

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)

**D** = Required Field

Local Agency Information		
Funding Source:	CARES' ACT "GEER"	
Report Prepared By:	PATSY PDILEO	
Agency Name:	MOUNT VERNON CITY SCHOOLS DISTRICT	
Mailing Address:	55 NORTH COLUMBUS AVENUE	
	Street	
	MOUNT. VERNON	NY 10553
	City	State Zip Code
Telephone# of Report Preparer:	(914) 665-5214	County: WESTCHESTER
E-mail Address:	pdileo@mtvernoncsd.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 use 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			\$78,581
Name	Position Title	Beginning and End Dates of Work	Salary Paid
DUANE CHRISTIAN	ADMINISTRATOR	6/22/20 - 8/28/20	\$13,999
TROY NEWBEY	ADMINISTRATOR	7/2/20 - 7/27/20	\$595
KRISTEN PASSARELLO	ADMINISTRATOR	6/29/20 - 8/28/20	\$11,324
SHANNON BRACEY	TEACHER	7/1/20 - 8/28/20	\$9,438
ROBIN CARPUS	TEACHER	6/30/20 - 8/26/20	\$2,662
DORIS DAPAAH	TEACHER	7/1/20 - 8/28/20	\$8,954
DIANA-MARIE GARDNER	TEACHER	7/1/20 - 8/28/20	\$9,438
JOSEFINA MENDOZA	TEACHER	7/30/20 - 8/1/20	\$396
HELEN MURRAY	TEACHER	7/6/20 - 8/28/20	\$9,449
JASON PRITCHETT	TEACHER	7/1/20 - 8/28/20	\$7,260
NATASHA HENRY	TEACHING ASSISTANT	8/3/20 - 8/28/20	\$3,648
ANNETTE LUGO	TEACHING ASSISTANT	8/17/20 - 8/28/20	\$1,418

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$66,814
Name	Position Title	Beginning and End Dates of Work	Salary Paid
DENISE COATES	SECURITY OFFICER	7/1/20 - 8/28/20	\$6,579
KAREN COUNCIL	SECURITY OFFICER	7/2/20 - 8/28/20	\$6,760
GWENDOLYN GRAHAM	SECURITY OFFICER	7/6/20 - 8/20/20	\$3,547
SHARON LEWIS	SECURITY OFFICER	7/1/20 - 8/28/20	\$6,983
JAMES MELVIN	SECURITY OFFICER	7/1/20 - 8/14/20	\$3,283
SHONDU YOUNG	SECURITY OFFICER	7/1/20 - 8/28/20	\$6,899
LORI BLAKE	NURSE	8/7/20 - 8/28/20	\$566
EDITH BLYDEN-JETER	NURSE	7/8/20 - 8/19/20	\$3,270
JULIANNA BRITO	NURSE	7/27/20 - 7/31/20	\$1,728
LUNETTE BRYAN	NURSE	7/30/20 - 8/20/20	\$2,611
ESTHER BURNEY-CHINN	NURSE	7/27/20 - 8/28/20	\$2,611
PATRONELLA DAWSON	NURSE	7/16/20 - 8/13/20	\$2,549
HELEN GUY	NURSE	8/10/20 - 8/27/20	\$2,172
LISA JOSEPH	NURSE	7/13/20 - 8/21/20	\$6,359
MARGALIDA MEDINA	NURSE	8/14/20 - 8/31/20	\$1,920
LAURA PEMBERTON	NURSE	8/24/20 - 8/27/20	\$1,086
LAWANDA ROBINSON	NURSE	7/2/20 - 8/21/20	\$7,891

PURCHASED SERVICES			
Subtotal - Code 40			\$197,898
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended
9/28/22	NICOLE UGEL	301447	\$4,100
9/28/22	CATAPULT LEARNING	807856	\$15,730
4/19/22	SENCO METALS	86279	\$129,413
9/13/22	SENCO METALS	807157	\$48,655

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$74,392
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
8/14/20	MATERIAL MANAGEMENT	296612	\$45,600
10/26/20	PRO-VISION SOLUTIONS, LLC	298032	\$20,133
7/23/20	STERLING SANITARY SUPPLY CORP.	80250	\$8,055
9/15/22	DIDAX EDUC RESOURCES	301445	\$604

TRAVEL EXPENSES					
				Subtotal - Code 46	
Dates of Travel	Name of Traveler	Destination and Purpose	Check or Journal Entry #	Amount Expended	

**Employee Benefits**

			<b>Subtotal - Code 80</b>
<b>Benefit</b>	<b>Salaries (from codes 15 and 16)</b>	<b>Rate</b>	<b>Amount Expended</b>
<b>Teacher Retirement</b>	<b>\$78,581.00</b>	<b>9.53%</b>	<b>\$7,489</b>
<b>Employee Retirement</b>	<b>\$66,814.00</b>	<b>15.0%</b>	<b>\$10,022</b>
<b>Other Retirement</b>			
<b>Social Security</b>	<b>\$145,395.00</b>	<b>7.65%</b>	<b>\$11,123</b>
<b>Worker's Compensation</b>	<b>\$145,395.00</b>	<b>0.79%</b>	<b>\$1,149</b>
<b>Unemployment Insurance</b>			
<b>Health Insurance</b>			
<b>Other(Identify)</b>			
<b>Dental Insurance</b>			

INDIRECT COST		
A.	Modified Direct Cost Base -- Sum of all preceding subtotals (codes 15, 16, 40, 45, 46, and 80, excluding the portion of each subcontract exceeding \$25,000 and any flow through funds)	
B.	Approved Restricted Indirect Cost Rate(%) (enter X.X)	2.7%
C.	Subtotal - Code 90	

For your information, maximum direct cost base = \$447,468.00

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
Encumbrance Date	Name of BOCES	Check or Journal Entry #	Amount Expended

MINOR REMODELING			
			Subtotal - Code 30
Purchase Order Date Or Dates of Service	Provider of Service	Check or Journal Entry #	Amount Expended

EQUIPMENT			
			Subtotal - Code 20
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended

### FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$78,581
Support Staff Salaries	16	\$66,814
Purchased Services	40	\$197,898
Supplies and Materials	45	\$74,392
Travel Expenses	46	
Employee Benefits	80	\$29,783
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
<b>Grand Total</b>		<b>\$447,468</b>

<b>LOCAL AGENCY INFORMATION</b>			
Agency Code:	660900010000		
Project #:	5895-21-3740		
Contract #:			
Agency Name:	MOUNT VERNON CITY SCHOOL DISTRICT		
Funding Dates:	3/13/2020	TO	9/30/2022
Approved Budget Total:	\$ 461,178		

**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).

10/28/2022 *Dr. Waveline Bennett-Conroy*

DateSignature

Dr. Waveline Bennett-Conroy,  
Superintendent of Schools

**Name and Title of Chief Administrative Officer**

<b>FOR DEPARTMENT USE ONLY</b>			
<u>Fiscal Year</u>	<u>Amt Expended</u>	<u>Final Payment</u>	<u>Line #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Voucher #	Final Payment		

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