

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:	ARP		
Report Prepared By:	Amanda Grtaham-Quirk		
Agency Name:	Cincinnati Central School District		
Mailing Address:	2809 Cincinnati Road		
	Street		
	Cincinnati	NY	13040
	City	State	Zip Code
Telephone # of Report Preparer:	607-863-3200 X7,2	County: Cortland	
E-mail Address:	agrahamquirk@cc.cnyric.org		
Project Funding Dates:	3/13/2020 Start	9/30/2024 End	

INSTRUCTIONS
<ul style="list-style-type: none"> ● 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			\$598,190
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Teacher- Art Teacher (23-24)	1.00	\$97,716	\$97,716
Teacher- PE Teacher (22-23)	1.00	\$94,993	\$94,993
Teacher- PE Teacher (23-24)	1.00	\$98,701	\$98,701
Teacher- Music Teacher (23-24)	1.00	\$79,229	\$79,229
LAN Tech (21-22)	1.00	\$50,000	\$50,000
LAN Tech (22-23)	0.97	\$51,500	\$50,000
LAN Tech (23-24)	0.94	\$53,045	\$50,000
School Pyschologist (23-24)	1.00	\$77,551	\$77,551

PURCHASED SERVICES			
Subtotal - Code 40			\$568,104
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
PLC Training	Solution Tree	7 Trainers x \$10,714	\$75,000
Library HVAC	E & V Energy	8 Units in Library x \$6000	\$48,000
Drinking Fountains	F.W. Webb	15 fountains x \$2,000 each	\$30,000
Outdoor Learning Space	Ashley McGraw	4 classroom spaces X \$103,776	\$415,104

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$59,525
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Gaming Classroom materials and supplies, tables, chairs, led light strips, wall displays that interact with the gaming consoles, monitors, headsets, controllers, etc. Classroom set up to accommodate a class of 10 students	10.00	\$3,200.00	\$32,000
Tornado Cordless Vauums	2.00	\$499.00	\$998
Tornado Corded Vacuums	4.00	\$547.00	\$2,188
Musical Instruments (21-22) Trumpets, Clarinets, Trombones, Saxophones, SnarDrums- 29 kids worth of instruments	29.00	\$149.62	\$4,339
Musical Instruments (22-23) Trumpets, Clarinets, Trombones, Saxophones, SnarDrums- 68 kids worth of instruments	68.00	\$147.06	\$10,000
Musical Instruments (23-24) Trumpets, Clarinets, Trombones, Saxophones, SnarDrums- 68 kids worth of instruments	68.00	\$147.06	\$10,000

Employee Benefits			
		Subtotal - Code 80	\$84,896
Benefit		Proposed Expenditure	
Social Security			\$28,353
Retirement	New York State Teachers		
	New York State Employees		
	Other - Pension		
Health Insurance			\$56,543
Worker's Compensation			
Unemployment Insurance			
Other(Identify)			

EQUIPMENT			
			Subtotal - Code 20
			\$10,846
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Tenant 350 Scrubber	1.00	\$10,846.00	\$10,846

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$598,190
Support Staff Salaries	16	
Purchased Services	40	\$568,104
Supplies and Materials	45	\$59,525
Travel Expenses	46	
Employee Benefits	80	\$84,896
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	\$10,846
Grand Total		\$1,321,561

Agency Code:

Project #:

Contract #:

Agency Name:

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

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

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).

1/13/22 Todd M. Freeman

Date Signature

Mr. Todd Freeman, Superintendent of Schools
Name and Title of Chief Administrative Officer

Finance: Logged _____ Approved _____ MIR _____