

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	
Report Prepared By:	Ron Clamserr, Jr.	
Agency Name:	Dobbs Ferry Union Free School District	
Mailing Address:	505 Broadway	
	Street	
	Dobbs Ferry	NY 10522
	City	State Zip Code
Telephone # of Report Preparer:	(914) 693-1500	County: Westchester
E-mail Address:	clamserr@dfsd.org	
Project Funding Dates:	3/13/2020	9/30/2022
	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/>.

PURCHASED SERVICES			
Subtotal - Code 40			\$18,000
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
10 - Portable Sink Rentals for 6 months	Reliable Onsite Services	\$250 x 10 x 6 months	\$15,000
4 - Portable Toilet Rentals for 6 months	Got-toGo	\$125 x 4 x 6 months	\$3,000

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$67,386
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Washable Cloth Masks	7000.00	\$4.00	\$28,000
Digital Hand-held Thermometer	10.00	\$72.00	\$720
N95 Masks	200.00	\$10.00	\$2,000
Coroplast Standard Desk Shield	50.00	\$28.00	\$1,400
Polycarbonate Desk Barriers	30.00	\$50.00	\$1,500
Standard 9" Face Shield	500.00	\$3.75	\$1,875
Aclohol Wipes	200.00	\$6.75	\$1,350
Sign Printing Materials & Supplies	100.00	\$30.00	\$3,000
Disposable Gowns	4000.00	\$2.50	\$10,000
Tri-fold Desk Guards	300.00	\$30.00	\$9,000
Hand Sanitizer (cases)	80.00	\$75.00	\$6,000
Polycarbonate Material	250.00	\$10.16	\$2,541

EQUIPMENT			
Subtotal - Code 20			\$33,600
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Contactless Temperature Kiosks and Stands	4.00	\$2,900.00	\$11,600
20' x 40' Heavy Duty Tent Canopy w/ sides	4.00	\$800.00	\$6,000
Student Chromebooks	40.00	\$250.00	\$10,000
HEPA Filtered Air Purifiers	30.00	\$200.00	\$6,000

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	
Support Staff Salaries	16	
Purchased Services	40	\$18,000
Supplies and Materials	45	\$67,386
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	\$33,600
Grand Total		\$118,986

Agency Code: **640403030000**Project #: **5890-21-3645**

Contract #:

Agency Name: **Dobbs Ferry Union Free 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).

11/17/20
Date

Signature

LISA BRADY, SUPERINTENDENT

Name and Title of Chief Administrative Officer

Fiscal YearFirst PaymentLine #

Voucher #

First Payment

Finance: Logged _____

Approved _____

MIR _____