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

# PROPOSED AMENDMENT FOR A FEDERAL OR STATE PROJECT® of Accountability

Agency Name:	CAMBRIDGE CENTRAL SCHOOL 58 SOUTH PARK STREET CAMBRIDGE, NY 12816	WASHINGTON County
Agency Code:	641610040000 5896-21-3535	Amendment #: 001
Contract #:  Contact Person:  E-mail Address:	APRIL YOUNG april.young@cambridgecsd.org	Tel: 518-677-2653 EXT 1018

#### <u>INSTRUCTIONS</u>

- Submit the original and two copies directly to the same State Education Department office where budget was mailed. DO NOT submit this form to Grants Finance.
- This form need only be submitted for budget changes that require prior approval as follows:
  - Personnel positions, number and type
  - Equipment items having a unit value of \$5,000 or more, number and type

  - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent or \$1,000, whichever is greater
  - Any increase in the total budget amount.
- Amendment # at top of this page must be completed.
- If extra room is needed for explanations, expand the rows using the row breaks on the left.
- Do not use the FS-10-A for requesting a project extension.

#### CHIEF ADMINISTRATOR'S CERTIFICATION By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, & accurate, & the expenditures, disbursements, & cash receipts are for the purposes& objectives set forth in the terms & 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 penaltiesfor fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812). FOR DEPARTMENT USE ONLY Program Approval:

RECEIVED

JAN 05 2020

10/28/2022 9:12 AM

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

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

		= Required Field
Agency Name:	CAMBRIDGE CENTRAL SCH	OOL WASHINGTON
Malling Address:	58 SOUTH PARK STREE	County
	CAMBRIDGE, NY 12816	
Agency Code:	641610040000	
Project Number:	5896-21-3535	Amendment #: 001
Contract #:		e
Contact Person:	APRIL YOUNG	Tel: 518-677-2653 EXT. 1013
E-mail Address:	april.young@cambridgecsd.	org
<ul> <li>Personnel position</li> <li>Equipment items</li> <li>Minor remodeling</li> <li>Any increase in a or \$1,000, whicheve</li> <li>Any increase in the Amendment # at top or</li> <li>If extra room is needed</li> </ul>	e submitted for budget changes that request, number and type having a unit value of \$5,000 or more, not budget subtotal (professional salaries, per is greater lie total budget amount, of this page must be completed, do for explanations, expand the rows using A for requesting a project extension.	umber and type purchased services, travel, etc.) by more than 10 percent ing the row breaks on the left.
expenditures, disburser Federal (or State) awar fact may subject me to	ments, & cash receipts are for the purpo d. I am aware that any false,fictitious, or criminal, civil, or administrative penalties ction 1001 and Title 31, Sections 3729-	belief that the report is true, complete, & accurate, & the ses& objectives set forth in the terms & conditions of the fraudulent information, or the omission of any material sfor fraud, false statements, false claims, or otherwise
	FOR DEPARTME	NT USE ONLY
Program Approval	<u> </u>	Date:
Finance	3	

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Approved

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget).		SUBTOTAL INCREASE		TOTAL REASE
15 - Professional Salaries				347	
16- Support Staff Salaries					
40 - Purchased Services	Original intent to contract with Northe Rivers fell through leaving whole amou available				\$29,380
45 - Supplies & Materials		5			
46 - Travel Expenses			Covid ws of	Lawing	
80 - Employee Benefits					
90 - Indirect Gost				(A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	
49 - Baces Services	Cla			a	
30 - Minar Remodeling					
20 - Equipment	Purchase five Promethean Boards for Classroom use and AIS equipment such chairs, bookcases, book bins, and whitebo	as .	\$29,380		
	Total Increase or Decrease:	(+) \$	29,380	(-) \$	29,380
	Net Increase or Decrease:	\$			0
ENTER BUDGET >	Previous Budget Total:	\$			37,298
	Proposed Amended Total:	\$			37,298

Logged

Approved

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SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)		SUBTOTAL INCREASE	SUBTOT/ DECREAS	SCHOOL STATE OF THE STATE OF TH
15 - Professional Salaries					
16 - Support Staff Salaries					
40 - Purchased Services	Original intent to contract with No Rivers fell through leaving whole a available	rther $\eta$			\$29,380
45 - Supplies & Materials	Purchase five Promethean Boards for classroom use and AIS equipment under \$5000 each for significant learning loss due to covid.		\$29,380		
46 - Travel Expenses					
80 - Employee Benefits					
90 - Indirect Cost			<u> </u>		
49 - Boces Services					
30 - Minor Remodeling		Yel			
20 - Equipment					
	Total Increase or Decrease:	(+) \$	29,380	(-) \$	29,380
	Net Increase or Decrease:	\$			0
ENTER BUDGET >	Previous Budget Total:	\$			37,298
	Proposed Amended Total:	\$			37,298