Received

| The University of THE STATE EDU | DEC 2 4 202 of the State of New Yorkice of Accountal | PROPOSED AMENDMENT FOR A FEDERAL OR STATE PROJECT | | |
|--|---|--|--|--|
| | | = Required Field | | |
| Agency Name: Mailing Address: | | Chautauqua County | | |
| Agency Code: | 0602010600000 | | | |
| Project Number: Contract #: | 5891-21-0315 | Amendment #: 001 | | |
| Contact Person: E-mail Address: | Annette S. Rhebergen arhebergen@swcsk12.org | Tel: 716-484-1136 | | |
| DO NOT submit this form This form need only be Personnel position Equipment items h Minor remodeling Any increase in a be | S d two copies directly to the same State Educate to Grants Finance. e submitted for budget changes that require pas, number and type having a unit value of \$5,000 or more, number budget subtotal (professional salaries, purcha | er and type ased 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 | | | | |
| expenditures, disburseme Federal (or State) award. fact may subject me to cr | ents, & cash receipts are for the purposes& of an aware that any false, fictitious, or fraud iminal, civil, or administrative penaltiesfor fra ion 1001 and Title 31, Sections 3729-3730 a | that the report is true, complete, & accurate, & the objectives set forth in the terms & conditions of the ulent information, or the omission of any material and, false statements, false claims, or otherwise. | | |
| Program Approval:_ Finance: | Catherine Clarge 2/1/22 2/2/21 | Date: 1/31/33 | | |

Logged Approved

| SUBTOTAL | EXPLANATION (Provide same detail as required in FS-10 Budget) | | SUBTOTAL INCREASE | SUBTOTAL DECREASE |
|-----------------------------|--|--------------|----------------------|----------------------|
| 15 - Professional Salaries | | | | |
| 16 - Support Staff Salaries | | | | · |
| 40 - Purchased Services | DEI Training and Consultation for staff Levelle Brown (culturally sensitive train | with ing) | \$40,000 | |
| 45 - Supplies & Materials | | | | |
| 46 - Travel Expenses | | | | |
| 80 - Employee Benefits | | | : | |
| 90 - Indirect Cost | | | | |
| 49 - Boces Services | | | | |
| 30 - Minor Remodeling | | | | \$40,000 |
| 20 - Equipment | | | | |
| | Total Increase or Decrease: | (+)\$ | 40,000 | (-) \$ 40,000 |
| | Net Increase or Decrease: | \$ | | 0 |
| ENTER BUDGET > | Previous Budget Total: | \$ | | 1,134,249 |

Proposed Amended Total: \$ 1,134,249

3 of 3

