# Page 1 of 5

#### Received

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

DEC 2 2 2021

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

Office of Accountability

= Required Field

	Local Agency	/ Informati	on			
Funding Source:	ARP-ESSER 5% State	Level Rese	erve- Addressir			
Report Prepared By:	Anthony Cammarata					
Agency Name:	Cambridge CSD					
Mailing Address:	58 South Park St					
	Cambridge	Str	eet 12816			
	City	State	Zip Code			
Telephone # of Report Preparer: 518 677-	2653 x 1016	County:	Washington			
Project Funding Dates:			9/30/2024 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/.

		Subtotal - Code 15	\$526,660
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
AIS Mathematics Elementary Colt	1.00	\$44,470	\$88,940
AIS Reading Elementary	My My Millson	\$44,470	\$88,940
Teaching Assistants- Elementary	yer 2.00	\$18,560	\$74,240
AIS Reading High School	1.00	\$44,470	\$88,940
Teaching Assistants- High School	5.00	\$18,560	\$185,600

Holbertof?

2110-150 -01 + 02

	Employee Benefits	CHEROLET CONTRACTOR
	Subtotal - Code 80	\$237,990
Benefit		Proposed Expenditure
Social Security		\$80,580
	New York State Teachers	\$102,698
Retirement	New York State Employees	
	Other - Pension	
Health Insurance		\$46,602
Worker's Compensation		\$8,110
Unemployment Insurance		
Other(Identify)		

1	Carle D.				
	CF121			ITS FINANCE	
	ENTRY DATE 03/31			STATUS REPORT LR LEARNING LOSS	RUN DATE 03/31/22
		13535			
		0040000	CAMBE	RIDGE CSD	
	NYC DOC #				
			BUDGET DETA	IL INFORMATION	
	PROF SALARY	15	526,660.00	BEGIN DATE	03/13/20
	NON PROF SALARY	16	0.00	END DATE	09/30/24
	PURCH SERVICES	40	0.00	AMENDMENT #	
	SUPP & MATERIAL	45	0.00	CONTRACT #	
	TRAVEL EXPENSE	46	0.00	STOP DATE	
	EMP BENEFITS	80	237,990.00	REFUND CHECK #	
	INDIRECT COST	90		IND COST RATE	11.0
	BOCES SERVICES	49		INT ELIG	N
	REMODELING	30	0.00		
	EQUIPMENT	20	0.00		
	-				
			BUDGET SUMM	MARY INFORMATION	
	FUNDYEAR	BUDGET	SPLITS	PAID TO DATE	OUTSTANDING ENC
	588421	764	,650.00	152,930.00	611,720.00
	588420		0.00	0.00	0.00
	588419		0.00	0.00	0.00
			0.00	0.00	0.00
			0.00	0.00	0.00
	TOTAL	764	,650.00	152,930.00	611,720.00
					·
				NTRACT DATES	
	RECE		ENTERED		APPROVED
	BUDGET 03/28	B/22	03/29/22	CONTRACT	
	INTERIM				
	FINAL				

CASH DETAIL

ENTRY DOC # TRANS ENC RPT LINE AMOUNT FUNDYR MIR PD DT STAT 033122 568283F INIT 000 03/22 01 152,930.00 588421 032822 ENT

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



# A

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

DEC 2 2 2021

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

Office of Accountability

= Required Field

×	Local Agenc	y Informati	on			
Funding Source:	ARP-ESSER 1% State	RP-ESSER 1% State Reserve- Summer Learni				
Report Prepared By:	Anthony Cammarata	Anthony Cammarata				
Agency Name:	Cambridge CSD					
Mailing Address:	58 South Park St					
		Str	eet			
	Cambridge	NY	12816			
	City	State	Zip Code			
Telephone # of Report Preparer: 518 677-	2653 x 1016	County:	Washington			
E-mail Address: anthony.cammarata@cambridgecsd.org						
Project Funding Dates:	3/13/2020 Start	)	9/30/2024 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/.

		Subtotal - Code 15	\$130,000
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Summer Programming Teacher Salaries (13.0/ per year)	26.00	\$5,000	\$130,000
	33		

2330-150

### **BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$130,000
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	lka i
Travel Expenses	48	a
Employee Benefits	80	\$22,934
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Gran	nd Total	\$152,934

Agency Code:	641610040000
Project #:	5882-21-3535
Contract #:	
Agency Name:	Cambridge CSD

# 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).

1211(12)	asy	don	7
Date		Signature	

Dr. Douglas Silvernell, Superintendent of Schools Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY					
Funding Dates:	From	To			
Program Approval:		_Date:			
Fiscal Year	First Paymen	t Line#			
	···				
<del></del> -	<u>.</u>				
	,				
Voucher#		First Payment			

	CF121		CDAN	INC EINANCE	
		0/22		ITS FINANCE	DIN: DIME 02/00/00
				STATUS REPORT	* *
		13535		LR SUMMER ENRICHM	MENT
		0040000	CAMBI	RIDGE CSD	
	NYC DOC #				
				ALL INFORMATION	
	PROF SALARY	15		BEGIN DATE	03/13/20
	NON PROF SALARY			END DATE	09/30/24
	PURCH SERVICES	40	0.00	AMENDMENT #	
	SUPP & MATERIAL		0.00	CONTRACT #	
	TRAVEL EXPENSE	46		STOP DATE	
	EMP BENEFITS	80	22,934.00	REFUND CHECK #	
	INDIRECT COST	90	0.00	IND COST RATE	11.0
	BOCES SERVICES	49	0.00	INT ELIG	N
	REMODELING	30	0.00		
	<b>EQUIPMENT</b>	20	0.00		
			BUDGET SUM	MARY INFORMATION	
	FUNDYEAR	BUDGET	SPLITS	PAID TO DATE	OUTSTANDING ENC
	588221	152	,934.00	30,586.00	122,348.00
	588220		0.00	0.00	0.00
	588219		0.00	0.00	0.00
			0.00	0.00	0.00
			0.00	0.00	0.00
	TOTAL	152	,934.00	30,586.00	122,348.00
			•	•	li ,
			LOG AND CO	ONTRACT DATES	
	RECE	IVED	ENTERED		APPROVED
	BUDGET 03/0	7/22	03/08/22	CONTRACT	
	INTERIM				
)	FINAL				

CASH DETAIL

ENTRY DOC # TRANS ENC RPT LINE AMOUNT FUNDYR MIR PD DT STAT 030822 565217F INIT 000 03/22 01 30,586.00 588221 030722 ENT

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



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

## Received

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

DEC 2 2 202 = Required Field

Office of Accountability

	Office Of A	recontitab	HITY	_	
	Local Agency	/-Informati	20		
Funding Source:	ARP-ESSER-1% State	Reserve- (	Comprehensive After Shall		
Report Prepared By:					
Agency Name:	Cambridge CSD				
Mailing Address:					
	Cambridge	NY	12816		
	City	State	Zip Code		
Telephone # of Report Preparer: 518 677-	2653 x 1016	County:	Washington		
E-mail Address: anthony.cammarata@cambridgecsd.org					
Project Funding Dates:	3/13/2020 Start		9/30/2024 End		
			te i i e		

### 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/.

Subtotal - Code 15 \$85,0				
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary	
Teacher AIS After School Tutoring Stipend (8.5/ year)	17.00	\$5,000	\$85,000	
Deb Browner				

3110-120 - 01

9010-4KS 9000-TRS 9030< Suser

22次是他背景的影响	Employee Benefits	
	Subtotal - Code 80	\$15,000
Benefit		Proposed Expenditure
Social Security	\$6,50	
	New York State Teachers	\$8,288
Retirement	New York State Employees	
	Other - Pension	
Health Insurance		EA-1 mil
Worker's Compensation		\$20
Unemployment Insurance		
Other(Identify)		
		E BEAUTION

#### **BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$85,000
Support Staff Salaries	16	
Purchased Services	40	\$52,934
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$15,000
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$152,934

Agency Code:	641610040000		
Project#	5883-21-3535		
Contract #:			
Agency Name:	Cambridge CSD		

# **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).

12 HIGH AND ASIGNATURE

Signature

Dr. Douglas Silvernell, Superintendent of Schools Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY				
Funding Dates:	From	То		
rogram Approval:	Date:			
Fiscal Year	First Payment	Line #		
		W		
Voucher#		st Payment		

	4 1 1 1 1						
	CF121		GRANTS FINANCE				
ENTRY DATE 03/08/22 PROJECT 5883213535 SED CODE 641610040000							
		ARP SLR COMPREHENSIVE CAMBRIDGE CSD					
					•		
	NYC DOC #						
		BUDGET DE	TAIL INFO	RMATION			
	PROF SALARY	15	85,000.00			03/13/20	
	NON PROF SALARY			END D		09/30/24	
	PURCH SERVICES	40	52,934.00		MENT #	03/30/24	
	SUPP & MATERIAL		0.00	CONTR			
	TRAVEL EXPENSE	46	0.00	STOP			
	EMP BENEFITS	80	15 000 00	REFUN			
	INDIRECT COST		13,000.00	IND C	OST RATE	11.0	
	BOCES SERVICES		0.00			N	
REMODELING 30		0.00		LIG	N		
	EQUIPMENT	20	0.00				
	EQUIFMENT	20	0.00	,			
			BUDGET SU	JMMARY INF	ORMATION		
	FUNDYEAR	BUDGET	SPLITS	PAI	D TO DATE	OUTS	ANDING ENC
	588321	152	,934.00		30,586.00	1	122,348.00
	588320		0.00		0.00		0.00
	588319	Ŧ1	0.00		0.00		0.00
			0.00		0.00		0.00
			0.00		0.00		0.00
	TOTAL	152	,934.00		30,586.00	]	122,348.00
			LOG AND	CONTRACT	DATES		
	RECE	IVED	ENTERED			APPROVED	
	_ : = :=	7/22	03/08/22	CONTRA	СТ		
	INTERIM	- ,	,,	001.1141	<b>-</b>		
	FINAL						

CASH DETAIL

ENTRY DOC # TRANS ENC RPT LINE AMOUNT FUNDYR MIR PD DT STAT 030822 565219F INIT 000 03/22 01 30,586.00 588321 030722 ENT

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