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

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

= R	lequ	ired	Fie	ld

	Local Agency	Information		
Funding Source:	ARP State Reserves			
Report Prepared By:	Elizabeth Nee			
Agency Name: Harrisville Central School District				
Mailing Address:	14371 Pirate Lane	Street		
			40040	
	Harrisville City	NY State	13648 Zip Code	
lephone # of ort Preparer: 315-386-	4504 Ext. 15110	County: Lev	wis	
ail Address: <u>elizabeth</u>	.nee@silboces.org			
Project Funding Dates:	3/13/2020	•	9/30/2024	
	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/.

***			Subtotal - Code 15	\$57,000
Specific Position Title	Full-Time Equivalent		Annualized Rate of Pay	Project Salary
Summer Learning and Enrichment				
Summer School Stipends 21-22				
Middle School Teachers		4	45 hours x ~\$55.55 per hour	\$10,000
Elementary School Teachers		2	90 hours x \$50 per hour	\$9,000
Summer School Stipends 22-23				
Middle School Teachers		4	45 hours x ~\$55.55 per hour	\$10,000
Elementary School Teachers		2	90 hours x \$50 per hour	\$9,000
Summer School Stipends 23-24				
Middle School Teachers		4	45 hours x ~\$55.55 per hour	\$10,000
Elementary School Teachers		2	90 hours x \$50 per hour	\$9,000

		Subtotal - Code 40	\$43,002
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Summer Learning and Enrichment			
Overnight Cloverbud Camp (Ages 6-8)	Camp Overlook	3 years x 15 students x \$195	\$8,775
Overnght Camp Overlook (Ages 8- 18)	Camp Overlook	3 years x 25 students x \$456.36	\$34,227

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$57,000
Support Staff Salaries	16	
Purchased Services	40	\$43,002
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Gra	nd Total	\$100,002

Agency Code:	230301040000
Project #:	588 <u>2-21-1220</u>
Contract #:	

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).

1
Alt Frit
Signature

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY			
Funding Dates:	From	То	
Program Approval:		Date:	
<u>Fiscal Year</u>	First Payment	<u>Line #</u>	
ALL STATES			
Voucher#		First Payment	

Finance:	Logged	Approved	MIR

12:51 PM Page 4 12/28/2021