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

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

Local Agency Information					
Fundin	g Source:	American Resuce Plan Act			
Report Pre	pared By:	Rachel Ingalsbe			
Ager	ncy Name:	Waterford-Halfmoon Union Free School District			
Mailing	Address:	: 125 Middletown Road Street			
		Waterford City	NY State		12188 Zip Code
Telephone # of Report Preparer:		0800 x 3305	County:	Saratoga	
E-mail Address:	ringalsbe	@whufsd.org			
E-mail Address: Project Fundi		@whufsd.org			

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			
	\$698,935		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Social Worker (3 years of partial salary, 2021-22 through 2023-24)	1.00	\$67,375.00	\$207,031
Academic Intervention Services Reading Teacher for grades 7-12 (3 years of salary, 2021-22 through 2023-23)	1.00	\$55,000.00	\$165,000
Academic Intervention Services Math Teacher for grades 7-12 (3 years of salary, 2021-22 through 2023-23)	1.00	\$55,000.00	\$165,000
Teacher pay for Elementary School Extended Day Program (before and after school instruction for struggling students for 3 years)	0.20	\$44,280.00	\$26,568
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Teacher pay for Elementary School Extended Day Program (before and after school instruction for struggling students for 3 years)	0.20	\$44,280.00	\$26,568
Educational Technologist Stipend (for 3 years)	0.20	\$42,000.00	\$25,200
Teaching Assistant for support in academic intervention services for grades 7-12 for 3 years	1.00	\$19,000.00	\$57,000

PURCHASED SERVICES			
Subtotal - Code 40 \$23,			
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Maintenance contract for District HVAC system	Johnson Controls	Annual contract cost is \$32,900	\$23,932

SUPPLIES AND MATERIALS			
Subtotal - Code 45 \$18			\$18,000
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Athletic Department Equipment	1.00	\$1,600.00	\$1,600
1:1 Chromebooks for classroom carts for grades K-2	60.00	\$250.00	\$15,000
Facilities department cleaning equipment	1.00	\$1,400.00	\$1,400

Employee Benefits	
Subtotal - Code 80	\$241,976
Benefit	
Social Security	
New York State Teachers	\$41,220
New York State Employees	
Other - Pension	
	\$163,125
Worker's Compensation	
	New York State Teachers New York State Employees

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$698,935
Support Staff Salaries	16	
Purchased Services	40	\$23,932
Supplies and Materials	45	\$18,000
Travel Expenses	46	
Employee Benefits	80	\$241,976
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Gran	d Total	\$982,843

Agency Code:	522101030000		
Project #:	5880-21-2725		
Contract #:			
Agency Name:	Waterford-Halfmoon Union Free 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).

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/ /		
Date	Signature	
Name and Title of Chief Administrative Officer		

FOR DEPARTMENT USE ONLY			
Funding Dates:	From	То	
Program Approval:	Date:		
<u>Fiscal Year</u>	First Payment	<u>Line #</u>	
		-	
Voucher #	First	Payment	

Page 7 of 7

 Finance:
 Logged ______
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