ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY QUARTERLY EXPENDITURE REPORT

IMPLEMENTING AGENCY: Example	е				FEIN:	Example			Example
PROGRAM: <u>Example</u>	THIS DEPONT IS	FOR THE DEDIC	D FDOM:	## /## /#		M PERIOD:		THROUGH	##/##/##
	THIS REPORT IS	FOR THE PERIO		##/##/#		H: ##/##/	!"		•
LINE ITEM Expenses	BUDGET	1st Quarter	EXPEN 2nd Quarter	DITURE PER 3rd Quarter	4th	Close-out Expenses	YTD Expens	SE BUDGET REMAINING	Projected Expenses Next Quarter
Personnel		1	1	1			Ç	so \$0	1
Equipment								50 \$0	
Commodities				MM			¢	\$0	
Travel				NIVI			¢	\$0	
Contractual							Ş	\$0	
Other Costs				<u> </u>			¢	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0		\$0	\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$	0	
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$	50	
Year-To-Date Expenditure and Payme	ent Status To	be filled by Gran	ntee To b	e filled by ICJIA	ICJ	IA/FSGU USE O	NLY FY		
A) Payments received Year-to-Date					DIS	SBURSAL AMO	UNT FY		
B) TOTAL AMOUNT VOUCHERED Y-T-	D					APPROVED	tal	\$0	
C) Expenditures Year-To-Date			\$0						
D) Cash Balance			\$0						
E) Projected Expenses Next Quarter			\$0						
Cash Required to Meet Expenses			\$0		Signatur	re of ICJIA Project N	/lonitor	Date	
Disbursal Requested									
					Monitor	r Supervisor		Date	
Certification and Approval: We certi	fy that the attached servi	ices are true, accur	ate and complete,	, that the services		•	itate of Illinois ar	nd that payment	
has NOT been received from any other source	e. We agree to keep a	nd make available s	such hard copy red	cords and source d	ocuments asso	ciated with the a	ttached services	as necessary	
to disclose fully the nature and extent of serv								,	
to disclose rany the nature and extent of serv	ices provided and to fair	non out informati	on regarding any p	dayments claimed	as state and re	acrai orniciais ini	ry request.		
Preparer of this Report				Telephone	:	Email		Da	te

Email

Telephone:

Date

Approver of this Report (must be different than Preparer)

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY <u>QUARTERLY EXPENDITURE REPORT</u>

2 Year Report

Quarter 1 through 4

IMPLEMENTING AGENCY: Example				FE	IN: Example	e	AGREE	MENT #	Example
PROGRAM: Example				P	ROGRAM PERI	OD: ##/	##/##	THROUGH	##/##/##
	THIS REPORT IS	FOR THE PERIO	D FROM:	##/##/## T	HROUGH: #	#/##/##	_		
LINE ITEM Expenses	BUDGET	1st Quarter	EXPEND 2nd Quarter	3rd Quarter		YTD er Expens		BUDGET EMAINING	Projected Expenses Next Quarter
Personnel	1					1	\$0	\$0	- Carrier
Equipment							\$0	\$0	
Commodities			SA			_	\$0	\$0	
Travel							\$0	\$0	
Contractual			I				\$0	\$0	
Other Costs							\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$	0		\$0	\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$	\$0			
Budget Balance	\$0	\$0	\$0	\$0	\$	\$0			
Year-To-Date Expenditure and Paymen A) Payments received Year-to-Date B) TOTAL AMOUNT VOUCHERED Y-T-D C) Expenditures Year-To-Date D) Cash Balance E) Projected Expenses Next Quarter Cash Required to Meet Expenses Disbursal Requested	t Status To		\$0 \$0 \$0 \$0 \$0	lled by ICJIA	ICJIA/FSGU U DISBURSAL A APPRO Signature of ICJIA Monitor Supervis	AMOUNT FY VED	Total	Date	\$0
Certification and Approval: We certify that NOT been received from any other source. to disclose fully the nature and extent of services. Preparer of this Report		nd make available s	such hard copy reco	rds and source do	cuments associate	ed with the atta	ached servi		
Approver of this Report (must be different than F	Preparer)			Telephone:	Ema	ail			Date

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY QUARTERLY EXPENDITURE REPORT

2nd Year Report Quarter 5 through 8

IMPLEMENTING AGENCY: Example				FEIN		•	AGREEMEN		Example
PROGRAM: Example	THIS REPORT IS I	FOR THE PERIO	D FROM:	##/##/## TH		OGRAM PERIOD: ##/##	<u>##/##/#</u> ;	# THROUGF	##/##/##
LINE ITEM Expenses	BUDGET Carry-over	5th Quarter		ENDITURE P	-	Close-out Expenses	YTD Expenses	BUDGET REMAINING	Projected Expenses Next Quarter
Personnel	\$0					<u> </u>	\$0	\$0	-
Equipment	\$0						\$0	\$0	
Commodities	\$0		SA				\$0	\$0	
Travel	\$0						\$0	\$0	
Contractual	\$0						\$0	\$0	
Other Costs	\$0						\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0		\$0	\$0
TOTAL Expenditures To-Date	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Year-To-Date Expenditure and Payment A) Payments received Year-to-Date B) TOTAL AMOUNT VOUCHERED Y-T-D C) Expenditures Year-To-Date D) Cash Balance E) Projected Expenses Next Quarter Cash Required to Meet Expenses Disbursal Requested	Status To		\$0 \$0 \$0 \$0	lled by ICJIA	ICJIA/FSGU DISBURSAL APPRO Signature of ICJIA Pro	AMOUNT FY VED		\$0 Date	
Certification and Approval: We certify the thas NOT been received from any other source. To disclose fully the nature and extent of services. Preparer of this Report		nd make available s	uch hard copy recor	rds and source docu	iments associated v	vith the attached se	rvices as necessary		Date
Approver of this Report (must be different than P	reparer)			Telephone:	Email				Date

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MONTHLY EXPENDITURE REPORT - Month 1 - 6

IMPLEMENTING AGENCY: Exam PROGRAM: Example	nple			FEIN	N: Exam	ple A ##/##/##	GREEMENT THROUGH		mple !#/##	-
<u> </u>	THIS REPO	RT IS FOR THE P	ERIOD FROM:	##/##/##	THROUGH: ##/			·	•	-
			EXPENDITURE PERIOD						BUDGET	Projected
LINE ITEM Expenses	BUDGET	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	YTD Expenses	REMAINING	Expenses Next Month
Personnel	\$0				•			\$0	\$0	
Equipment	\$0		CA	$\mathbf{R} \mathbf{\Lambda}$	DII			\$0	\$0	
Commodities	\$0		SA	IVI				\$0	\$0	
Travel	\$0							\$0	\$0	
Contractual	\$0							\$0	\$0	
Other Costs	\$0							\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0	\$0		\$0	\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0			
Year-To-Date Expenditure and Payr	nent Status	To be filled by G	rantee To be fille	ed by ICJIA	FY					1
A) Payments received Year-to-Date		-			FY					1
B) TOTAL AMOUNT VOUCHERED Y-					Total		\$0			1
C) Expenditures Year-To-Date			\$0		1000		7 -			1
D) Cash Balance			\$0							
E) Projected Expenses Next Quarte	r		\$0							
Cash Required to Meet Expenses Requested Disbursal			\$0		Signature of ICJIA Proje	ect Monitor	Date			
nequested Disbursar										
Certification and Approval: We co	ertify that the attac	hed services are tru	ie, accurate and comp	olete, that the ser	Monitor Supervisor	ges against the State	Date of Illinois and tha	t payment		J
has NOT been received from any other sou			available such hard co			_				
to disclose fully the nature and extent of se	ervices provided an	d to furnish such in	formation regarding a	any payments clai	med as State and Fed	eral officials may red	quest.			
Preparer of this Report				Telephone:	Email				Date	-
Approver of this Report (must be different	than Preparer)			Telephone:	Email				Date	_

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY

MONTHLY EXPENDITURE REPORT - Month 7 - 12

	mple				FEIN:	Example		REEMENT #:	Examp		_
PROGRAM: Example	THIS REPO	RT IS FOR THE PE	ERIOD FROM:	##/#	##/## THRO	RAM PERIOD: UGH: ##/#	##/##/## # #/##	THROUGH	##/##/	'##	-
				FYDEN	IDITURE PEI	RIOD			Ι	<u> </u>	Projected
LINE ITEM Expenses	BUDGET - Carry-Over	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Close-out Expenses	YTD Expenses	BUDGET REMAINING	Expenses Next Month
Personnel	\$0)			_			\$0	\$0	
Equipment	\$0		CV	M	DI	E			\$0	\$0	
Commodities	\$0								\$0	\$0	
Travel	\$0			I	ı				\$0	\$0	
Contractual	\$0								\$0	\$0	
Other Costs	\$0								\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0	\$	50 \$0		\$0	\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$	\$0 \$0	\$0		
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$	50 \$0			
				-		-	-	-			
Year-To-Date Expenditure and Pa	yment Status	To be filled by	Grantee	To be filled by I	CJIA	FY					
A) Payments received Year-to-Dat	te					FY					
B) TOTAL AMOUNT VOUCHERED	Y-T-D					Total		\$0			
C) Expenditures Year-To-Date			\$0								
D) Cash Balance			\$0								
E) Projected Expenses Next Quart	er		\$0								
Cash Required to Meet Expenses			\$0		Sign	ature of ICJIA Project	t Monitor	Dat	e		
Requested Disbursal											
					Mor	nitor Supervisor		Dat	9		
Contification and American		ah a d a a m i a a a a a a tur				·	*** • • • • • • • • • • • • • • • • • •				
		ched services are true									
has NOT been received from any other so		e to keep and make a						as necessary			
to disclose fully the nature and extent of	services provided ar	nd to furnish such info	ormation regarding	any payments claim	ned as State and Fe	ederal officials may	/ request.				
Preparer of this Report				Telephone:		Email			Date	e	-
Approver of this Report (must be differen	t than Preparer)			Telephone:		Email			Date	e	-

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MATCHING FUNDS QUARTERLY REPORT

2 Yr Match Qtr 1-4

IMPLEMENTIN	IG AGENCY:	Example	FEIN:	Example	AGRE	EMENT N	0.	Example
PROGRAM:	Example		PROGRAM P	PERIOD:	<u>#</u> #/##/##	THRU:	##/##/##	

THIS REPORT IS FOR THE PERIOD FROM: ##/### THROUGH: ##/##

	NANTCH		EXPEND	TURE PER	IOD			Projected
LINE ITEM Expenses	MATCH BUDGET	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	YTD Expenses	BUDGET REMAINING	Expenses Next Quarter
Personnel						\$0	\$0	
Equipment			ML	IDI		\$0	\$0	
Commodities			IIV			\$0	\$0	
Travel			<u>[</u>		<u>I</u>	\$0	\$0	
Contractual						\$0	\$0	
Other Costs						\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0			\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0		
Match Budget Balance	\$0	\$0	\$0	\$0	\$0		\$0	

Year-to-Date Match Fund Status						
Match Funds Expended YTD	\$0					
Match Cash Balance	\$0					
Projected Expenses Next Quarter	\$0					
Match Cash Balance after Projected Expenses	\$0					

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MATCHING FUNDS QUARTERLY REPORT

IMPLEMENTING	G AGENCY:	Example	FEIN:	Example	AGREEMENT #:	Example
PROGRAM:	Example		PROGRAM PERIOD): ##/##/##	THROUGH	##/##/##

THIS REPORT IS FOR THE PERIOD FROM: ##/## THROUGH: ##/##

	NAATCH		EX	PENDITUR	E PERIOD				Projected
LINE ITEM Expenses	MATCH BUDGET	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Close-out Expenses	YTD Expenses	BUDGET REMAINING	Expenses Next Quarter
Personnel	\$0						\$0	\$0	
Equipment	\$0						\$0	\$0	
Commodities	\$0						\$0	\$0	
Travel	\$0						\$0	\$0	
Contractual	\$0						\$0	\$0	
Other Costs	\$0						\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0			\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$0		
Match Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0		\$0	

Year-to-Date Match Fund Status							
Match Funds Expended YTD	\$0						
Match Cash Balance	\$0						
Projected Expenses Next Quarter	\$0						
Match Cash Balance after Projected Expenses	\$0						

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MATCHING FUNDS QUARTERLY REPORT

2 Yr Match Qtr 5-8

IMPLEMENTING AGENCY:	Example	FEIN:	Example	_AGREEMENT #:	Example
PROGRAM: <u>Example</u>		PROGRAM P	ERIOD: ##/##/	##_THROUGH	##/##/##

THIS REPORT IS FOR THE PERIOD FROM: ##/##/## THROUGH: ##/##/##

	Decident		EXPE	NDITURE P			Projected		
LINE ITEM Expenses	Budget Carry-Over	5th Quarter	6th Quarter	7th Quarter	8th Quarter	Close-out Expenses	YTD Expenses	BUDGET REMAINING	Expenses Next Quarter
Personnel	\$0						\$0	\$0	
Equipment	\$0				ЛΡΙ		\$0	\$0	
Commodities	\$0			717		\$0	\$0		
Travel	\$0						\$0	\$0	
Contractual	\$0						\$0	\$0	
Other Costs	\$0						\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0			\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$0		
Match Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0		\$0	

Year-to-Date Match Fund Status								
Match Funds Expended YTD	\$0							
Match Cash Balance	\$0							
Projected Expenses Next Quarter	\$0							
Match Cash Balance after Projected Expenses	\$0							

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MONTHLY MATCH REPORT - Month 1 - 6

IMPLEMENTI	NG AGENCY:	Example	FEIN:	Example	AGREEMENT #:	Example
PROGRAM:	Example		PROGRAM P	PERIOD: ##/##	/##_THROUGH	##/##/##
		THIS REPORT IS FOR THE PERIOD FROM:	##/##/## TH	HROUGH: ##	/##/##	

	MATCH		E	EXPENDITURE PERIOD					BUDGET	Projected
LINE ITEM Expenses	BUDGET	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	- YTD Expenses	REMAINING	Expenses Next Month
Personnel	\$0							\$0	\$0	
Equipment	\$0				1P			\$0	\$0	
Commodities	\$0							\$0	\$0	
Travel	\$0					_		\$0	\$0	
Contractual	\$0							\$0	\$0	
Other Costs	\$0							\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0	\$0			\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	

Year-to-Date Match Fund Status								
Match Funds Expended YTD	\$0							
Match Cash Balance	\$0							
Projected Expenses Next Quarter	\$0							
Match Cash Balance after Projected Expenses	\$0							

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY MONTHLY MATCH REPORT - Month 7 - 12

IMPLEMENTING AGENCY:	Example	FEIN: Exa	mple	AGREEMENT #:	Example
PROGRAM: Example		PROGRAM PERIOD	##/##/#	#_THROUGH	##/##/##

THIS REPORT IS FOR THE PERIOD FROM: ##/## THROUGH: ##/##

	Remaining		EXPENDITURE PERIOD						YTD	BUDGET	Projected
LINE ITEM Expenses	Carry-Over	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Close-out Expenses	Expenses	REMAINING	Expenses Next Month
Personnel	\$0								\$0	\$0	
Equipment	\$0								\$0	\$0	
Commodities	\$0			ZIV					\$0	\$0	
Travel	\$0								\$0	\$0	
Contractual	\$0								\$0	\$0	
Other Costs	\$0								\$0	\$0	
TOTAL Expenses for the Period		\$0	\$0	\$0	\$0	\$0	\$0	\$0			\$0
TOTAL Expenditures To-Date		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
Budget Balance	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		\$0	

Year-to-Date Match Fund Status								
Match Funds Expended YTD	\$0							
Match Cash Balance	\$0							
Projected Expenses Next Quarter	\$0							
Match Cash Balance after Projected Expenses	\$0							

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY INCOME RECEIVED AND EXPENDED QUARTERLY REPORT

IMPLEMENTING AGENCY:	Example		FEIN:	Example	A	<u>GREEMEN</u>	NT #:	Example
PROGRAM: Example			PROGRAM P	PERIOD:	##/##	#/## T	HROUGH:	##/##/##
	This Report is for the Po	eriod from:	##/##/##	Through:	##/##	#/##		
		1st Qtr	2nd Qtr	3rd Qtr		4th Qt	r	TOTALS
	INC	OME RECEIVED)					TOTALS
FORFEITURE					_			\$0
FEES		CA	плі		_			\$0
OTHER		34			_			\$0
TOTAL INCOME RECEIV	ED						\$0	\$0
TOTAL INCOME RECEIV	ED Y-T-D	\$0	\$0		\$0		\$0	, -
		OME EXPENDE)	1				
PROJECT INCOME EXPENDED)							ćo
TOTAL INCOME EXPEN	DED Y-T-D	\$0	\$0		\$0		\$0	\$0
	CUMU	JLATIVE TOTA	ALS					
PROJECT INCOME BALANCE	for QTR	\$0	\$0		\$0		\$0	
TOTAL PROJECT INCOM	IE BALANCE Y-T-D	\$0	\$0		\$0		\$0	\$0
Certification and Approval: has NOT been received from any of to disclose fully the nature and extended property of This Report	-	eep and make available	such hard copy reconstruction	cords and source	docum	ents associa	ated with the	e attached services a
rreparer or This Report			Telephor	ie:	ЕM	ıdıı		Date
Approver of Report (must be different than a	above)		Telephor	ne:	Em	ail		Date

Telephone:

Email

Date

ICJIA Project Monitor

ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY INCOME RECEIVED AND EXPENDED QUARTERLY REPORT Year 2 Qtr 5-8

FEIN:

Telephone:

Telephone:

Telephone:

Email

Email

Email

Example

AGREEMENT #:

Example

Date

Date

Date

IMPLEMENTING AGENCY:

Preparer of This Report

ICJIA Project Monitor

Approver of Report (must be different than above)

Example

PROGRAM: Example			PROGRAM P	ERIOD: ##/	/##/## THROU	JGH: ##/##/##	
	Period from:						
	Carry-Over	5th Qtr	6th Qtr	7th Qtr	8th Qtr	GRAND	
Categories	Balance		INCOME	RECEIVED		TOTALS	
ORFEITURE	\$0					\$0	
EES	\$0	CA	R A I			\$0	
OTHER	\$0	SA			0	\$0	
TOTAL INCOME RECEIVED	\$0				\$0	\$0	
TOTAL INCOME RECEIVED Y-T-D	\$0	\$0	\$0	\$0	\$0	γo	
			INCOME E	EXPENDED			
PROJECT INCOME EXPENDED	\$0						
TOTAL INCOME EXPENDED Y-T-D	\$0	\$0	\$0	\$0	\$0	\$0	
	CUMULATI	VE TOTALS					
PROJECT INCOME BALANCE for QTR	\$0	\$0	\$0	\$0	\$0		
TOTAL PROJECT INCOME BALANCE Y	-T-D \$0	\$0	\$0	\$0	\$0	\$0	
	ne attached services are true, agree to keep and make ava	ilable such hard copy	records and source	documents associated	d with the attached s	services as necessary	