

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:	Geer 2	
Report Prepared By:	Cheryl Venettozzi	
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:	315-865-7505	County: Oneida
E-mail Address:	cvenettozzi@hpschools.org	
Project Funding Dates:	3/13/2020	9/30/2023
	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 SUPPORT STAFF			
Subtotal - Code 16			\$27,198
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Covid Screener	4.00	\$6,799.00	\$27,198

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$8,381
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Student Chairs	44.00	\$82.00	\$3,606
Math Center Table	4.00	\$341.00	\$1,364
Art Center Table	4.00	\$255.00	\$1,023
Teacher Chairs	2.00	\$102.00	\$204
Teacher Desks	2.00	\$1,092.00	\$2,184

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	
Support Staff Salaries	16	\$27,198
Purchased Services	40	
Supplies and Materials	45	\$8,381
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$35,579

Agency Code: **412201060000**Project #: **5896-21-2055**Contract #: Agency Name: **Holland Patent CSD****FOR DEPARTMENT USE ONLY**

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

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).

9/29/21 Cynthia DeDominick
Date Signature

Cynthia B. DeDominick, Supt. of Schools
Name and Title of Chief Administrative Officer

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

Finance: Logged _____

Approved _____

MIR _____