

= Required Field

Local Agency Information			
Funding Source:	ARP - ESSER - 5% State Reserves Impact of Learning Loss		
Report Prepared By:	TABATHA BIGGANE		
Agency Name:	FONDA-FULTONVILLE CENTRAL SCHOOL DISTRICT		
Mailing Address:	112 OLD JOHNSTOWN ROAD		
	Street		
	FONDA	NY	12068
	City	State	Zip Code
Telephone # of Report Preparer:	518-853-3732 EXT.4233	County: MONTGOMERY	
E-mail Address:	tbiggane@ffcsd.org		
Project Funding Dates:	3/13/2020 Start	9/30/2024 End	

INSTRUCTIONS
<ul style="list-style-type: none"> ● 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/.

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$335,313
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
At Risk Coordinators	3.00	\$5,000	\$15,000
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At Risk Coordinators	3.00	\$4,311	\$12,933
Kindergarten Teacher <i>Coreen Vanas</i>	3.00	\$50,000	\$150,000
Math Support Specialist <i>Stead</i>	3.00	\$18,900	\$56,700
Academic Intervention Coordinator <i>Demise</i>	3.00	\$3,000	\$9,000
Science of Reading Training Hours for Teachers	2.00	\$840 Per teacher (33 teachers)	\$55,440
Phonics Training Hours for Teachers	1.00	\$240 per teacher (26 teachers)	\$6,240

Change the F code to F code

PURCHASED SERVICES			
Subtotal - Code 40			\$105,002
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Reading Intervention Specialist	Sharon Kline	487 students x \$71.87 multiplied by 3 years	\$105,002

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$449,848
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Benchmark Assessment program	Amplify	487 students (K-4) multiplied by \$19.37 over 3 years	\$28,299
Math and Reading Assesement Tools	Curriculum Associates	844 students (K - 8) multiplied by \$42.20 over 3 years	\$106,850
Science of Reading Program	Voyager Sopris Learning	487 students (K-4) multiplied by \$113.56 over 3 years	\$165,911
Literacy and Phonics Program	Really Great Reading Company	487 students (K-4) multiplied by \$101.84 over 3 years	\$148,788

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$72,657
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Educational support programs - Adirondack academy, Career and technology education	Hamilton Fulton Montgomery	Per student, per year cost = 3 students x \$8,073 average tuition cost over 3 year = \$24,219 per year non aidable portion	\$72,657

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$335,313
Support Staff Salaries	16	
Purchased Services	40	\$105,002
Supplies and Materials	45	\$449,848
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	\$72,657
Minor Remodeling	30	
Equipment	20	
Grand Total		\$962,820

Agency Code: **270601040000**

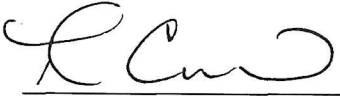
Project #: **5884-21-1430**

Contract #: _____

Agency Name: **FONDA-FULTONVILLE CSD**

CHIEF ADMINISTRATOR'S CERTIFICATION

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).

11/29/21 

Date Signature

Thomas Craccio
Superintendent of Schools
Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

Fiscal Year **First Payment** **Line #**

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Voucher #

First Payment