

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

Funding Source: ARP-IDEA Section 611 F2200 Report Prepared By: Mary Ann Exler Agency Name: Rush-Henrietta Central School District Mailing Address: 2034 Lehigh Station Road				
Agency Name: Rush-Henrietta Central School District Mailing Address: 2034 Lehigh Station Road	3			
Mailing Address: 2034 Lehigh Station Road	Mary Ann Exler			
Chanak	Mailing Address: 2034 Lehigh Station Road			
Street				
Henrietta NY 1446				
City State Zip Co	de			
Telephone # of Report Preparer: (585) 359-5033 County: MONROE				

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 use 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 PRO		
Subtotal - Code 15		\$220,635	
Name	Position Title	Beginning and End Dates of Work	Salary Paid
Alexis Paccapaniccia	Special Ed Teacher	07/01/2022-06/30/2023	\$49,613
Lorrie Stutzman	Special Ed Teacher	07/01/2022-06/30/2023	\$52,478
Brittany Wood	Special Ed Teacher	07/01/2022-06/30/2023	\$42,733
Michelle Metallo	Special Ed Teacher	07/01/2022-06/30/2023	\$22,181
Amy Vaughn	Special Ed Teacher	07/01/2022-06/30/2023	\$53,630

	PURCHASED SER	VICES	
	The second secon	Subtotal - Code 40	\$48,374
Encumbrance Date	Provider of Service	Check or Journal Entry #	Amount Expended
09/15/22	Clinical Assoc of the Finger Lakes	063769	\$5,977
09/15/22	CP Rochester	063770	\$2,919
09/15/22	Happiness House	063772	\$2,50
09/15/22	Rochester Hearing & Speech Ctr	063776	\$13
09/15/22	Rochester School for the Deaf	063777	\$7,50
09/15/22	Norman Howard School	063775	\$2,50
9/15/22	School of the Holy Childhood	063778	\$83
9/15/22	Libety Resources POST	063774	\$1,66
9/15/22	Hillside Children's Center	063808	\$2,08
09/15/22	Bright Start Pediatrics	063886	\$4,30
09/15/22	Mary Cariola Children's Center	063888	\$9,17
09/15/22	Rochester Childfirst Network	063891	\$41
9/15/22	The Kessler Center	063893	\$83
12/13/22	Private Parentally Placed Reserve	JE0141-23	\$7,50
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	Employee Benefits		
	\$26,87		
Benefit	Salaries (from codes 15 and 16)	Rate	Amount Expended
Teacher Retirement	\$220,635.00	10.29%	\$9,992
Employee Retirement	1021	11.60%	
Other Retirement			
Social Security	\$220,635.00	7.65%	\$16,879
Worker's Compensation			
Unemployment Insurance			
Health Insurance	¥4.63		
Other(Identify)			

FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS	LOCAL AGENCY INFORMATION
Professional Salaries	15	\$220,635	Agency Code: 261701060000
Support Staff Salaries	16		
Purchased Services	40	\$48,374	Project #: 5533-22-0385
Supplies and Materials	45		
Travel Expenses	46		Contract #:
Employee Benefits	80	\$26,871	Agency Name: Rush-Henrietta Central School District
Indirect Cost	90		Funding Dates: 7/1/2021 TO 9/30/202
BOCES Services	49		Approved Budget Total: \$ 295,880
Minor Remodeling	30		
Equipment	20		
Grand Total \$295,880		\$295,880	FOR DEPARTMENT USE ONLY

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).

Dr Barbara Mullen, Superintendent
Name and Title of Chief Administrative Officer

Signature

FOR DEPARTMENT USE ONLY			
Fiscal Year	Amt Expended	Final Payment Line	<u>#</u>
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			_
Voucher #		Final Payment	

Finance:	Logged	Approved	MIR
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Date