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:	Governor's Emergency	y Education Relief	(GEER) F	
Report Prepared By:	Mitchell Toleson		Of The Oct William	
Agency Name:	Port Byron CSD		The same of the sa	
Mailing Address:	30 Maple Avenue	Street	OLAN SO	
	Port Byron	NY	13140	
	City	State	Zip Code	
Telephone # of Report Preparer: 315-776			uga	
E-mail Address: mtoleson@pbcschools.org				
Project Funding Dates:	7/1/20		6/30/21	
	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/.

SALA	RIES FOR SUPPOR	RT STAFF	
		Subtotal - Code 16	\$35,000
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Teaching Assistant	2.00	\$17,500.00	\$35,000

Lisa Wilson 17,500 Miline OH 17,500



	Employee Benefits	
	Subtotal - Code 80	\$111
Benefit		Proposed Expenditure
Social Security		\$111
	New York State Teachers	
Retirement	New York State Employees	
	Other - Pension	
Health Insurance		
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		
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	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	
В.	Approved Restricted Indirect Cost Rate	
C.	Subtotal - Code 90	

For your information, maximum direct cost base =

\$35,111.00

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.

CF121 ENTRY DATE 03/23/21 PROJECT 5895210300 SED CODE 05110104000 NYC DOC #	PROJECT CARES	ITS FINANCE STATUS REPORT ACT - GEER BYRON CSD	RUN DATE 03/23/21		
	BUDGET DETA	IL INFORMATION			
PROF SALARY 15	0.00	BEGIN DATE	03/13/20		
NON PROF SALARY 16	35,000.00		09/30/22		
PURCH SERVICES 40	0.00	AMENDMENT #	09/30/22		
SUPP & MATERIAL 45	0.00		•		
TRAVEL EXPENSE 46	0.00	••	·		
EMP BENEFITS 80	111.00				
INDIRECT COST 90	0.00	IND COST RATE	3.2		
BOCES SERVICES 49	0.00	INT ELIG	N		
REMODELING 30	0.00	INI EDIO	N		
EQUIPMENT 20	0.00				
	0.00				
	BUDGET SUM	MARY INFORMATION			
FUNDYEAR BUDG	GET SPLITS	PAID TO DATE	OUTSTANDING ENC		
589521	0.00	0.00	0.00		
589520	35,111.00	7,022.00	28,089.00		
589519	0.00	0.00	0.00		
	0.00	0.00	0.00		
	0.00	0.00	0.00		
TOTAL	35,111.00	7,022.00	28,089.00		
	50,111.00	,,022.00	20,003.00		
LOG AND CONTRACT DATES					
RECE I VED	ENTERED	-	APPROVED		
BUDGET 03/18/21	03/22/21	CONTRACT	-		
INTERIM	, ,	· ·	•		
FINAL					
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CASH DETAIL

AMOUNT

FUNDYR MIR

7,022.00 589520 031821

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THIS BUDGET HAS BEEN PROCESSED BY THE NEW YORK STATE EDUCATION DEPARTMENT. THIS SUMMARY REPLACES THE SIGNED COPY.

TRANS ENC RPT LINE

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