	Office of	the Attorney C	General					
		Assistance Gra						
		l Year 2009 Inve	,					
	risca	ii fear 2009 iiive	oice					
Mail To:		Organization Name:	New Grantee					
Office of the Attorney Ge	neral	Invoice #:						
Grants Administration Di		Date:						
P.O. Box 12548		Texas TIN:						
Austin, TX 78711-2548		Mailing Address:						
,		City:						
		State:						
GAD Contact Person		Zip Code:						
Attn: Natha Caldwell		Contact Person:						
Title: Financial Specialist		Title:						
Email: Natha.Caldwell@o	ag.state.tx.us	Email Address:						
Telephone: (512) 936-293	6	Telephone:						
Date of Service		OAG GRANT#		<b>Amount of Claim</b>				
		080000						
		000000						
<b>Note - 1:</b> Invoice must be received no later than 20 days after service period.	contract basis under the Oth General (Term: September Note - 3: None of the costs federal grant or contract or a	Note 2: Reimbursement for some Victim Assistance Grant (1), 2008 to August 31, 2009) billed under this voucher haven other funding source. It is seement are true, correct and	to the Office of the Attorney  ve been charged to any other certify that the expenses	Note - 4: The amount of claim must be equal to the amount stated in "Total" line in the appropriate Date of Service Month in the Financial Status Report (FSR).				
Authorized Official or Designee Signature		1000						
Note - 5: You must attach a	Signature of Authorized Official or Designee Date							
Current Financial Status Report (FSR) Form to this Invoice								
	Type Authorized Office	cial Name or Designe	e and Title					
	_	or OAG Use Only						
Date Received by OAG:			Date Received	by Accounting:				
Date Received by Cric.	1 local / ipproval / Bato			,				

## Other Victim Assistance Grant (OVAG) FY 2009 Financial Status Report (FSR)

Contract No.	080000	Organization Name: New Grantee					Budget Adjustment or								
							10% Budget Modification								
OVAG PROJECT	FY 2009		 Oct.	Actual Nov.	OVAG Gra	nt Expen	ditures			On al Ota		Original	Increase	FY 2009	% of Change by
	Approved Budget	Sept. 2008	2008	2008	1st Qtr Total	Qtrly %	Dec. 2008 J		2009	2nd Qtr Total	Qtrly %	Contract Budget	or Decrease	Operating Budget	Line Item Increase or Decrease
Budget Category Salary *	0		1st Quarter		0	0%		nd Quartei	<u>r</u> T	0	0%	0.00		0.00	0%
Fringe	0	-			0	0%				0	0%	0.00		0.00	
Prof/Consultant	0				0	0%				0	0%	0.00		0.00	
Travel	0				0	0%				0	0%	0.00		0.00	0%
Equipment	0				0	0%				0	0%	0.00		0.00	
Supplies	0				0	0%				0	0%	0.00		0.00	
Other DOE	0				0	0%				0	0%	0.00		0.00	
Total	0		0.00	0.00	0	0% <b>0</b> %		0.00	0.00	0	0% 0%	0.00	0.00	0.00	
Total	·	0.00	0.00	0.00	·	0,0	0.00	0.00	0.00	v	070	0.00	0.00	0.00	
*See Salary & Match Detai	tab											10% of FY09	\$0.00		
				Actual	OVAG Gra	nt Expen	ditures								
OVAG PROJECT	FY 2009		A	May	01 01		1	11			415-01-				
	Approved Budget	Mar. 2009	Apr. 2009	May 2009	3rd Qtr Total	Qtrly %	Jun. 2009	Jul. 2009	Aug. 2009	Close out	4th Qtr Qtrly % Total	Year-t	o-Date Finar	ncial Informa	tion_
Budget Category			3rd Quarter				4	th Quarter	•			YTD Total	Total %	YTD Balance	Balance %
Salary *	0				0	0%					0 0%	0.00	0%	0.00	
Fringe	0				0	0%					0 %	0.00	0%	0.00	
Prof/Consultant Travel	0				0	0% 0%					0 0% 0 0%	0.00	0% 0%	0.00	
Equipment	0				0	0%					0 0%	0.00	0%	0.00	
Supplies	0				Ö	0%					0 0%	0.00	0%	0.00	
Other DOE	0				0	0%					0 0%	0.00	0%	0.00	
	0				0	0%					0 0%	0.00	0%	0.00	0%
Total	0		0.00	0.00	0	0%	0.00	0.00	0.00	0.00	0 0%	0.00	0%	0.00	0%
	0														
10% of FY09 =	\$0														
1070 011 100 =	<b>4</b> 0														
Preparer's Comment	٠.														
Enter any comments	regarding the	grant here													
Liner any comments	regarding the	grant note.													

## Other Victim Assistance Grant (OVAG) Salary and Match Detail Report FY 2009

Organiz	ation Name:				
New Gra	antee				
Contract No.			Date of Service:		
080000					
	Salary Detail				
	·	Position	Hours		
		Currently	Worked on		
Item #	Position Title on Budget (Contact OAG To Update)	Filled	Grant	Amount	
1				\$0.00	
2				\$0.00	
3				\$0.00	
4				\$0.00	
5				\$0.00	
6				\$0.00	
7				\$0.00	
8				\$0.00	
9				\$0.00	
10				\$0.00	
11				\$0.00	
12				\$0.00	
13				\$0.00	
14				\$0.00	
15				\$0.00	
		Total		\$0.00	

Item #	Match Detail	Amount
1	Match not required by OVAG Funds in FY 2009	\$0.00
2		\$0.00
3		\$0.00
4		\$0.00
5		\$0.00
6		\$0.00
7		\$0.00
8		\$0.00
9		\$0.00
10		\$0.00
11		\$0.00
12		\$0.00
13		\$0.00
14		\$0.00
15		\$0.00
	Total	\$0.00