The University of the State of New York THE STATE EDUCATION DEPARTMENT

PROPOSED BUDGET FOR A FEDERAL OR STATE PROJECT FS-10 (03/15)

-52	=	Required	Field

	Local Ager	cy Informati	on	
Funding Source:	ARP STATE RESER	VES		
Report Prepared By: CORA HARVEY			THE STATE OF	
Agency Name:	SOUTH JEFFERSON CSD			
Mailing Address:				
		Str	eet	
	ADAMS	NY	13605	
	City	State	Zip Code	
Telephone # of Report Preparer: 315-583-	61007	County:	JEFFERSON	
E-mail Address: CHARVE	Y@SPARTANPRIDE	.ORG		
Project Funding Dates:	3/13/202	0	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/.

		Subtotal - Code 15	\$1,237,785
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Learning Center Teacher (KS) 21-22	1.00	\$47,148	\$47,148
Learning Center Teacher (CP) 21-22	1.00	\$47,148	\$47,148
Social Worker (AC) 21-22	1.00	\$49,878	\$49,878
Reading Teacher (LH) 21-22	1.00	\$46,698	\$46,698
Elementary Teacher (KG) 21-22	1.00	\$45,516	\$45,516
Elementary Teacher (TH) 21-22	1.00	\$45,148	\$45,148
Elementary Teacher (EH) 21-22	1.00	\$60,626	\$60,626
Learning Center Teacher (KS) 22-23	1.00	\$48,562	\$48,562
Learning Center Teacher (CP) 22-23	1.00	\$48,562	\$48,562
Social Worker (AC) 22-23	1.00	\$51,374	\$51,374
Reading Teacher (LH) 22-23	1.00	\$48,099	\$48,099
Elementary Teacher (KG) 22-23	1.00	\$46,881	\$46,881
Elementary Teacher (TH) 22-23	1.00	\$46,502	\$46,502
Elementary Teacher (EH) 22-23	1.00	\$62,445	\$62,445
Elementary Teacher (GW) 22-23	1.00	\$50,056	\$50,056
Learning Center Teacher (KS) 23-24	1.00	\$50,019	\$50,019
Learning Center Teacher (CP) 23-24	1.00	\$50,019	\$50,019
Social Worker (AC) 23-24	1.00	\$52,916	\$52,916
Reading Teacher (LH) 23-24	1.00	\$49,542	\$49,542
Elementary Teacher (KG) 23-24	1.00	\$48,288	\$48,288
Elementary Teacher (TH) 23-24	1.00	\$47,898	\$47,898
Elementary Teacher (EH) 23-24	1.00	\$64,318	\$64,318
Elementary Teacher (GW) 23-24	1.00	\$51,558	\$51,558
Teachers covering substitute staffing shortages by giving up their planning time: 1420 hours at \$38 per hour	1420.00	\$38	\$53,960
Teachers working with students in remote instruction due to Quarantines after school hours (6 Teachers x 3 hours per week X 36 weeks X \$38 per hours)	6.00	\$4,104	\$24,624

	Employee Benefits	
	Subtotal - Code 80	\$643,945
	Proposed Expenditure	
Social Security 21-22		\$26,175
Social Security 22-23		\$30,789
Social Security 23-24		\$31,71
Social Security: learning loss covera	ge	\$6,012
	New York State Teachers 21-22	\$33,532
	New York State Teachers 22-23	\$43,468
Retirement	New York State Teachers 23-24	\$48,918
	New York State Teachers LL	\$7,701
	Other - Pension	
Health Insurance 21-22		\$111,683
Health Insurance 22-23		\$141,323
Health Insurance 23-24		\$150,702
Worker's Compensation 21-22		\$3,326
Worker's Compensation 22-23		\$3,912
Worker's Compensation 23-24		\$4,030
Worker's Compensation LL	\$661	
Other(Identify)		

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$1,237,785
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$643,945
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$1,881,730

Agency Code:	220101040000
Project #:	5884-21-1155
Contract #:	
Agency Name:	South Jefferson CSD

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 118122	SHEROS
Date	Signature

Scott Slater, Superintendent

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY				
Funding Dates:	From	То		
Program Approval:	Da	ate:		
Fiscal Year	First Payment	Line #		
Voucher #	F	irst Payment		