

☐ = Required Field

Local Agency Information

Funding Source: ARP-ESSER 1% State-Level Reserve - Summ

Report Prepared By: Nancy L. Nowicki

Agency Name: Holland Patent Central School District

Mailing Address: 9601 Main Street

Street

Holland Patent

NY

13354

City

State

Zip Code

**Telephone # of
Report Preparer:** 315-865-7200

County: Oneida

E-mail Address: nnowicki@hpschools.org

Project Funding Dates: 3/13/2020 9/30/2024
Start 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			\$145,120
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
8 Elementary Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$34,644
4 Middle School Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$17,323
6 High School Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$25,983
1 Guidance Counselor	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$4,331
1 Administrator	24 days	\$453 per diem rate	\$10,872
2 Music Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$8,661
2 Art Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$8,661
2 STEM Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$8,661
6 Intramural Teachers	96 hours (4 days a week for 6 weeks - 4 hours per day)	\$4,330.56 (\$45.11 per hour - per HPTA contract)	\$25,984

[illegible]

[illegible]

INDIRECT COST		
A.	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 = \$153,579.00

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.

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$145,120
Support Staff Salaries	16	\$5,280
Purchased Services	40	
Supplies and Materials	45	\$3,179
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$153,579

Agency Code:	412201060000
Project #:	5882-21-2055
Contract #:	
Agency Name:	Holland Patent 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).

1/3/22 Date  Signature

<p>Dr. Cheryl Venettozzi, Supt. Of Schools</p> <p>Name and Title of Chief Administrative Officer</p>
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FOR DEPARTMENT USE ONLY

Fundina Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

<u>Fiscal Year</u>	<u>First Payment</u>	<u>Line #</u>
_____	_____	_____
_____	_____	_____
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Voucher # _____ First Payment _____

Finance: Logged _____ Approved _____ MIR _____