

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
(see instructions for mailing address)

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

Agency Name and Address

ARP-ESSER 3

Moriah Central School District
39 Viking Lane
Port Henry, NY 12974

Essex

County

Agency Code:

1	5	0	9	0	1	0	4	0	0	0	0
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Amendment #

1

Project #:

5	8	8	0	2	1	0	8	8	0
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Contract #:

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Contact Person: William Larrow

Tel. #: 518-546-3301

E-Mail Address: wlarrow@moriahk12.org

INSTRUCTIONS

- ❖ **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.**
- ❖ Enter whole dollar amounts only.
- ❖ 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
 - Minor remodeling
 - 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.
- ❖ 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, 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).

.DATE: 6/30/22

SIGNATURE: 

Chief Administrative Officer

FOR DEPARTMENT USE ONLY

Program Approval: _____ Date: _____

Finance:

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Log

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Approved

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
15 Professional Salaries			
16 Support Staff Salaries			
40 Purchased Services			
45 Supplies & Materials	<p>Increase Supplies and Materials:</p> <p>Add (1) Laser Engraving Machine <i>(\$4,800)</i>: Moved from Code 20 to Code 45 - as itemized cost was under \$5,000.</p> <p>Add Materials for ductwork for the Laser Engraving Machine (e.g., aluminum tape to seal duct to machine, wall mount bracket, aluminum flex pipe and hose clamp). Aluminum Tape: \$17.99 x 2 = \$35.98 Wall Mount Bracket(s): \$10.94 x 5 brackets = \$54.70 Aluminum Flex Pipe: \$23.99 x 2 = \$47.98 90-Degree Elbow Duct: \$14.72 x 2 = \$29.44 Hose Clamp: \$11.95 x 2 = \$23.90 <i>(\$192)</i></p> <p>Add (2) 3D Printers <i>(\$2,199/Printer x 2 = \$4,398)</i>: <i>Allowable Use #15- Funding will support educational supplies - 3D printers will be utilized to implement after-school and summertime enrichment programming. (2) 3D printers will allow Professional Staff to facilitate and implement enrichment programming to mitigate learning loss inclusive of addressing the social- emotional and academic needs of underserved students.</i></p> <p><i>(+9,390)</i></p>	\$9,390	
46 Travel Expenses			
80 Employee Benefits			
90 Indirect Cost			
49 BOCES Services			
30 Minor Remodeling			

20 Equipment	<p>Remove Equipment due to cost being less than less than originally anticipated/budgeted: Laser Engraving Machine originally budgeted for \$7,000. Actual cost was less than \$5,000 – Remove engraving machine from Code 20 and move to Code 45. <i>(-\$7,000)</i></p> <p>Decrease Equipment Cost of Timpani originally budgeted \$18,126 – actual cost of Timpani was \$15,736. <i>(-\$2,390)</i></p> <p><i>(-9,390)</i></p>		\$9,390
Total Increase or Decrease		(+) \$9,390	(-) \$9,390
Net Increase or Decrease		\$0	
Previous Budget Total		\$1,732,530	
Proposed Amended Total		\$1,732,530	