

= Required Field

|                  |                                   |        |
|------------------|-----------------------------------|--------|
| Agency Name:     | BETHLEHEM CENTRAL SCHOOL DISTRICT | ALBANY |
| Mailing Address: | 700 DELAWARE AVE.                 | County |
|                  | DELMAR, NY 12054                  |        |

Agency Code:  Amendment #:

Project Number:

Contract #:

Contact Person:  Tel:

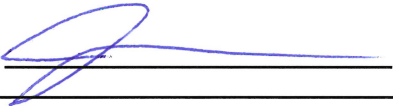
E-mail Address:

**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: April 6, 2023 Signature: 

**FOR DEPARTMENT USE ONLY**

Program Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Finance:

Logged Approved

| SUBTOTAL                    | EXPLANATION<br>(Provide same detail as required in<br>FS-10 Budget)    | SUBTOTAL<br>INCREASE | SUBTOTAL<br>DECREASE |     |            |
|-----------------------------|--|----------------------|----------------------|-----|------------|
| 15 - Professional Salaries  |  |                      |                      |     |            |
| 16 - Support Staff Salaries |  |                      |                      |     |            |
| 40 - Purchased Services     |  |                      |                      |     |            |
| 45 - Supplies & Materials   | Purchase classroom furniture to outfit special<br>education classrooms | \$181,000            |                      |     |            |
| 46 - Travel Expenses        |  |                      |                      |     |            |
| 80 - Employee Benefits      |  |                      |                      |     |            |
| 90 - Indirect Cost          |  |                      |                      |     |            |
| 49 - Boces Services         |  |                      |                      |     |            |
| 30 - Minor Remodeling       | Decreased need for capital project work                                |                      | \$181,000            |     |            |
| 20 - Equipment              |  |                      |                      |     |            |
| <b>ENTER BUDGET &gt;</b>    | Total Increase or Decrease:  | (+)                  | \$ 181,000           | (-) | \$ 181,000 |
|                             | Net Increase or Decrease:  | \$ 0                 |                      |     |            |
|                             | Previous Budget Total:   | \$ 3,595,713         |                      |     |            |
|                             | Proposed Amended Total:  | \$ <b>3,595,713</b>  |                      |     |            |