

= Required Field

Local Agency Information		
Funding Source:	ARP - ESSER Part 2	
Report Prepared By:	Cybil Howard	
Agency Name:	Taconic Hills Central School District	
Mailing Address:	73 County Route 11A	
	Street	
	Craryville	NY 12521
	City	State Zip Code
Telephone # of Report Preparer:	518-325-2811	County: Columbia
E-mail Address:	choward@taconichills.k12.ny.us	
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 PROFESSIONAL STAFF			
Subtotal - Code 15			\$1,729,407
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
LETRS PD stipends: 109 hours/person add'l work (Activity 16b)	up to 30 teachers	\$40/hour stipends	\$130,800
Elementary Teacher - 1st Grade S. Caldwell (Year 1) (Activity 7)	1.00	\$49,723	\$49,723
Elementary Teacher - 1st Grade S. Caldwell (Year 2) (Activity 7)	1.00	\$52,423	\$52,423
Elementary Teacher - 1st Grade S. Caldwell (Year 3) (Activity 7)	1.00	\$52,423	\$52,423
Stipends for Covid-19 Vaccine (Year 1) (Activity 19)	up to 155 staff	\$1,500 each	\$232,500
Stipends for Staff for additional workload duties due to pandemic (Years 2 & 3) (Activity 20)	2 years - up to 155 staff	up to \$1,500 each	\$465,000
Full-time certified teacher substitutes (Years 1) (Activity 20)	2.00	\$30,000 (prorated for half year)	\$60,000
Full-time certified teacher substitutes (Years 2-3) (Activity 20)	4.00	\$60,000	\$240,000
Elementary School Teacher (Years 2 & 3) (Activity 7)	2.00	\$52,423	\$104,846
Interventionists (Math or ELA) (Years 2 & 3) (Activity 16)	4.00	\$52,423	\$209,692
Summer Professional Development (Years 1-3) (Activity 16)	3 years - up to 1,100 hours	\$40/hour stipends	\$132,000

SALARIES FOR SUPPORT STAFF			
			Subtotal - Code 16
			\$652,500
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Stipends for Covid-19 Vaccine (Year 1) (Activity 19)	up to 145 staff	\$1,500 each	\$217,500
Stipends for Staff for additional workload duties due to pandemic (Years 2 & 3) (Activity 20)	2 years - up to 145 staff	\$1,500 each	\$435,000

PURCHASED SERVICES			
Subtotal - Code 40			\$61,852
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
LETRS Professional Development (Year 1) (Activity 16)	Voyager Sopris Learning, Inc.	Quote #00110848 4 days of virtual training @ \$3,000/day Participant Materials 30 @ \$349 ea. S/H \$1,047	\$23,517
Retrofit School Bus (Year 1) (Activity 15)	VanAlphen Brothers	Estimate provided by other school district	\$38,335

LETRS®

Voyager Sopris Learning, Inc.
Attn: Order Entry Department
17855 Dallas Pkwy, Suite 400
Dallas, Texas 75287
Phone: (800) 547-6747
Fax: (888) 819-7767
Email: Lexia_Orders@lexialearning.com

Quote Number 00110848
Created Date 9/9/2021
Expiration Date 10/31/2021

Quote To Neil Howard Jr
Phone (518)325-2800
Email mlayman@taconichills.k12.ny.us

Bill To Name Taconic Hills Central Sch Dist
Bill To 73 County Route 11A
Craryville, NY 12521
US

Ship To Name Taconic Hills Central Sch Dist
Ship To 73 County Route 11A
Craryville, NY 12521
US

Sales Representative

Kristy Subik
(518) 774-8111
kristy.subik@lexialearning.com

Description	Product Code	Quantity	Sales Price	Total Price
LETRS Virtual Training - 1 day	370896	4.00	\$3,000.00	\$12,000.00
LETRS Participant Materials Bundle Units 1-4 Print + 1-Year license	354061	30.00	\$349.00	\$10,470.00

Total Price \$22,470.00
S&H \$1,047.00
Tax \$0.00
Total Due \$23,517.00

Comments

*Prices included herein are exclusive of all applicable taxes, including sales tax, VAT or other duties or levies imposed by any federal, state or local authority, which are the responsibility of customer. Any taxes shown are estimates for informational purposes only. Customer will provide documentation in support of tax-exempt status upon request. Pricing is valid for 60 days unless otherwise specified on this quote. Unless otherwise provided herein, Voyager Sopris will invoice the total fees set forth above upon receipt of customer's PO/acceptance. Payment is due net 30 days of invoice.

All academic school year licenses begin August 1 and end July 31 annually and all Summer subscription licenses begin May 1 and end July 31, regardless of purchase date.

- Additional Support Services purchased separately from subscription licenses/packages (e.g., webinars or additional onsite and/or virtual training hours) must be used within 12 months from the received date of the PO acceptance of the applicable quote.
- A customer-designated account administrator contact name and email address are required for all subscriptions and service orders.

Order Term

This order quote and the associated confirming purchase order or other customer confirmation of this quote serve as an agreement for this order which becomes effective upon its acceptance by both parties. Unless otherwise agreed by Voyager Sopris and customer in writing, the licenses, products, and/or services purchased pursuant to this quote will begin on or about the start date and continue in effect for the period

Employee Benefits		
Subtotal - Code 80		\$499,833
Benefit		Proposed Expenditure
Social Security		\$182,216
Retirement	New York State Teachers (9.80%)	\$123,912
	New York State Employees (16.20%)	\$105,705
	Other - Pension	
Health Insurance		\$88,000
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$202,500
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Job-embedded professional development through BOCES (Years 1-3) (Activity 16)	Questar III	Quotes	\$202,500

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$1,729,407
Support Staff Salaries	16	\$652,500
Purchased Services	40	\$61,852
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$499,833
Indirect Cost	90	
BOCES Services	49	\$202,500
Minor Remodeling	30	
Equipment	20	
Grand Total		\$3,146,092

Agency Code: **100501040000**

Project #: **5880-21-0525**

Contract #: _____

Agency Name: **Taconic Hills Central School District**

FOR DEPARTMENT USE ONLY


Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

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

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).

9/1/21 

Date Signature

Dr. Neil L. Howard, Jr.
Superintendent of Schools
 Name and Title of Chief Administrative Officer

Finance: Logged _____

Approved _____

MIR _____