

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**

<b>Funding Source:</b>	ARP-ESSER		
<b>Report Prepared By:</b>	Jennifer R Dunn		
<b>Agency Name:</b>	Town of Webb UFSD		
<b>Mailing Address:</b>	PO Box 38, 3002 State Route 28		
	Street		
	Old Forge	NY	13420
	City	State	Zip Code
<b>Telephone # of Report Preparer:</b>	3153693222	<b>County:</b>	Herkimer
<b>E-mail Address:</b>	<a href="mailto:jdunn@towschool.org">jdunn@towschool.org</a>		
<b>Project Funding Dates:</b>	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 PROFESSIONAL STAFF			
Subtotal - Code 15			\$12,000
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
After School Program Extended Learning Year 1	0.0491	\$61,085	\$3,000
After School Program Extended Learning Year 1	0.0478	\$62,735	\$3,000
After School Program Extended Learning Year 1	0.0465	\$64,485	\$3,000
After School Program Extended Learning Year 1	0.0452	\$66,235	\$3,000

PURCHASED SERVICES			
Subtotal - Code 40			\$42,384
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Student Mental Health Session Year 1	Point Break	Per Session	\$4,000
Student Mental Health Session Year 2	Point Break	Per Session	\$4,000
Student Mental Health Session Year 3	Point Break	Per Session	\$4,000
Student Mental Health Session Year 4	Point Break	Per Session	\$4,000
Professional Development Speaker/Workshop Year 1	Schumacher	Per Session	\$3,000
Professional Development Speaker/Workshop Year 2	Patrick Halligan	Per Session	\$3,000
Professional Development Speaker/Workshop Year 3	Mike Veny	Per Session	\$3,000
Professional Development Speaker/Workshop Year 4	Assoc. for Mental Health & Wellness	Per Session	\$3,000
Alcohol/Drug Prevention Year 1	Catholic Charities	Per School Year	\$3,596
Alcohol/Drug Prevention Year 2	Catholic Charities	Per School Year	\$3,596
Alcohol/Drug Prevention Year 3	Catholic Charities	Per School Year	\$3,596
Alcohol/Drug Prevention Year 3	Catholic Charities	Per School Year	\$3,596

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$20,000
Description of Item	Quantity	Unit Cost	Proposed Expenditure
RTI Supports-AIS Interventions Year 1	1.00	\$5,000.00	\$5,000
RTI Supports-AIS Interventions Year 2	1.00	\$5,000.00	\$5,000
RTI Supports-AIS Interventions Year 3	1.00	\$5,000.00	\$5,000
RTI Supports-AIS Interventions Year 4	1.00	\$5,000.00	\$5,000

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$16,000
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Educere Service-Credit Recovery/Extended Learning Year 1	PNW BOCCES	10 Students @ \$400/year (10 courses each)	\$4,000
Educere Service-Credit Recovery/Extended Learning Year 2	PNW BOCCES	10 Students @ \$400/year (10 courses each)	\$4,000
Educere Service-Credit Recovery/Extended Learning Year 3	PNW BOCCES	10 Students @ \$400/year (10 courses each)	\$4,000
Educere Service-Credit Recovery/Extended Learning Year 4	PNW BOCCES	10 Students @ \$400/year (10 courses each)	\$4,000

EQUIPMENT			
Subtotal - Code 20			\$90,639
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Outdoor play equipment Game Time -replacement piece	1.00	\$90,639.00	\$90,639

**BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$12,000
Support Staff Salaries	16	
Purchased Services	40	\$42,384
Supplies and Materials	45	\$20,000
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	\$16,000
Minor Remodeling	30	
Equipment	20	\$90,639
Grand Total		\$181,023

Agency Code: **211901020000**Project #: **5880-21-1145**Contract #: Agency Name: **Town of Webb UFSD****FOR DEPARTMENT USE ONLY**Funding Dates: \_\_\_\_\_  
From To

Program Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**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).*

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date Signature

**Rex A Germer, Superintendent****Name and Title of Chief Administrative Officer****Fiscal Year****First Payment****Line #**

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Voucher #

First Payment

**Finance:** Logged \_\_\_\_\_

Approved \_\_\_\_\_

MIR \_\_\_\_\_