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)

Local Agency Information							
Funding Source:	CARES Act ESSER						
Report Prepared By:	Bryson Wilson						
Agency Name:	Brooklyn RISE Charter School						
Mailing Address:	475 53rd St, 2nd Fl						
	Street						
	Brooklyn	NY		11220			
	City	State	Z	Zip Code			
Telephone # of (917)	627-0398	County:	Kings				
E-mail Address:	bwilson@edtec.com						

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/.

SALARIES FOR PROFESSIONAL STAFF								
	\$26,419							
Name	Position Title	Beginning and End Dates of Work	Salary Paid					
Amanda Martell	Social Worker	7/1/20-6/30/21	\$26,419					

FINAL EXPENDITURE SUMMARY

		FINAL EX	PENDITURE SU	JIVIIVIARY		
SUBTOTAL	CODE	PROJECT COSTS	LOCAL AGENCY INFORMATION			
Professional Salaries	15	\$26,419	Agency Code:	331500861156		
Support Staff Salaries	16					
Purchased Services	40		Project #:	5890-21-5525		
Supplies and Materials	45					_
Travel Expenses	46		Contract #:			
Employee Benefits	80		Agency Name:			
Indirect Cost	90		Funding Dates:	3/13/2020	TO 9/3	30/2022
BOCES Services	49		Approved Budge	t Total: \$ 26,419		
Minor Remodeling	30					
Equipment	20					
Grand Total \$26,419			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).		Fiscal Year	Amt Expended	Final Payn	nent Line#	
Date	Sigi	nature				
Name and Title of Chief Administrative Officer		Voucher #		Final Payment		
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Finance: Logged_____ Approved____ MIR____