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 Agenc	y Information		
Funding Source:	ARP-ESSER State Le	vel - After School		
Report Prepared By:	Naomi Ryfun			
Agency Name:	Altmar-Parish-Williamstown CSD			
Mailing Address:	: 639 County Route 22, PO Box 97 Street			
	Parish	NY	13131	
[City	State	Zip Code	
Telephone # of Report Preparer: 315-625-	5274	County: Osw	rego	
E-mail Address: nryfun@a	apw.cnyric.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/.

SALARIES	FOR PROFESSION	ONAL STAFF	
		Subtotal - Code 15	\$279,970
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Link Coordinator Stipend	2.00	\$5,550	\$11,100
Where Everyone Belongs (WEB) Coordinator Stipend	2.00	\$2,900	\$5,800
Elementary Tutoring	1.00	30 staff @ 111 hrs @ \$39.50/hr	\$131,535
JRSR Tutoring	1.00	30 staff @ 111 hrs @ \$39.50/hr	\$131,535

	Subtotal - Code 80	\$48,847
Benefit		Proposed Expenditure
Social Security		\$21,418
	New York State Teachers	\$27,429
Retirement	New York State Employees	
	Other - Pension	
Health Insurance	•	
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		
	9	4

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$279,970
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$48,847
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grar	nd Total	\$328,817

Agency Code:	460102040000
Project #:	5883-21-2330
Contract #:	
Agency Name:	Altmar-Parish-Williamstown 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).

2113121	Sum K. Phw		
Date	Signature		

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY			
Funding Dates:	From	То	
Program Approval:	Dat	e:	
<u>Fiscal Year</u>	First Payment	<u>Line #</u>	
·			
		-	
Voucher#	Fi	rst Payment	