

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

Date Received  
AUG 05 2024  
Office of Accountability

|                  |                                    |         |
|------------------|------------------------------------|---------|
| Agency Name:     | Letchworth Central School District | Wyoming |
| Mailing Address: | 5550 School Road                   | County  |
|                  | Gainesville, NY 14066              |         |

Agency Code: 670401040000

Project Number: 5880213845

Contract #:

Amendment #: 005

RECEIVED

AUG 21 2024

Contact Person: D. Todd Campbell, Superintendent

Tel: 585-493-5450

GRANTS FINANCE

E-mail Address: tcampbell@letchworth.k12.ny.us

### 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: 7/30/24

Signature: 

### FOR DEPARTMENT USE ONLY

Program Approval: 

Date: 8/13/24

Finance: 8/21/24  
Logged

8/21/24  
Approved

| SUBTOTAL | EXPLANATION<br>detail as required in<br>FS-10 Budget) | (Provide same) | SUBTOTAL<br>INCREASE | SUBTOTAL<br>DECREASE |
|----------|-------------------------------------------------------|----------------|----------------------|----------------------|
|----------|-------------------------------------------------------|----------------|----------------------|----------------------|

|                             |                                                                                                                 |              |          |               |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------|--------------|----------|---------------|
| 15 - Professional Salaries  | reduce to reflect final salaries                                                                                |              |          | \$24,257      |
| 16 - Support Staff Salaries | increase to reflect final salaries and hours                                                                    |              | \$898    |               |
| 40 - Purchased Services     | increase to reflect final costs for self propelled floor cleaner lease                                          |              | \$150    |               |
| 45 - Supplies & Materials   | purchase up to 46 classroom NUC computers (\$771.00 each) using unused supply funds (\$5,859) and this increase |              | \$29,308 |               |
| 46 - Travel Expenses        |                                                                                                                 |              |          |               |
| 80 - Employee Benefits      | reduce to reflect actual benefits                                                                               |              |          | \$6,099       |
| 90 - Indirect Cost          |                                                                                                                 |              |          |               |
| 49 - Boces Services         |                                                                                                                 |              |          |               |
| 30 - Minor Remodeling       |                                                                                                                 |              |          |               |
| 20 - Equipment              |                                                                                                                 |              |          |               |
| ENTER BUDGET >              | Total Increase or Decrease:                                                                                     | (+) \$       | 30,356   | (-) \$ 30,356 |
|                             | Net Increase or Decrease:                                                                                       | \$ 0         |          |               |
|                             | Previous Budget Total:                                                                                          | \$ 1,368,469 |          |               |
|                             | Proposed Amended Total:                                                                                         | \$ 1,368,469 |          |               |