The University of the State of New York THE STATE EDUCATION DEPARTMENT		PROPOSED AMENDMENT FOR A FEDERAL OR STATE PROJECT FS-10-A (03/15) = Required Field	Received Received Countability
Agency Name: Mailing Address:	Mount Vernon City School District 165 North Columbus Avenue Mount Vernon, New York 10553	Westchester County BUSINES	15 '23 APR 11 PM 3:18
Agency Code: [Project Number: [Contract #: [660900010000 5880-21-3740 F220	Amendment #: 001	
Contact Person: [E-mail Address: [Dr. K. Veronica Smith ksmith@mtvernoncsd.org	Tel: 914-358-2323	

INSTRUCTIONS

• Submit the original and two copies directly to the same State Education Department office where budget was mailed. DO NOT submit this form to Grants Finance.

- This form need only be submitted for budget changes that require prior approval as follows:
 - Personnel positions, number and type
 - · Equipment items having a unit value of \$5,000 or more, number and type
 - Minor remodeling
 - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent
 - or \$1,000, whichever is greater
 - Any increase in the total budget amount.
- Amendment # at top of this page must be completed.
- If extra room is needed for explanations, expand the rows using the row breaks on the left.
- Do not use the FS-10-A for requesting a project extension.

CHIEF ADMINISTRATOR'S CERTIFICATION

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, & accurate, & the expenditures, disbursements, & cash receipts are for the purposes objectives set forth in the terms & 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: 2 dT d3 Signature: 4	inductor				
FOR DEPARTMENT USE ONLY					
Program Approval:	Date: 07/03/23				
Finance: 4/4/23 ^{CL} Logged Approved					



1 of 3

3/24/2023 3:07 PM

GRANTS FINANCE

RECEIVED

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
15 - Professional Salarles	Decrease amount for year 1 summer program salaries and transfer to Purchased Services		\$140,000
16 - Support Staff Salaries			
40 Purchased Services	Renovation of three existing classrooms at Benjamin Turner School to a Student Based Health Center with KG+D Architects providing plans and designs for the health center @ \$80/hr x 625 hours = \$50,000; Renu Contracting & Restoration to provide renovation of three existing classrooms for the health center @ \$225/hr x 2,000 = \$450,000; Crown A/C Heat & Power Corp to provide HVAC services for health center @ \$150/hr x 1,000 hours = \$150,000; Delta Electric to provide electrical services for health center @ \$150/hr x 1,000 hours = \$150,000; Joe Lombardo Plumbing to provide plumbing services for health center @ \$150/hr x 1,000 hours = \$150,000; Decrease year 1 transportation for special education students by \$148,578; Decrease amount for Panorama Education (\$119,922); Decrease amount for Educate, LLC by \$133,500; Decrease amount for Mount Vernon Neighborhood Health Center for COVID testing (\$136,000); Decrease amount for Westchester County Department of Health for COVID testing (\$136,000); Decrease amount for Mount Sinai Hospital for COVID testing (\$136,000)	\$140,000	
45 - Supplies & Materials			
46 - Travel Expenses			
80 - Employee Benefits			
90 - Indirect Cost			
49 - Boces Services			

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30 - Minor Remodeling	-						
20 - Equipment			N 8				
	Total Increase or Decrease:	(+) \$ 🎮	yuau 950,000	(-) \$	149000	950;000	4/4/23 Stu
	Net Increase or Decrease:	\$				0	
ENTER BUDGET >	Previous Budget Total:	\$ 20,967,899			,967,899		
	Proposed Amended Total:	\$			20,9	67,899	

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