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

OCT 30 2023 PROPOSED AMENDMENT FOR A
FEDERAL OR STATE PROJECT

OFFICE OF ACCOUNTABILITY FS-10-A (03/15)

= Required Field

Agency Name: <u>Gilbertsville-Mount Upton CSD</u>	<u>Otsego</u> County
Mailing Address: <u>693 State Highway 51</u> <u>Gilbertsville, New York 13776</u>	

Agency Code: <input type="text" value="470202040000"/>	Amendment #: <input type="text" value="001"/>
Project Number: <input type="text" value="5882-21-2375"/>	
Contract #: <input type="text"/>	
Contact Person: <input type="text" value="Dorothy Iannello"/>	Tel: <input type="text" value="607-783-2207, ext 144"/>
E-mail Address: <input type="text" value="diannello@gmucsd.org"/>	

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NOV 14 2023
GRANTS FINANCE

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.
- 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.
- 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 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: 10-24-2023 Signature: [Signature]

FOR DEPARTMENT USE ONLY

Program Approval: <u>Sofia</u>	Date: <u>11/01/23</u>
Finance: <input type="text" value="11/14/23<sup>al</sup>"/> Logged	<input type="text" value="11/16/23"/> Approved

SUBTOTAL	EXPLANATION (Provide same detail as required in FS-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE					
15 - Professional Salaries	Increase for Instructional Salaries to continue Summer Enrichment Program for 24-25. This will include a \$5,000 Stipend for the Summer Enrichment Coordinator as well as approximately \$8,373; 15 teachers salary at \$27.91 per day, 4 hours per day for 5 days.	\$13,373						
16 - Support Staff Salaries	Reallocate to Instructional Salaries for the Summer Enrichment Program for 2024-25		\$13,373					
40 - Purchased Services								
45 - Supplies & Materials								
46 - Travel Expenses								
80 - Employee Benefits								
90 - Indirect Cost								
49 - Boces Services								
30 - Minor Remodeling								
20 - Equipment								
ENTER BUDGET >	Total Increase or Decrease:	(+)	\$	13,373	(-)	\$	13,373	
	Net Increase or Decrease:		\$		0			
	Previous Budget Total:		\$		100,002			
	Proposed Amended Total:		\$		100,002			