# 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
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Local Agency Information							
Fundin	g Source:	ARP-ESSER					
Report Pre	pared By:	Alyssa Hasbrouck	Alyssa Hasbrouck				
Ager	ncy Name:	Tuxedo Union Free	Tuxedo Union Free School District				
Mailing	Address:	1 Tornado Drive	1 Tornado Drive Street				
	,	Tuxedo City	NY State	, a,	10987 Zip Code	_	
		Oity	- State		Zip Code		
Telephone # of Report Preparer:		2296 ext 2026	County:	Orange			
E-mail Address:	Address: ahasbrouck@tuxedoufsd.org						
Project Funding Dates: 3/1/2020 Start			9.	/30/2024 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			
	\$105,817		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Summer Program Teacher	1.00	\$9,900	\$9,900
Summer Program Teacher	1.00	\$7,400	\$7,400
Summer Program Teacher	1.00	\$8,650	\$8,650
High School Math Teacher	1.00	\$71,531	\$71,531
Portion of High School SpEd Teacher	1.00	\$8,336	\$8,336

	\$32,687		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
High School Teacher Aide	1.00	\$32,687.00	\$32,687
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PURCHASED SERVICES				
Subtotal - Code 40 \$25,88				
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure	
Summer Program Transportation inclusive of Field Trips	Mat Bus Corp	\$22,250.00	\$22,250	
Botanical Gardens Summer Program Professional Development and Field Trip	Botanical Gardens NY	\$280.00	\$280	
Summer Program Field Trip to Bear Mountain State Park	Bear Mountain State Park	\$360.00	\$360	
Summer Program End of Program Celebration	Pizza Pit	\$225.00	\$225	
Summer Program Art Project	Home Depot	\$371.00	\$371	
Summer Program Related Expense	Fed Ex	\$63.00	\$63	
Summer Program Food for Breakfast and Lunch	Ginsberg	\$1,313.00	\$1,313	
Summer Program Food for Breakfast and Lunch	Sinon Farms	\$362.00	\$362	
Summer Program Food for Breakfast and Lunch	Dagele Produce	\$95.00	\$95	
Summer Program Food for Breakfast and Lunch	Sysco Albany	\$566.00	\$566	

SUPPLIES AND MATERIALS				
Subtotal - Code 45 \$8,5				
Description of Item	Quantity	Unit Cost	Proposed Expenditure	
Summer Program Materials and Supplies Needed to suppport students	1.00	\$8,507.00	\$8,507	

#### **BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$105,817
Support Staff Salaries	16	\$32,687
Purchased Services	40	\$25,885
Supplies and Materials	45	\$8,507
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Gran	d Total	\$172,896

Agency Code:	441903020000
Project #:	5880-21-2285
Contract #:	
Agency Name:	Tuxedo UFSD

## 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 1	_ XWHD
Date	Signature

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY			
Funding Dates:	From	То	
Program Approval:	Dat	e:	
Fiscal Year	<u>First Payment</u>	Line #	
		– <u>–  </u>	
Voucher#	Firs	t Payment	

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SALAR	RIES FOR SUPPOR	RT STAFF	
	\$32,687		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
High School Teacher Aide	1.00	\$32,687.00	\$32,687