INSTRUCTIONS

- This budget tool contains 12 worksheets 1 for agency information, 1 for each of the 10 budget categories, and 1 for the budget summary. To go to the other worksheets, click on the tabs below.
- Complete all of the green-shaded fields on the Agency Information page and the Budget Summary pages. It is very important that the agency name, agency code and the project number, if available, are accurate.
- To enter budget information for a particular category, select that tab and enter the
 required data. Dollar amounts in the Project Salary/Proposed Expenditure columns of
 the worksheets will be automatically subtotaled on the worksheets, and the subtotals
 will be carried over to the Budget Summary worksheet. Dollar amounts will be rounded
 automatically to the closest whole number. The subtotals and the Budget Summary will
 automatically be recalculated if the dollar amounts are changed or new information is
 added.
- Large amounts of text in the description boxes may not be completely visible. To
 accommodate extra text, expand the row height by dragging the line below the row
 number until the row is at the appropriate height.
- On the indirect cost category worksheet, the Maximum Direct Cost Base listed below
 the chart is the total of codes 15, 16, 40, 45, 46 and 80. To compute the amount in row
 A. Modified Direct Cost Base, subtract the portion of each subcontract exceeding
 \$25,000 and any flow through funds from the Maximum Direct Cost Base. Enter the
 agency's indirect cost rate as a whole number plus one decimal (2.1%, for example).
- To save the completed budget, select File / Save As, rename the file, select the appropriate location on your computer, and click OK.
- To preview a completed budget, select File / Print and then click the Preview button.
- To print a completed budget, select File / Print and then click OK. Only completed budget pages will print.
- The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- Submit a budget with original signature, copies of the signed budget as specified in the
 grant application instructions, and grant application materials to the State Education
 Department office listed in the grant application instructions. Do not submit budgets or
 grant applications to Grants Finance.
- For additional information about preparing budgets, please refer to Fiscal Guidelines for Federal and State Grants at http://www.oms.nysed.gov/cafe/guidance/.

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

Local Agency Information				
Funding Source:	ARP-ESSER 1% State-Level Reserve - Summer			
Report Prepared By:	Kimberly Powers	Kimberly Powers		
Agency Name:	Whitesboro Central	School Dist	trict	
Mailing Address:	: 65 Oriskany Blvd Suite 1			
	Whitesboro NY 13492		13492 Zip Code	
Telephone # of Report Preparer: 315-266	,	County:	Oneida	
E-mail Address: kapowe	s@wboro.org			
Project Funding Dates:	3/13/2020 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 FOR PROFESSIONAL STAFF				
		Subtotal - Code 15	\$55,440	
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary	
Elementary Teachers	3 Teachers @ 80 hours per year for 3 years	\$33/hour	\$23,760	
Guidance Counselor	1 Counselors @ 80 hours per year for 3 years	\$33/hour	\$7,920	
Secondary Teachers	3 Teachers @ 80 hours per year for 3 years	\$33/hour	\$23,760	

SALARIES FOR SUPPORT STAFF			
		Subtotal - Code 16	\$40,440
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Teacher Assistants	5 TA's @ 80 hours per year for 3 years	\$15/hour	\$18,000
Bus Drivers	3 Drivers @ 40 hours per year for 3 years	\$25/hour	\$9,000
Nurses	2 Nurses @ 80 hours for 3 years	\$28/hour	\$13,440

PURCHASED SERVICES			
		Subtotal - Code 40	
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure

SUPPLIES AND MATERIALS				
		Subtotal - Code 45	\$10,001	
Description of Item	Quantity	Unit Cost	Proposed Expenditure	
Snacks for Summer Program	100.00	\$37.97	\$3,797	
Art & Music Supplies	100.00	\$62.04	\$6,204	

TRAVEL EXPENSES			
		Subtotal - Code 46	
Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures

	Employee Benefits	
	Subtotal - Code 8	30
	Benefit	Proposed Expenditure
Social Security		
	New York State Teachers	
Retirement	New York State Employees	
	Other - Pension	
Health Insurance		
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		

	INDIRECT COST	
	Modified Direct Cost Base Sum of all preceding subtotals(codes 15, 16, 40, 45, 46, and 80 and excludes the portion of each subcontract exceeding \$25,000 and any flow through funds) **Manual Entry	
B.	Approved Restricted Indirect Cost Rate	
C.	Subtotal - Code 90	

For your information, maximum direct cost base =

\$105,881.00

To calculate Modified Direct Cost Base, reduce maximum direct cost base by the portion of each subcontract exceeding \$25,000 and any flow through funds.

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure

MINOR REMODELING			
	Subtotal - Code 30		
Description of Work to be Performed Calculation of Cost Proposed Expe			

EQUIPMENT			
		Subtotal - Code 20	
Description of Item	Quantity	Unit Cost	Proposed Expenditure

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$55,440
Support Staff Salaries	16	\$40,440
Purchased Services	40	
Supplies and Materials	45	\$10,001
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$105,881

Agency Code:	412902060000	
Project #:	5882-21-2080	
Contract #:		
Agency Name:	Whitesboro Central School District	

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).

31, Sections 3729-3730 and 3801-3812).				
Date	Signature			
Dr. Brian K. Bellair, Superintendent				
Name and Title of Chief Administrative Officer				

FOR DEPARTMENT USE ONLY				
Funding Dates:	From	То		
Program Approval:	Date:			
Fiscal Year	First Payment	Line #		
Voucher #	First	Payment		

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 Finance:
 Logged _____
 MIR ______