

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

**Local Agency Information**

Funding Source:	CARES ACT - ESSERF	
Report Prepared By:	Michael Fenn	
Agency Name:	Vestal Central School District	
Mailing Address:	201 Main St	
	Street	
	Vestal	NY 13850
	City	State Zip Code

Telephone # of Report Preparer:  County:

E-mail Address:

**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			\$366,429
Name	Position Title	Beginning and End Dates of Work	Salary Paid
TYLER, ASHLEY	TEACHER	7/1/21 - 6/30/22	\$59,840
CRISSMAN, RUTH	TEACHER	7/1/21 - 6/30/22	\$41,306
WHITMORE, LAURA	TEACHER	7/1/21 - 6/30/22	\$57,395
GILEBARTO, PHILIP	TEACHER	7/1/21 - 6/30/22	\$57,742
GRETSKY, ZACHARY	TEACHER	7/1/21 - 6/30/22	\$60,654
MILLER, JOY	TEACHER	7/1/21 - 6/30/22	\$28,792
MARKS, CAROLINE	TEACHER	7/1/21 - 6/30/22	\$60,700

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$3,500
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
9/29/22	AMAZON.COM	119582	\$280
9/15/22	AMAZON.COM	119701	\$78
9/22/22	AMAZON.COM	119763	\$784
9/19/22	AMAZON.COM	119762	\$2,266
9/22/22	AMAZON.COM	119763	\$14
9/22/22	AMAZON.COM	119763	\$22
9/22/22	AMAZON.COM	119763	\$56



PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$2,628
Encumbrance Date	Name of BOCES	Check or Journal Entry #	Amount Expended
8/12/2020	BROOME TIOGA BOCES	9883519	\$2,628

**FINAL EXPENDITURE SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$366,429
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	\$3,500
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	\$2,628
Minor Remodeling	30	
Equipment	20	
Grand Total		\$372,557

**LOCAL AGENCY INFORMATION**

Agency Code: **031601060000**

Project #: **5890-21-0195**


Contract #: \_\_\_\_\_

Agency Name: Vestal Central School District

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

Approved Budget Total: \$ **372,732**

**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).

10/27/22   
 Date Signature

Jeffrey Ahearn, Superintendent  
 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 \_\_\_\_\_