

## INSTRUCTIONS

- This long form final expenditure report tool contains 12 worksheets – 1 for agency information, 1 for each of the 10 expense categories, and 1 for the final expenditure summary. To go to the other worksheets, click on the tabs below.
- Complete all of the green-shaded fields on the Local Agency Information and Final Expenditure Summary pages. It is very important that the agency name and address, agency code and project number be accurate. For special legislative projects and grant contracts, also enter the contract number.
- To enter expenditure information for a particular category, select that tab and enter the required data. Dollar amounts in the Salary Paid/Amount Expended columns of the worksheets will be automatically subtotaled on the worksheets, and the subtotals will be carried over to the Final Expenditure Summary worksheet. Dollar amounts will be rounded automatically to the closest whole number. The subtotals and the Final Expenditure Summary will automatically be recalculated if the dollar amounts are changed or new information is added.
- Large amounts of text in the description boxes may not be completely visible. To accommodate extra text, expand the row height by dragging the line below the row number until the row is at the appropriate height.
- On the indirect cost category worksheet, the Maximum Direct Cost Base listed below the chart is the total of codes 15, 16, 40, 45, 46 and 80. To compute the amount in row A. - Modified Direct Cost Base, subtract the portion of each subcontract exceeding \$25,000 and any flow through funds from the Maximum Direct Cost Base. Enter the agency's indirect cost rate as a whole number plus one decimal (2.1%, for example).
- To save the completed report, select File / Save As, rename the file, select the appropriate location on your computer, and click OK.
- To preview a completed report, select File / Print and then click the Preview button.
- To print a completed report, select File / Print and then click OK. Only completed pages will print.
- When assembling the report, please make sure that the Final Expenditure Summary worksheet faces out.
- For additional information about preparing final expenditure reports, please refer to Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

The University of the State of New York  
**THE STATE EDUCATION DEPARTMENT**  
 Grants Finance, Rm. 510W EB  
 Albany, New York 12234

**FINAL EXPENDITURE REPORT FOR A  
 FEDERAL OR STATE PROJECT  
 FS-10-F Long Form (03/15)**

= Required Field

<b>Local Agency Information</b>		
Funding Source:	ESSER - CARES Act	
Report Prepared By:	DIANA NG	
Agency Name:	DRYDEN CENTRAL SCHOOL DISTRICT	
Mailing Address:	PO BOX 88	
	Street	
	DRYDEN	NY
	13053	
	City	State
		Zip Code
<b>Telephone # of Report Preparer:</b>	607-844-5361 x5	<b>County:</b> TOMPKINS
<b>E-mail Address:</b>	DNG1@DRYDEN.K12.NY.US	

- INSTRUCTIONS**
- For State grants, final expenditure reports are generally due within 30 days after the grant's end date. Reports for federal projects are generally due within 90 days after the grant's end date. See the Grant Award Notice to verify the due date. However, the Department program office may impose an earlier due date.
  - Agencies should use only the FS-10-F Long Form to report actual project expenditures.
  - Agencies must maintain complete and accurate records and may be requested to provide additional detail to support reported expenditures.
  - All encumbrances must have taken place within the grant's approved funding dates, which can be found on the FS-10 or FS-20 budget form and on the Grant Award Notice.
  - The Chief Administrator's Certification on the Final Summary page must be signed by the agency's Chief Administrative Officer or properly authorized designee.
  - Submit one report with original signature and one copy directly to Grants Finance, New York State Education Department, Room 510W EB, Albany, NY 12234.
  - For special legislative projects, submit one report with original signature and two copies, along with a final program narrative report.
  - For additional information, please refer to Fiscal Guidelines for Federal and State Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$355,436
Name	Position Title	Beginning and End Dates of Work	Salary Paid
DICKSON, TIA I. (02791)	ASST. PRINCIPAL	3/13/2020 - 9/30/2022	\$40,568
HARRIS, GREGORY T. (02922)	ASST. PRINCIPAL	3/13/2020 - 9/30/2022	\$41,987
LEE, ALLEN M. (01679)	SCIENCE TEACHER	3/13/2020 - 9/30/2022	\$26,496
PEYUS, ALLISON M. (02374)	SOCIAL WORKER	3/13/2020 - 9/30/2022	\$32,860
DARLOW, SHARON A. (02622)	SCIENCE TEACHER	3/13/2020 - 9/30/2022	\$55,526
ALLEN, LEANNE (00578)	REMEDIAL READING	3/13/2020 - 9/30/2022	\$23,415
LUDEWIG, JOAN W. (01384)	REMEDIAL READING	3/13/2020 - 9/30/2022	\$30,784
EDWIN-RUSSO, ANDREA A. (01630)	REMEDIAL READING	3/13/2020 - 9/30/2022	\$53,814
KANNUS, MICHELLE (00357)	SCHOOL COUNSELOR	3/13/2020 - 9/30/2022	\$49,986

SALARIES FOR SUPPORT STAFF			
			Subtotal - Code 16
Name	Position Title	Beginning and End Dates of Work	Salary Paid

PURCHASED SERVICES			
Subtotal - Code 40			
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$3,592
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
5/17/2021	BEARD ELECTRIC LLC	97416	\$514
8/11/2021	AMAZON	97975	\$2,049
1/3/2022	ANITA K. WASSON	98457	\$1,029

TRAVEL EXPENSES					
				Subtotal - Code 46	
Dates of Travel	Name of Traveler	Destination and Purpose	Check or Journal Entry #	Amount Expended	

## Employee Benefits

Subtotal - Code 80			
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement			
Employee Retirement			
Other Retirement			
Social Security			
Worker's Compensation			
Unemployment Insurance			
Health Insurance			
<b>Other(Identify)</b>			



INDIRECT COST		
A.	Modified Direct Cost Base -- Sum of all preceding subtotals (codes 15, 16, 40, 45, 46, and 80, excluding the portion of each subcontract exceeding \$25,000 and any flow through funds)	
B.	Approved Restricted Indirect Cost Rate(%) (enter X.X)	
C.	Subtotal - Code 90	

For your information, maximum direct cost base = \$359,028.00

To calculate Modified Direct Cost Base, reduce maximum direct cost base by the portion of each subcontract exceeding \$25,000 and any flow through funds.

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			
Encumbrance Date	Name of BOCES	Check or Journal Entry #	Amount Expended

MINOR REMODELING			
Subtotal - Code 30			
Purchase Order Date Or Dates of Service	Provider of Service	Check or Journal Entry #	Amount Expended

EQUIPMENT			
Subtotal - Code 20			
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended

### FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$355,436
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	\$3,592
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
<b>Grand Total</b>		<b>\$359,028</b>

**LOCAL AGENCY INFORMATION**

Agency Code: 610301060000

Project #: 5890-21-3360

Contract #:

Agency Name: DRYDEN CENTRAL SCHOOL DISTRICT

Funding Dates: 3/13/2020 TO 9/30/2022

Approved Budget Total: \$ 359,037

**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* *Signature*

**Name and Title of Chief Administrative Officer**

**FOR DEPARTMENT USE ONLY**

<u>Fiscal Year</u>	<u>Amt Expended</u>	<u>Final Payment</u>	<u>Line #</u>
Voucher #		Final Payment	

Finance: Logged \_\_\_\_\_ Approved \_\_\_\_\_ MIR \_\_\_\_\_