

The University of the State of New York  
**THE STATE EDUCATION DEPARTMENT**  
 Grants Finance, Rm. 510W EB  
 Albany, New York 12234

**FINAL EXPENDITURE REPORT FOR A  
 FEDERAL OR STATE PROJECT  
 FS-10-F Long Form (03/15)**

= Required Field

Local Agency Information		
Funding Source:	CARES Act - GEER	
Report Prepared By:	Annette S. Rhebergen	
Agency Name:	Southwestern Central School District	
Mailing Address:	600 Hunt Rd. WE	
	Street	
	Jamestown	NY 14701
	City	State Zip Code
Telephone # of Report Preparer:	716-484-1136	County: Chautauqua
E-mail Address:	arhebergen@swcsc12.org	

**INSTRUCTIONS**

- For State grants, final expenditure reports are generally due within 30 days after the grant's end date. Reports for federal projects are generally due within 90 days after the grant's end date. See the Grant Award Notice to verify the due date. However, the Department program office may impose an earlier due date.
- Agencies should use only the FS-10-F Long Form to report actual project expenditures.
- Agencies must maintain complete and accurate records and may be requested to provide additional detail to support reported expenditures.
- All encumbrances must have taken place within the grant's approved funding dates, which can be found on the FS-10 or FS-20 budget form and on the Grant Award Notice.
- The Chief Administrator's Certification on the Final Summary page must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- Submit one report with original signature and one copy directly to Grants Finance, New York State Education Department, Room 510W EB, Albany, NY 12234.
- For special legislative projects, submit one report with original signature and two copies, along with a final program narrative report.
- For additional information, please refer to Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.



SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$43,778
Name	Position Title	Beginning and End Dates of Work	Salary Paid
Allyssa Jones	Elementary Teacher	09/01/20-06/30/21	\$43,778

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$269
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
03/31/22	Amazon	225723	\$269

**Employee Benefits**

Subtotal - Code 80			\$4,840
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement	\$43,778.00	0.0953	\$4,172
Employee Retirement			
Other Retirement			
Social Security	\$43,778.00	0.08	\$668
Worker's Compensation			
Unemployment Insurance			
Health Insurance			
<b>Other(Identify)</b>			

**FINAL EXPENDITURE SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$43,778
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	\$269
Travel Expenses	46	
Employee Benefits	80	\$4,840
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
<b>Grand Total</b>		<b>\$48,887</b>

**LOCAL AGENCY INFORMATION**

Agency Code: **060201060000**

Project #: **5895-21-0315**

Contract #: \_\_\_\_\_

Agency Name: **Southwestern Central School District**

Funding Dates: **3/13/2020** TO **9/30/2022**

Approved Budget Total: \$ **48,918**

**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).

*6-2-2022* *Maurice Donahue*

Date                          Signature

*Maurice Donahue, Superintendent*

**Name and Title of Chief Administrative Officer**

**FOR DEPARTMENT USE ONLY**

<u>Fiscal Year</u>	<u>Amt Expended</u>	<u>Final Payment</u>	<u>Line #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Voucher # _____		Final Payment _____	

Finance: Logged \_\_\_\_\_ Approved \_\_\_\_\_ MIR \_\_\_\_\_