# 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	ı
- Required Field	,

	Local Agend	y Information	
Funding Source:	American Rescue Plan (ARP) - ESSER 1% State- E: Level Reserve - Comprehensive After School		
Report Prepared By:	Christopher Slesinski		
Agency Name:	Florida Union Free Sch	ool District	
Mailing Address:	51 N. Main Street., PO		
		Street	
	Florida	NY	10921
	City	State	Zip Code
Telephone # of 845-651-3095 ext. 40030		County: Orar	nge
E-mail Address:	cslesi	nski@floridaufsd.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/.

	\$36,341		
Name	Position Title	Beginning and End Dates of Work	Salary Paid
JILL DAWYDKO	TEACHER	9/1/22 - 6/30/23	\$488
DARREN FOGARTY	TEACHER	9/1/22 - 6/30/23	\$976
DARA GARRISON	TEACHER	9/1/22 - 6/30/23	\$3,072
JOHN KING	TEACHER	9/1/22 - 6/30/23	\$3,904
ROBERT MOON	TEACHER	9/1/22 - 6/30/23	\$3,468
JOE O'CONNOR	TEACHER	9/1/22 - 6/30/23	\$3,072
BRIAN SLEVIN	TEACHER	9/1/22 - 6/30/23	\$488
STEPHANIE AMOROSANA	TEACHER	9/1/23 - 6/30/24	\$297
WENDY ANDERSON	TEACHER	9/1/23 - 6/30/24	\$198
FRANK GANNON	TEACHER	9/1/22 - 6/30/24	\$99
DARA GARRISON	TEACHER	9/1/22 - 6/30/24	\$3,660
NATALIE GRIFFIN	TEACHER	9/1/23 - 6/30/24	\$198
JOHN KING	TEACHER	9/1/23 - 6/30/24	\$6,298
LYNN MCGOVERN	TEACHER	9/1/23 - 6/30/24	\$3,660
JOE MONTEMARANO	TEACHER	9/1/23 - 6/30/24	\$165
ROBERT MOON	TEACHER	9/1/23 - 6/30/24	\$3,050
JOE O'CONNOR	TEACHER	9/1/23 - 6/30/24	\$3,050
STEPHAN PETRISKO	TEACHER	9/1/23 - 6/30/24	\$198

	Subtotal - Code 16	\$1,223	
Name	Position Title	Beginning and End Dates of Work	Salary Paid
MICHELLE FROMMER	NURSE	9/1/22 - 6/30/23	\$1,223
	= -		

	SUPPLIES AND	MATERIALS	
		Subtotal - Code 45	\$17,168
Purchase Order Date	Vendor	Check or Journal Entry#	Amount Expended
8/23/24	Bump Armor	25735 \$1	

## FINAL EXPENDITURE SUMMARY

SUBTOTAL	CODE	PROJECT COSTS	LO	CAL AGENCY	/ INFOR	OITAN
Professional Salaries	15	\$36,341	Agency Code:	442	11502000	00
Support Staff Salaries	16	\$1,223				
Purchased Services	40		Project #:	5883-2	1-2300	
Supplies and Materials	45	\$17,168				_
Travel Expenses	46		Contract #:			
Employee Benefits	80		Agency Name: F	lorida Union Fre	e School I	District
Indirect Cost	90		Funding Dates:	9/1/2021	то	9/3
BOCES Services	49		Approved Budget	Total: \$ 100,00	02	
Minor Remodeling	30					
Equipment	20					
Gran	nd Total	\$54,732	FC	OR DEPARTM	ENT USE	ONLY

F	OR DEPARTMEN	T USE ONLY
Fiscal Year	Amt Expended	Final Payment Line #
Voucher	#	Final Payment

9/30/2024

## 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).

Signature Date

Name and Title of Chief Administrative Officer

Finance: Logged\_\_\_\_\_

Approved\_

MIR\_\_\_