

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:	ARP-ESSER 1% STATE-LEVEL RESERVE SUMMER LEARNING	
Report Prepared By:	ERIK WINARSKI / LORI PRINZ	
Agency Name:	BYRON BERGEN CENTRAL SCHOOL DISTRICT	
Mailing Address:	6917 WEST BERGEN ROAD	
	Street	
	BERGEN	14416
	City	Zip Code
Telephone # of Report Preparer:	(585) 494-1220	County: GENESEE
E-mail Address:	lprinz@bbschools.org	

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			\$67,649
Name	Position Title	Beginning and End Dates of Work	Salary Paid
BACK, JENNIFER	COORDINATOR	7/5/22 - 8/19/22	\$5,688
CAMPBELL, GRACE	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,741
CARNEY, JENNA	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,604
CARSON, DANIELLE	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,193
DODSON, COLLETTE	SUMMER TEACHER	7/5/22 - 8/19/22	\$1,097
FEISSNER, SHANA	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,056
GARDNER, AYN	SUMMER TEACHER	7/5/22 - 8/19/22	\$1,508
GOLINO-SMITH, JESSICA	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,193
GROPP, KENNETH	SUMMER TEACHER	7/5/22 - 8/19/22	\$548
HUME, ABBEY	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,015
HUNT, EVELYN	SUMMER TEACHER	7/5/22 - 8/19/22	\$686
JOHNSON, PAMELA	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,741
KAERCHER, KAITLYN	COORDINATOR	7/5/22 - 8/19/22	\$7,587
LUKSCH, TIFFANY	SUMMER TEACHER	7/5/22 - 8/19/22	\$1,507
MACKENZIE, SARA	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,290
MEISTER, ILIANA	SUMMER TEACHER	7/5/22 - 8/19/22	\$822
PAINTING, HEATHER	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,152
PATMORE, PAMELA	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,152
PENEPENT, LAURIE	SUMMER TEACHER	7/5/22 - 8/19/22	\$686
RIVERA, JEANNE	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,056
ROGOYSKI, KENNETH	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,289
SLOCUM, DEBORAH	SUMMER TEACHER	7/5/22 - 8/19/22	\$686
SPENCE, PETER	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,173
STEVENS, NATHANIEL	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,173
TALLMAN, LAURENCE	SUMMER TEACHER	7/5/22 - 8/19/22	\$3,015
TARDY, ALLISON	SUMMER TEACHER	7/5/22 - 8/19/22	\$1,508
TARDY, MIRIAM	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,193
VICK, TERRENCE	SUMMER TEACHER	7/5/22 - 8/19/22	\$1,097
WALTERS, BRENDA	SUMMER TEACHER	7/5/22 - 8/19/22	\$2,193

SALARIES FOR SUPPORT STAFF

Subtotal - Code 16			\$21,345
Name	Position Title	Beginning and End Dates of Work	Salary Paid
DAVALOS, DAWN	COORDINATOR	7/5/22 - 8/19/22	\$9,201
DELORENZO, MICHAEL	DRIVER	7/5/22 - 8/19/22	\$620
EVANS, NOMA	DRIVER	7/5/22 - 8/19/22	\$4,467
GONYEA, CAROL	DRIVER	7/5/22 - 8/19/22	\$2,922
HARTER, RICHARD	DRIVER	7/5/22 - 8/19/22	\$566
HUMPHREY, GREGORY	DRIVER	7/5/22 - 8/19/22	\$2,044
JOHNSON II, JOHN	DRIVER	7/5/22 - 8/19/22	\$111
JORDAN JR., ELWOOD	DRIVER	7/5/22 - 8/19/22	\$1,414

PURCHASED SERVICES			
Subtotal - Code 40			\$39,960
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended
7/8/22	GILLIAM GRANT COMMUNITY CENTER	400353	\$39,960

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$1,391
Purchase Order Date	Vendor	Check or Journal Entry #	Amount Expended
8/5/22	AMAZON	400350	\$98
8/19/22	AMAZON	400351	\$31
9/2/22	WALMART	400352	\$67
9/23/22	AMAZON	400356	\$165
10/7/22	ROBONATION, INC.	400357	\$194
10/21/22	AMAZON	400362	\$836

Employee Benefits

Subtotal - Code 80			\$8,819
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement			
Employee Retirement			
Other Retirement			
Social Security			\$8,819
Worker's Compensation			
Unemployment Insurance			
Health Insurance			
Other(Identify)			

FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$67,649
Support Staff Salaries	16	\$21,345
Purchased Services	40	\$39,960
Supplies and Materials	45	\$1,391
Travel Expenses	46	
Employee Benefits	80	\$8,819
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$139,164

LOCAL AGENCY INFORMATION			
Agency Code:	180701040000		
Project #:	5882-21-1005		
Contract #:			
Agency Name:	BYRON-BERGEN CENTRAL SCHOOL DISTRICT		
Funding Dates:	3/13/2020	TO	9/30/2024
Approved Budget Total:	\$ 139,164		

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			
Fiscal Year	Amt Expended	Final Payment	Line #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____		_____	
Voucher #		Final Payment	

Finance: Logged _____ Approved _____ MIR _____