

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:	ESSER Funding		
Report Prepared By:	Carolyn Oliveri		
Agency Name:	Wilson Central School District		
Mailing Address:	374 Lake St		
	Street		
	Wilson	NY	14172
	City	State	Zip Code
Telephone # of Report Preparer:	(716) 751-9341, ext. 121		County: Niagara
E-mail Address:	coliveri@wilsoncsd.org		
Project Funding Dates:	7/1/2020		6/30/2021
	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			\$101,925
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Teacher-elem school	1.00		\$37,588
Teacher-elem school	1.000		\$38,777
Teacher -special ed	0.70	\$38,314	\$25,560

PURCHASED SERVICES			
Subtotal - Code 40			\$8,000
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Mental Health Training	Dr. Darryl Tonemah		\$5,000
Training on the use of Kami software			\$3,000

SUPPLIES AND MATERIALS

Subtotal - Code 45			\$32,622
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Desk Dividers for Elem School to return in person 5 days a week	500.00	\$33.95	\$17,000
Oxividor Cleaner, Paer Towels, Hand Sanitizer, Air scrubbers			\$10,422
Hot Spots for remote instruction	20.00	\$260.00	\$5,200

Employee Benefits		
Subtotal - Code 80		\$23,601
Benefit		Proposed Expenditure
Social Security		\$7,797
Retirement	New York State Teachers	\$9,713
	New York State Employees	
	Other - Pension	
Health Insurance		\$6,091
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$101,925
Support Staff Salaries	16	
Purchased Services	40	\$8,000
Supplies and Materials	45	\$32,622
Travel Expenses	46	
Employee Benefits	80	\$23,601
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$166,148

Agency Code:

401501060000

Project #:

5890-21-1990

Contract #:

Agency Name:

Wilson Central School District**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).

8/24/20


Date

Signature

Timothy P. Carter,
 Superintendent of Schools
 Name and Title of Chief Administrative Officer

Fiscal Year**First Payment****Line #**

Voucher #

First Payment

Finance: Logged _____

Approved _____

MIR _____