHURCHROCK HSE ROO
Project

Thru Date 7/31/2024

Cost Code	Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1710		Program Revenue	6	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1705		CG Revenue	5	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
1000		Revenues	3	T	400,000.00-	400,000.00-			400,000.00-	1.00	1.00
9050		Building	6	BN	400,000.00	400,000.00			400,000.00	1.00	1.00
9050		Building	6	T	400,000.00	400,000.00			400,000.00	1.00	1.00
9001		Real Property	5	T	400,000.00	400,000.00			400,000.00	1.00	1.00
9000		Capital Outlay	4	T	400,000.00	400,000.00			400,000.00	1.00	1.00
2000		Expenses	3	T	400,000.00	400,000.00			400,000.00	1.00	1.00

Job K2115218 US TREASURY-CHURCHROCK HSE ROO
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	400,000.00-						
1705	CG Revenue	CG Revenue	5	T	400,000.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	400,000.00-						
1000	Revenues	Revenues	3	T	400,000.00-						
9050	Building	Building	6	BN	400,000.00						
9050	Building	Building	6	T	400,000.00						
9001	Real Property	Real Property	5	T	400,000.00						
9000	Capital Outlay	Capital Outlay	4	T	400,000.00						
2000	Expenses	Expenses	3	T	400,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Churchrock Rural Addressing FMIS Business Unit No. K2115219 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8500	INFRASTRUCTURE (NON CAP)	200,000	(200,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 200,000	(200,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416334

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry: CSH 7.22.24
 Contracting Officer - Signature / Date

Job K2115219 US TREASURY-CHURCHROCK RURAL
Project

Print Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
1000	Revenues	Revenues	3	T	200,000.00-	200,000.00-			200,000.00-	1.00	1.00
8500	Infasature (non cap)	Infasature (non cap)	6	BN	200,000.00	200,000.00			200,000.00	1.00	1.00
8500	Infasature (non cap)	Infasature (non cap)	6	T	200,000.00	200,000.00			200,000.00	1.00	1.00
8010	Public	Public	5	T	200,000.00	200,000.00			200,000.00	1.00	1.00
8000	Assistance	Assistance	4	T	200,000.00	200,000.00			200,000.00	1.00	1.00
2000	Expenses	Expenses	3	T	200,000.00	200,000.00			200,000.00	1.00	1.00

Job K2115219 US TREASURY- CHURCHROCK RURAL
Project

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	200,000.00-						
1710	Program Revenue	Program Revenue	6	T	200,000.00-						
1705	CG Revenue	CG Revenue	5	T	200,000.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	200,000.00-						
1000	Revenues	Revenues	3	T	200,000.00-						
8500	Infrastructure (non cap)	Infrastructure (non cap)	6	BN	200,000.00						
8500	Infrastructure (non cap)	Infrastructure (non cap)	6	T	200,000.00						
8010	Public	Public	5	T	200,000.00						
8000	Assistance	Assistance	4	T	200,000.00						
2000	Expenses	Expenses	3	T	200,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

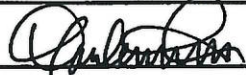

Title of Program: Pinedale Manufactured Homes FMIS Business Unit No. K2115220 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6520	CONSULTING	733,528.56	(733,528.56)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 733,528.56	(733,528.56)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416335

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7.22.24
 Contracting Officer - Signature / Date

Job K2115220 US TREASURY-PINEDALE MANU HOME
Project

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1710		Program Revenue	6	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1705		CG Revenue	5	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1700		External C/G Revenue Sourc	4	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1000		Revenues	3	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
6520		Consulting	6	BN	733,528.56	733,528.56			733,528.56	1.00	1.00
6520		Consulting	6	T	733,528.56	733,528.56			733,528.56	1.00	1.00
6510		Professional Services	5	T	733,528.56	733,528.56			733,528.56	1.00	1.00
6500		Contractual Services	4	T	733,528.56	733,528.56			733,528.56	1.00	1.00
2000		Expenses	3	T	733,528.56	733,528.56			733,528.56	1.00	1.00

Job K2115220 US TREASURY-PINEDALE MANU HOME
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	T	733,528.56-						
1705		CG Revenue	5	T	733,528.56-						
1700		External C/G Revenue Source	4	T	733,528.56-						
1000		Revenues	3	T	733,528.56-						
6520		Consulting	6	T	733,528.56						
6510		Professional Services	5	T	733,528.56						
6500		Contractual Services	4	T	733,528.56						
2000		Expenses	3	T	733,528.56						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Pinedale Home Improvement FMIS Business Unit No. K2115221 ✓

Title of Grant : ARPA OF 2021 Grant No.: CMY-39-23 ✓

CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

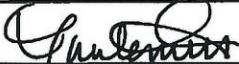
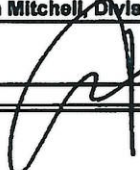
PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6020	SUPPLIES	733,528.56	(733,528.56)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 733,528.56	(733,528.56)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.



PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director

Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416338

Verified & Recommend Approval:  7/22/24 Approval for FMIS Entry:  7-22-24

Contract Analyst - Signature / Date Contracting Officer - Signature / Date

Copy: Contract files Contract Accounting/OOC FY'24 NN BIM

Job K2115221 US TREASURY-PINEDALE HOME IMPR
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
1000	Revenues	Revenues	3	T	733,528.56-	733,528.56-			733,528.56-	1.00	1.00
6020	Supplies	Supplies	6	BN	733,528.56	733,528.56			733,528.56	1.00	1.00
6020	Supplies	Supplies	6	T	733,528.56	733,528.56			733,528.56	1.00	1.00
6010	Building	Building	5	T	733,528.56	733,528.56			733,528.56	1.00	1.00
6000	Repairs & Maintenance	Repairs & Maintenance	4	T	733,528.56	733,528.56			733,528.56	1.00	1.00
2000	Expenses	Expenses	3	T	733,528.56	733,528.56			733,528.56	1.00	1.00

Job K2113221 US TREASURY-PINEDALE HOME IMPR
Project

Trm Date 7/31/2024

Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	T	733,528.56-						
1705		CG Revenue	5	T	733,528.56-						
1700		External C/G Revenue Source	4	T	733,528.56-						
1000		Revenues	3	T	733,528.56-						
6020		Supplies	6	BN	733,528.56						
6020		Supplies	6	T	733,528.56						
6010		Building	5	T	733,528.56						
6000		Repairs & Maintenance	4	T	733,528.56						
2000		Expenses	3	T	733,528.56						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Churchrock Bathroom Renovation FMIS Business Unit No. K2115222 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 9050	BUILDING	467,056	(467,056)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 467,056	(467,056)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416339

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7.22.24
 Contracting Officer - Signature / Date

Job K2115222 US TREASURY/CHURCHROCK BR RENO
Project

Thru Date 7/31/2024

Cost Code	Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 BN	467,056.00-	467,056.00-			467,056.00-	1.00	1.00
1710		Program Revenue		6 T	467,056.00-	467,056.00-			467,056.00-	1.00	1.00
1705		CG Revenue		5 T	467,056.00-	467,056.00-			467,056.00-	1.00	1.00
1700		External C/G Revenue Source		4 T	467,056.00-	467,056.00-			467,056.00-	1.00	1.00
1000		Revenues		3 T	467,056.00-	467,056.00-			467,056.00-	1.00	1.00
9050		Building		6 BN	467,056.00	467,056.00			467,056.00	1.00	1.00
9050		Building		6 T	467,056.00	467,056.00			467,056.00	1.00	1.00
9001		Real Property		5 T	467,056.00	467,056.00			467,056.00	1.00	1.00
9000		Capital Outlay		4 T	467,056.00	467,056.00			467,056.00	1.00	1.00
2000		Expenses		3 T	467,056.00	467,056.00			467,056.00	1.00	1.00

Job K2115222 US TREASURY-CHURCHROCK BR RENO
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6 B N	467,056.00-						
1710		Program Revenue	6 T	467,056.00-						
1705		CG Revenue	5 T	467,056.00-						
1700		External C/G Revenue Source	4 T	467,056.00-						
1000		Revenues	3 T	467,056.00-						
9050		Building	6 B N	467,056.00						
9050		Building	6 T	467,056.00						
9001		Real Property	5 T	467,056.00						
9000		Capital Outlay	4 T	467,056.00						
2000		Expenses	3 T	467,056.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For Increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

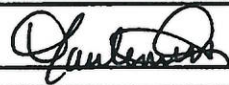

Title of Program: Iyanbito Home Repair FMIS Business Unit No. K2115223 ✓
 Title of Grant : ARPA OF 2021 Grant No.: CMY-39-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8500	INFRASTURE (NON CAP)	1,257,066.67	(1,257,066.67)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 1,257,066.67	(1,257,066.67)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager Division/Executive
 (print): Paulene Thomas, Dept Mgr II Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416342

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7.22.24
 Contracting Officer - Signature / Date

Job K2115223 US TREASURY-IYANBHTO HM REPAIR
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE CUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	B N	1,257,056.67-	1,257,056.67-			1,257,056.67-	1.00	1.00
1710		Program Revenue	6	T	1,257,056.67-	1,257,056.67-			1,257,056.67-	1.00	1.00
1705		CG Revenue	5	T	1,257,056.67-	1,257,056.67-			1,257,056.67-	1.00	1.00
1700		External C/G Revenue Source	4	T	1,257,056.67-	1,257,056.67-			1,257,056.67-	1.00	1.00
1000		Revenues	3	T	1,257,056.67-	1,257,056.67-			1,257,056.67-	1.00	1.00
8500		Infrastrure (non cap)	6	B N	1,257,056.67	1,257,056.67			1,257,056.67	1.00	1.00
8500		Infrastrure (non cap)	6	T	1,257,056.67	1,257,056.67			1,257,056.67	1.00	1.00
8010		Public	5	T	1,257,056.67	1,257,056.67			1,257,056.67	1.00	1.00
8000		Assistance	4	T	1,257,056.67	1,257,056.67			1,257,056.67	1.00	1.00
2000		Expenses	3	T	1,257,056.67	1,257,056.67			1,257,056.67	1.00	1.00

Job K2115223 US TREASURY-IYANBITO H/M REPAIR
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	1,257,056.67-						
1710		Program Revenue	6	T	1,257,056.67-						
1705		CG Revenue	5	T	1,257,056.67-						
1700		External C/G Revenue Source Revenues	4	T	1,257,056.67-						
1000		Revenues	3	T	1,257,056.67-						
8500		Infrastructure (non cap)	6	BN	1,257,056.67						
8500		Infrastructure (non cap)	6	T	1,257,056.67						
8010		Public Assistance	5	T	1,257,056.67						
8000		Assistance	4	T	1,257,056.67						
2000		Expenses	3	T	1,257,056.67						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

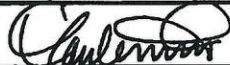
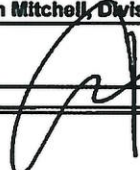
Title of Program: Iyanbito Chapter Rental/Utility Assistance FMIS Business Unit No. K2115330 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAU-73-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8705	CHAPTER	10,000	(10,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 10,000	(10,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				


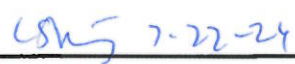
* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

BATCH # 1416346

Verified & Recommend Approval:  Approval for FMIS Entry:  7-22-24
 Contract Analyst - Signature / Date Contracting Officer - Signature / Date

Job K2115330 IVANBITO CHPTR-HOUSE FIN ASSIS
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 B N	10,000.00-	10,000.00-			10,000.00-	1.00	1.00
1710		Program Revenue		6 T	10,000.00-	10,000.00-			10,000.00-	1.00	1.00
1705		CG Revenue		5 T	10,000.00-	10,000.00-			10,000.00-	1.00	1.00
1700		External C/G Revenue Source		4 T	10,000.00-	10,000.00-			10,000.00-	1.00	1.00
1000		Revenues		3 T	10,000.00-	10,000.00-			10,000.00-	1.00	1.00
8705		Chapter		6 B N	10,000.00	10,000.00			10,000.00	1.00	1.00
8705		Chapter		6 T	10,000.00	10,000.00			10,000.00	1.00	1.00
8700		Grants		5 T	10,000.00	10,000.00			10,000.00	1.00	1.00
8000		Assistance		4 T	10,000.00	10,000.00			10,000.00	1.00	1.00
2000		Expenses		3 T	10,000.00	10,000.00			10,000.00	1.00	1.00

Job K2115330 IVANBITO CHPTR-HOUSE FIN-ASSIS
Project

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 B N	10,000.00-						
1710		Program Revenue		6 T	10,000.00-						
1705		CG Revenue		5 T	10,000.00-						
1700		External C/G Revenue Sourc		4 T	10,000.00-						
1000		Revenues		3 T	10,000.00-						
8705		Chapter		6 B N	10,000.00						
8705		Chapter		6 T	10,000.00						
8700		Grants		5 T	10,000.00						
8000		Assistance		4 T	10,000.00						
2000		Expenses		3 T	10,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

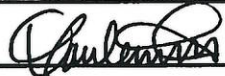

Title of Program: Mariano Lake Special Duty Pay FMIS Business Unit No. K2115331 ✓
 Title of Grant : ARPA OF 2021 Grant No.: CAU-73-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 2710	REGULAR	49,999	(49,999)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 49,999	(49,999)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

BATCH# 1416348

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job K2115331 MARIANO LAKE CHPT SPCL DUTY PA
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	B N	49,999.00-	49,999.00-			49,999.00-	1.00	1.00
1710		Program Revenue	6	T	49,999.00-	49,999.00-			49,999.00-	1.00	1.00
1705		CG Revenue	5	T	49,999.00-	49,999.00-			49,999.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	49,999.00-	49,999.00-			49,999.00-	1.00	1.00
1800		Revenues	3	T	49,999.00-	49,999.00-			49,999.00-	1.00	1.00
2710		Regular	6	B N	49,999.00	49,999.00			49,999.00	1.00	1.00
2710		Regular	6	T	49,999.00	49,999.00			49,999.00	1.00	1.00
2700		Merit & Bonus Pay	5	T	49,999.00	49,999.00			49,999.00	1.00	1.00
2801		Personal Expenses	4	T	49,999.00	49,999.00			49,999.00	1.00	1.00
2800		Expenses	3	T	49,999.00	49,999.00			49,999.00	1.00	1.00

Job K2115331 MARIANO LAKE CHPT SPCL DUTY PA
Project

Cost Code	Cost Type	Description	L P M	D E C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	B N	49,999.00-						
1710	Program Revenue	Program Revenue	6	T	49,999.00-						
1705	CG Revenue	CG Revenue	5	T	49,999.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	49,999.00-						
1000	Revenues	Revenues	3	T	49,999.00-						
2710	Regular	Regular	6	B N	49,999.00						
2710	Regular	Regular	6	T	49,999.00						
2700	Merit & Bonus Pay	Merit & Bonus Pay	5	T	49,999.00						
2001	Personal Expenses	Personal Expenses	4	T	49,999.00						
2000	Expenses	Expenses	3	T	49,999.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

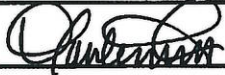

Title of Program: Smith Lake Chapter House Construction FMIS Business Unit No. K2115332 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAU-73-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 9050	BUILDING	350,000	(350,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 350,000	(350,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch# 1416350

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job K2115132 SMITH LAKE CHPTR-HOUSE CONSTRU
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	D E C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	B N	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1710		Program Revenue	6	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1705		CG Revenue	5	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
1000		Revenues	3	T	350,000.00-	350,000.00-			350,000.00-	1.00	1.00
9050		Building	6	B N	350,000.00	350,000.00			350,000.00	1.00	1.00
9050		Building	6	T	350,000.00	350,000.00			350,000.00	1.00	1.00
9001		Real Property	5	T	350,000.00	350,000.00			350,000.00	1.00	1.00
9000		Capital Outlay	4	T	350,000.00	350,000.00			350,000.00	1.00	1.00
2000		Expenses	3	T	350,000.00	350,000.00			350,000.00	1.00	1.00

Job K2115332 SMITH LAKE CHPTR-HOUSE CONSTRU
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C UM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	350,000.00-						
1710		Program Revenue	6	T	350,000.00-						
1705		CG Revenue	5	T	350,000.00-						
1700		External C/G Revenue Source	4	T	350,000.00-						
1000		Revenues	3	T	350,000.00-						
9050		Building	6	BN	350,000.00						
9050		Building	6	T	350,000.00						
9001		Real Property	5	T	350,000.00						
9000		Capital Outlay	4	T	350,000.00						
2000		Expenses	3	T	350,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to Initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:



Title of Program: Smith Lake Chapter PEP Workforce FMIS Business Unit No. K2115333 ✓
 Title of Grant: ARPA OF 2021 Grant No.: CAU-73-23 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8705	CHAPTER	300,000	(300,000)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 300,000	(300,000)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				


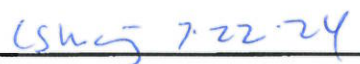

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416353

Verified & Recommend Approval:  7/22/24 Contract Analyst - Signature / Date
 Approval for FMIS Entry:  7-22-24 Contracting Officer - Signature / Date
 7/22/24

Job K2115333 SMITH LAKE CHPTR- PEP WORKFORC
Project

Tran Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 B N	300,000.00-	300,000.00-			300,000.00-	1.00	1.00
1710		Program Revenue		6 T	300,000.00-	300,000.00-			300,000.00-	1.00	1.00
1705		CG Revenue		5 T	300,000.00-	300,000.00-			300,000.00-	1.00	1.00
1700		External C/G Revenue Source		4 T	300,000.00-	300,000.00-			300,000.00-	1.00	1.00
1000		Revenues		3 T	300,000.00-	300,000.00-			300,000.00-	1.00	1.00
8705		Chapter		6 B N	300,000.00	300,000.00			300,000.00	1.00	1.00
8705		Chapter		6 T	300,000.00	300,000.00			300,000.00	1.00	1.00
8700		Grants		5 T	300,000.00	300,000.00			300,000.00	1.00	1.00
8000		Assistance		4 T	300,000.00	300,000.00			300,000.00	1.00	1.00
2000		Expenses		3 T	300,000.00	300,000.00			300,000.00	1.00	1.00

Job K2115333 SMITH LAKE CHPTR- PEP WORKFORC
Project

Cost Code	Cost Type	Description	L P M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6 B N	300,000.00-						
1710	Program Revenue	Program Revenue	6 T	300,000.00-						
1705	CG Revenue	CG Revenue	5 T	300,000.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4 T	300,000.00-						
1000	Revenues	Revenues	3 T	300,000.00-						
8705	Chapter	Chapter	6 B N	300,000.00						
8705	Chapter	Chapter	6 T	300,000.00						
8700	Grants	Grants	5 T	300,000.00						
8000	Assistance	Assistance	4 T	300,000.00						
2000	Expenses	Expenses	3 T	300,000.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Iyanbito Home Repair FMIS Business Unit No. K2115334 ✓

Title of Grant: ARPA OF 2021 Grant No.: CAU-73-23 ✓

CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

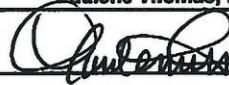
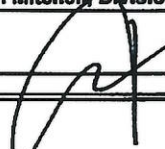
PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 8020	SOCIAL	467,056.67	(467,056.67)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 467,056.67	(467,056.67)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.


PART III. CERTIFICATION:

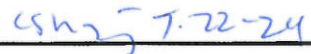
Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director

Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch #1416355

Verified & Recommend Approval:  7/22/24 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24 Contracting Officer - Signature / Date

Copy: Contract files Contract Accounting/OOC FY'24 NN BIM

Job K211534 SMITH LAKE CHPTR- COM.FIN ASST
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DE C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	467,056.67-	467,056.67-			467,056.67-	1.00	1.00
1710	Program Revenue	Program Revenue	6	T	467,056.67-	467,056.67-			467,056.67-	1.00	1.00
1705	CG Revenue	CG Revenue	5	T	467,056.67-	467,056.67-			467,056.67-	1.00	1.00
1700	External CIG Revenue Source	External CIG Revenue Source	4	T	467,056.67-	467,056.67-			467,056.67-	1.00	1.00
1000	Revenues	Revenues	3	T	467,056.67-	467,056.67-			467,056.67-	1.00	1.00
8020	Social	Social	6	BN	467,056.67	467,056.67			467,056.67	1.00	1.00
8020	Social	Social	6	T	467,056.67	467,056.67			467,056.67	1.00	1.00
8010	Public	Public	5	T	467,056.67	467,056.67			467,056.67	1.00	1.00
8000	Assistance	Assistance	4	T	467,056.67	467,056.67			467,056.67	1.00	1.00
2000	Expenses	Expenses	3	T	467,056.67	467,056.67			467,056.67	1.00	1.00

Job K2115334 SMITH LAKE CHPTR- COM.FIN ASST
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6 B N	467,056.67-						
1705	CG Revenue	CG Revenue	5 T	467,056.67-						
1700	External C/G Revenue Source	External C/G Revenue Source	4 T	467,056.67-						
1000	Revenues	Revenues	3 T	467,056.67-						
8820	Social	Social	6 B N	467,056.67						
8020	Social	Social	6 T	467,056.67						
8010	Public	Public	5 T	467,056.67						
8000	Assistance	Assistance	4 T	467,056.67						
2000	Expenses	Expenses	3 T	467,056.67						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Thoreau Temporary Personnel FMIS Business Unit No. K2115505

Title of Grant : ARPA OF 2021 Grant No.: NABIMA-18-24

CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 2310	TEMPORARY	168,100	(168,100)	-
				-
✓ 2900	FRINGE BENEFITS	12,860	(12,860)	-
				-
✓ 2960	WORKER'S COMP	891	(891)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 181,851	(181,851)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director

Signature/Date: [Signature] 7/12/24 Signature/Date: [Signature]

PART IV. CGS / OMB USE ONLY

Batch # 1416 359

Verified & Recommend Approval: [Signature] 7/22/24 Contract Analyst - Signature / Date

Approval for FMIS Entry: [Signature] 7-22-24 Contracting Officer - Signature / Date

Copy: Contract files Contract Accounting/OOC FY'24 NN BIM

Job K2115505 USTREAS-THOREAU TEMP PERSONNEL
Project

Thru Date 7/31/2024

Cost Code	Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	181,851.00-	181,851.00-			181,851.00-	1.00	1.00
1710		Program Revenue	6	T	181,851.00-	181,851.00-			181,851.00-	1.00	1.00
1705		CG Revenue	5	T	181,851.00-	181,851.00-			181,851.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	181,851.00-	181,851.00-			181,851.00-	1.00	1.00
1000		Revenues	3	T	181,851.00-	181,851.00-			181,851.00-	1.00	1.00
2310		Temporary	6	BN	168,100.00	168,100.00			168,100.00	1.00	1.00
2310		Temporary	6	T	168,100.00	168,100.00			168,100.00	1.00	1.00
2300		Temporary	5	T	168,100.00	168,100.00			168,100.00	1.00	1.00
2900		Fringe Benefits	5	BN	12,860.00	12,860.00			12,860.00	1.00	1.00
2960		Worker's Comp	6	BN	891.00	891.00			891.00	1.00	1.00
2960		Worker's Comp	6	T	891.00	891.00			891.00	1.00	1.00
2900		Fringe Benefits	5	T	13,751.00	13,751.00			13,751.00	1.00	1.00
2001		Personnel Expenses	4	T	181,851.00	181,851.00			181,851.00	1.00	1.00
2000		Expenses	3	T	181,851.00	181,851.00			181,851.00	1.00	1.00

Job K2113505 USTREAS-THOREAU TEMP PERSONNEL
Project

7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710	Program Revenue	Program Revenue	6	BN	181,851.00-						
1710	Program Revenue	Program Revenue	6	T	181,851.00-						
1705	CG Revenue	CG Revenue	5	T	181,851.00-						
1700	External C/G Revenue Source	External C/G Revenue Source	4	T	181,851.00-						
1800	Revenues	Revenues	3	T	181,851.00-						
2310	Temporary	Temporary	6	BN	168,100.00						
2310	Temporary	Temporary	6	T	168,100.00						
2300	Temporary	Temporary	5	T	168,100.00						
2900	Fringe Benefits	Fringe Benefits	5	BN	12,860.00						
2960	Worker's Comp	Worker's Comp	6	BN	891.00						
2960	Worker's Comp	Worker's Comp	6	T	891.00						
2900	Fringe Benefits	Fringe Benefits	5	T	13,751.00						
2001	Personnel Expenses	Personnel Expenses	4	T	181,851.00						
2000	Expenses	Expenses	3	T	181,851.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

Title of Program: Mariano Lake Powerline FMIS Business Unit No. K2115506 ✓
 Title of Grant: ARPA OF 2021 Grant No.: NABIMA-18-24 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6960	SUBCONTRACTED SERVICES	1,019,678	(1,019,678)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 1,019,678	(1,019,678)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				

* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416361

Verified & Recommend Approval:  7/22/24
 Contract Analyst - Signature / Date

Approval for FMIS Entry:  7-22-24
 Contracting Officer - Signature / Date

Job K2115506 USTREAS-MARIANO LAKE POWERLINE
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	BN	1,019,678.00-	1,019,678.00-			1,019,678.00-	1.00	1.00
1710		Program Revenue	6	T	1,019,678.00-	1,019,678.00-			1,019,678.00-	1.00	1.00
1705		CG Revenue	5	T	1,019,678.00-	1,019,678.00-			1,019,678.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	1,019,678.00-	1,019,678.00-			1,019,678.00-	1.00	1.00
1000		Revenues	3	T	1,019,678.00-	1,019,678.00-			1,019,678.00-	1.00	1.00
6960		Subcontracted Services	6	BN	1,019,678.00	1,019,678.00			1,019,678.00	1.00	1.00
6960		Subcontracted Services	6	T	1,019,678.00	1,019,678.00			1,019,678.00	1.00	1.00
6930		Subcontracted Services	5	T	1,019,678.00	1,019,678.00			1,019,678.00	1.00	1.00
6500		Contractual Services	4	T	1,019,678.00	1,019,678.00			1,019,678.00	1.00	1.00
2000		Expenses	3	T	1,019,678.00	1,019,678.00			1,019,678.00	1.00	1.00

Job K2115506 USTREAS-MARIANO LAKE POWERLINE
Project

Thru Date 7/31/2024

Cost Code	Cost Type	Description	L P M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6 BN	1,019,678.00-						
1710		Program Revenue	6 T	1,019,678.00-						
1705		CG Revenue	5 T	1,019,678.00-						
1700		External C/G Revenue Source	4 T	1,019,678.00-						
1000		Revenues	3 T	1,019,678.00-						
6960		Subcontracted Services	6 BN	1,019,678.00						
6960		Subcontracted Services	6 T	1,019,678.00						
6950		Subcontracted Services	5 T	1,019,678.00						
6590		Contractual Services	4 T	1,019,678.00						
2000		Expenses	3 T	1,019,678.00						

THE NAVAJO NATION
SUMMARY OF CHANGES on EXTERNAL GRANT BUDGET
BASED ON CONTRACT MODIFICATION NO. _____
 (For increase or decrease to initial Annual Funding Awarded Only)

PART I. PROGRAM / GRANT INFORMATION:

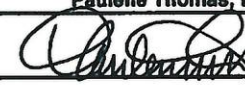
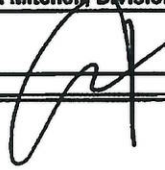
Title of Program: Mariano Lake Utility FMIS Business Unit No. K2115507 ✓
 Title of Grant: ARPA OF 2021 Grant No.: NABIMA-18-24 ✓
 CFDA No.: _____ Original Funding Period: Start - End: 10/1/21 - 9/30/26 *

PART II. BUDGET INFORMATION: In Columns A thru C below, enter data that is in the FMIS currently and at LOD 6.

(A)	(B)	(C)	(D)	(E)
Cost Type	Description	Revised Budget	Amount of Change (+/-) This Mod. *	Adjusted Budget (Sum of C & D)
✓ 6960	SUBCONTRACTED SERVICES	285,171	(285,171)	-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
				-
TOTALS:		✓ 285,171	(285,171)	-
CONTRACTS & GRANTS PROGRAM REVENUE:				


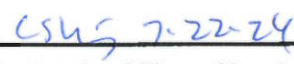
* On separate page, provide justification on cost type(s) that are affected in Column D. This is a condition for processing the change. The modified budget will be authorized for use until the change is entered into FMIS by CGS/OMB.

PART III. CERTIFICATION:

Program Manager (print): Paulene Thomas, Dept Mgr II Division/Executive Director (print): Arbin Mitchell, Division Director
 Signature/Date:  7/3/24 Signature/Date:  07/05/2024

PART IV. CGS / OMB USE ONLY

Batch # 1416362

Verified & Recommend Approval:  7/22/24 Contract Analyst - Signature / Date
 Approval for FMIS Entry:  7-22-24 Contracting Officer - Signature / Date

Job K2115507 US TREAS- MARIANO LAKE UTILITY
Project

Cost Code	Cost Type	Description	L P M	D E C U M	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue	6	B N	285,171.00-	285,171.00-			285,171.00-	1.00	1.00
1710		Program Revenue	6	T	285,171.00-	285,171.00-			285,171.00-	1.00	1.00
1705		CG Revenue	5	T	285,171.00-	285,171.00-			285,171.00-	1.00	1.00
1700		External C/G Revenue Source	4	T	285,171.00-	285,171.00-			285,171.00-	1.00	1.00
1000		Revenues	3	T	285,171.00-	285,171.00-			285,171.00-	1.00	1.00
6960		Subcontracted Services	6	B N	285,171.00	285,171.00			285,171.00	1.00	1.00
6960		Subcontracted Services	6	T	285,171.00	285,171.00			285,171.00	1.00	1.00
6950		Subcontracted Services	5	T	285,171.00	285,171.00			285,171.00	1.00	1.00
6500		Contractual Services	4	T	285,171.00	285,171.00			285,171.00	1.00	1.00
2000		Expenses	3	T	285,171.00	285,171.00			285,171.00	1.00	1.00

Job: K2115507 US TREAS- MARIANO LAKE UTILITY
Project: 7/31/2024

Code	Cost Type	Description	L P M	DECUM	Original Budget Amt	Revised Budget Amt	Actual Amount	Open Commit Amount	Budget Balance	% Revised Spent	% Revised Remaining
1710		Program Revenue		6 BN	285,171.00-						
1710		Program Revenue		6 T	285,171.00-						
1705		CG Revenue		5 T	285,171.00-						
1700		External C/G Revenue Source		4 T	285,171.00-						
1000		Revenues		3 T	285,171.00-						
6960		Subcontracted Services		6 BN	285,171.00						
6960		Subcontracted Services		6 T	285,171.00						
6950		Subcontracted Services		5 T	285,171.00						
6500		Contractual Services		4 T	285,171.00						
2000		Expenses		3 T	285,171.00						