The University of the State of New York THE STATE EDUCATION DEPARTMENT

PROPOSED BUDGET FOR A FEDERAL OR STATE PROJECT FS-10 (03/15)

= Required Field

į	Local Agenc	y Information	
Funding Source:	Elem. & Secndry School E	Emergency Relief F	und
Report Prepared By:	Thomas Finnerty		
Agency Name:	Cazenovia Central School District		
Mailing Address:	31 Emory Avenue	04	
		Street	
	Cazenovia	NY	13035
	City	State	Zip Code
Telephone # of Report Preparer: (315) 655-5	351	County: Madi	son
E-mail Address: tfinnerty@c	az.cnyric.org		
• •			
Project Funding Dates:	3/13/20		9/30/22
	Start		End

INSTRUCTIONS

- Submit the original FS-10 Budget and the required number of copies along with the
 completed application directly to the appropriate State Education Department office as
 indicated in the application instructions for the grant program for which you are applying. DO
 NOT submit this form to Grants Finance.
- The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- An approved copy of the FS-10 Budget will be returned to the contact person noted above.
 A window envelope will be used; please make sure that the contact information is accurate and confined to the address field without altering the formatting.
- For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at http://www.oms.nysed.gov/cafe/guidance/.

SALARIE	S FOR PROFESSIO	DNAL STAFF	
		Subtotal - Code 15	\$75,019
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
School Psychologist	0.20		\$12,001
School Psychologist	0.50	\$64,464	\$32,232
School Psychologist	0.50	\$61,572	\$30,786

	PURCHASED SERVIC	ES	and the state of t
		Subtotal - Code 40	\$50,000
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Contracted Mental Health Coordinator	Ms. Marla Reger	526.3 hours max @ \$95 per hour	\$50,000
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		,	

Description of Item Quantity Unit Cost Proposed Expenditure Providing principals and others school leaders with the resources necessary to address the people of their individual.	SUPP	LIES AND MAT	ERIALS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Providing principals and others school leaders with the resources necessary to address the needs of their individual schools. The plan is to utilize the GEER and ESSER funds for the purchase of three			Subtotal - Code 45	\$1,051
leaders with the resources necessary to address the needs of their individual schools. The plan is to utilize the GEER and ESSER funds for the purchase of three	Description of Item	Quantity	Unit Cost	Proposed Expenditure
	leaders with the resources necessary to address the needs of their individual schools. The plan is to utilize the GEER and ESSER funds for the purchase of three			\$1,051
			7	
				ACCURACION CONTRACTOR AND
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BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$75,019
Support Staff Salaries	16	
Purchased Services	40	\$50,000
Supplies and Materials	45	\$1,051
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	y
Minor Remodeling	30	
Equipment	20	
Gra	nd Total	\$126,070

Agency Code:	250201060000
Project #:	5890-21-1285
Contract #:	
Agency Name:	Cazenovia Central School District

CHIEF ADMINISTRATOR'S CERTIFICATION	ı

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal (or State) award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

4/7/21	at	
Date	Signature	

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY		
Funding Dates: _	From	То
Program Approval:	D:	ate:
Fiscal Year	<u>First Payment</u>	Line #
Voucher#	F	irst Payment

 Finance:
 Logged _____
 Approved _____
 MIR ______