

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

Local Agency Information			
Funding Source:	Governor's Education Emergency Relief (GEER)		
Report Prepared By:	Tabatha Biggane		
Agency Name:	Fonda Fultonville Central School		
Mailing Address:	112 Old Johnstown Rd		
	Street		
	Fonda	NY	12068
	City	State	Zip Code
Telephone # of Report Preparer:	518-853-4415	County: Montgomery	
E-mail Address:	tbiggane@ffcsd.org		
Project Funding Dates:	3/13/2020 Start	9/30/2022 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			\$28,412
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Danielle Knabe	0.50	\$56,825	\$28,412

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$9,000
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
IT Support	60.00	\$5,000.00	\$3,000
Summer IT Support	60.00	\$5,000	\$3,000
Summer IT Support	60.00	\$5,000.00	\$3,000

PURCHASED SERVICES			
Subtotal - Code 40			\$4,156
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Unique Learning	News 2 you	\$680.00	\$680
BoardMaker	Tobii Dynavox	\$895.50	\$895
Spelling City	Vocabularyspellingcity.com	\$297.00	\$297
Wifi Hot Spot	Tmobile	\$1,349.00	\$1,349
Technical Services Training	Johnson Controls	\$325.00	\$325
CloudReady Education Site	Neverware	\$2,180.00	\$610

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$7,676
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Chromebook Protective Cases	30.00	\$15.00	\$450
Web Cameras	96.00	\$68.00	\$6,500
Conference Microphones	2.00	\$108.94	\$109
USB Adaptors	1.00	\$158.00	\$158
Display Cable	4.00	\$13.99	\$55
Mini Display Port	4.00	\$8.99	\$36
Charleton - Chrome Book	1.00	\$184.09	\$184
Wildwood - Chrome Book	1.00	\$184.09	\$184

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$28,412
Support Staff Salaries	16	\$9,000
Purchased Services	40	\$4,156
Supplies and Materials	45	\$7,676
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$49,244

Agency Code: 270601040000

Project #: 5895-21-XXXX

Contract #: 518-853-4415

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).

4, 7, 21 [Signature]
 Date Signature

Thomas Ciaccio, Superintendent
 Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

<u>Fiscal Year</u>	<u>First Payment</u>	<u>Line #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
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Voucher # _____ First Payment _____