

= Required Field

Local Agency Information		
Funding Source:	<input type="text" value="ESSER"/>	<input type="text"/>
Report Prepared By:	<input type="text" value="Brett Gallini"/>	
Agency Name:	<input type="text" value="Great Oaks Charter School - New York City"/>	
Mailing Address:	<input type="text" value="38 Delancey Street"/>	
	<input type="text" value="Street"/>	
	<input type="text" value="New York"/>	<input type="text" value="NY"/>
	<input type="text" value="10002"/>	
	<input type="text" value="City"/>	<input type="text" value="State"/>
		<input type="text" value="Zip Code"/>
Telephone # of Report Preparer:	<input type="text" value="(646)279-2616"/>	County: <input type="text" value="Manhattan"/>
E-mail Address:	<input type="text" value="bgallini@greatoakscharter.org"/>	
Project Funding Dates:	<u>7/1/2020</u>	<u>6/30/2021</u>
	Start	End

INSTRUCTIONS
<ul style="list-style-type: none"> ● Submit the original FS-10 Budget and the required number of copies along with the completed application directly to the appropriate State Education Department office as indicated in the application instructions for the grant program for which you are applying. DO NOT submit this form to Grants Finance. ● The Chief Administrator’s Certification on the Budget Summary worksheet must be signed by the agency’s Chief Administrative Officer or properly authorized designee. ● An approved copy of the FS-10 Budget will be returned to the contact person noted above. A window envelope will be used; please make sure that the contact information is accurate and confined to the address field without altering the formatting. ● For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at http://www.oms.nysed.gov/cafe/guidance/.

PURCHASED SERVICES

Subtotal - Code 40			\$78,735
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Support to students such as mental health support, technological support	Partnership with Children		\$15,000
Contractual: School Based Coaching, Onsite Summer Institute, Curriculum planning ELA and Math, trainings for teacher and building AmeriCorps Fellow skills	Lavinia		\$63,735

SUPPLIES AND MATERIALS

Subtotal - Code 45			\$10,000
Description of Item	Quantity	Unit Cost	Proposed Expenditure
COVID-19 related cleaning and PPE supplies (i.e. student face masks, disinfecting wipes)			\$10,000

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	
Support Staff Salaries	18	
Purchased Services	40	\$78,735
Supplies and Materials	45	\$10,000
Travel Expenses	48	
Employee Benefits	50	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$88,735

Agency Code:	110100861088
Project #:	5890214988
Contract #:	
Agency Name:	Great Oaks Charter School - NYC

FOR DEPARTMENT USE ONLY		
Funding Dates:	From _____	To _____
Program Approval:	_____ Date: _____	
Fiscal Year	First Payment	Line #

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 3726-3730 and 3801-3812).

Date
Signature

Brett Gallini, Executive Director

Name and Title of Chief Administrative Officer