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The University of the State of New York
THE STATE EDUCATION DEPARTMENT

JUN 21 2024

PROPOSED AMENDMENT FOR A
FEDERAL OR STATE PROJECT

Berlin Central School District FS-10-A (03/15)
Business Office

Date Received
MAY 15 2024
Office of Accountability

= Required Field

Agency Name:	Berlin Central School District	Rensselaer
Mailing Address:	PO Box 259	County
	Berlin, NY 12022	

Agency Code:	490101040000	Amendment #:	001
Project Number:	5218-21-2470		
Contract #:			
Contact Person:	Tara Fisher	Tel:	518-658-1500, Option 8, Ext 1022
E-mail Address:	tfisher@berlincentral.org		

INSTRUCTIONS

- Submit the original and two copies directly to the same State Education Department office where budget was mailed. DO NOT submit this form to Grants Finance.
- This form need only be submitted for budget changes that require prior approval as follows:
 - Personnel positions, number and type
 - Equipment items having a unit value of \$5,000 or more, number and type
 - Minor remodeling
 - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent or \$1,000, whichever is greater
 - Any increase in the total budget amount.
- Amendment # at top of this page must be completed.
- If extra room is needed for explanations, expand the rows using the row breaks on the left.
- Do not use the FS-10-A for requesting a project extension.

CHIEF ADMINISTRATOR'S CERTIFICATION

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, & accurate, & the expenditures, disbursements, & cash receipts are for the purposes & objectives set forth in the terms & 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: 5.10.2024 Signature: [Handwritten Signature]

FOR DEPARTMENT USE ONLY

Program Approval:	Kathleen Peart	Date:	6/7/2024
Finance:	6/13/24 ^{cc}	6/13/24 ^H	
	Logged	Approved	

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SUBTOTAL	EXPLANATION (Provide same detail as required in ES-10 Budget)	SUBTOTAL INCREASE	SUBTOTAL DECREASE
15- Professional Salaries	Change position title from Teachers to Homeless Liasons	\$5,000	\$5,000
16- Support Staff Salaries	Change Position title from Social Worker to Registrar	\$2,000	\$2,000
40- Purchased Services			
45- Supplies & Materials			
46- Travel Expenses			
80- Employee Benefits			
90- Indirect Cost			
49- Boces Services			
30- Minor Remodeling			
20- Equipment			
ENTER BUDGET >	Total Increase or Decrease:	(+)\$ 7,000	(-)\$ 7,000
	Net Increase or Decrease:	\$ 0	
	Previous Budget Total:	\$ 7,662	
	Proposed Amended Total:	\$ 7,662	