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

Project Funding Dates:

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

= Required Field

9/30/2023

End

	Local Agency Information
Funding S	ource: CCRSA Act-GEER 2
Report Prepare	ed By: Jamie Phillips, Assistant Superintendent
Agency	Name: Lancaster Central School District
Mailing Ad	dress: 177 Central Avenue Street
	Lancaster NY 14086 City State Zip Code
Telephone # of Report Preparer: 7	16.686.3212 County: Erie
E-mail Address: jp	hillips@lancasterschools.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.

3/13/2020

Start

- 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 FO	OR PROFESSI	ONAL STAFF	
		Subtotal - Code 15	\$444,106
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Music Teacher Grades 4-6, GEER 4	1.00	\$50,011	\$150,032
Art Teacher Grades K-3, GEER 4	1.00	\$49,950	\$149,850
Physical Education Teacher Grades 7-8, GEER 4	1.00	\$48,075	\$144,224

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary

	PURCHASED SERV	ICES	
		Subtotal - Code 40	
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
	The property of the		

SUP	PLIES AND MATE	ERIALS	
eli electrici		Subtotal - Code	45
Description of Item	Quantity	Unit Cost	Proposed Expenditure

	TRAVEL EXPENSES		
		Subtotal - Code 46	
Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures

	Subtotal - Code 80	\$145,735
	Benefit	Proposed Expenditure
Social Security		\$33,974
	New York State Teachers	\$30,833
Retirement	New York State Employees	
	Other - Pension	3 70 005 000
Health Insurance		\$78,441
Worker's Compensation		\$2,487
Unemployment Insurance		
Other(Identify)		

	INDIRECT COST	
A.	Modified Direct Cost Base Sum of all preceding subtotals(codes 15, 16, 40, 45, 46, and 80 and excludes the portion of each subcontract exceeding \$25,000 and any flow through funds) **Manual Entry	
B.	Approved Restricted Indirect Cost Rate	
C.	Subtotal - Code 90	24.34

For your information, maximum direct cost base =

\$589,841.00

To calculate Modified Direct Cost Base, reduce maximum direct cost base by the portion of each subcontract exceeding \$25,000 and any flow through funds.

PURCHASED SERVICES WITH BOCES			
		Subtotal - Code 49	
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure

MINOR REMO	DDELING	
	Subtotal - Code 30)
Description of Work to be Performed	Calculation of Cost	Proposed Expenditure
		11

	EQUIPMENT		
	l-group warming at	Subtotal - Code 20	
Description of Item	Quantity	Unit Cost	Proposed Expenditure
			JR also retain one

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$444,106
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$145,735
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Gran	d Total	\$589,841

Agency Code:	141901060000
Project #:	5896-21-0825
Contract #:	
Agency Name:	Lancaster Central 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

Michael J. Vallely, Superintendent

Name and Title of Chief Administrative Officer

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

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 Finance:
 Logged ______
 Approved ______
 MIR ______