## NEW YORK STATE

## CONSOLIDATED FISCAL REPORT

For the Period: July 1, 2010 to June 30, 2011

SCHEDULE CFR-6 GOVERNING BOARD AND COMPENSATION SUMMARY

Page \_\_\_\_

				AGENCY CODE:			SCHOOL CODE (SED ONLY):				
<ol> <li>Do any employees of your agency also serve on the governing authority?YESNO If "YES", provide detail of the employee name and position title.</li> <li>List the names of all individuals who receive compensation as Board Officers, Members of the Board of Directors or Board Trustees:</li> </ol>											
A	NAME	AME AMOUNT PAID CONTRACTED AME AMOUNT PAID		FRINGE <u>BENEFITS</u>	OTHER <u>BENEFITS **</u>	TOTAL COMPENSATION					
B C D											
E 3. List the five highest paid employees whose total annualized salary and contracted payment amount (column 7) is in excess of \$75,000 per year AND <u>ALL</u> employees whose total annualized salary and contracted payment (column 7) is in excess of \$125,000 per year.											
<u>ALL</u> e	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)		
	NAME	POSITION TITLE CODE *	AMOUNT <u>PAID</u>	<u>FTE</u>	ANNUALIZED <u>SALARY</u>	CONTRACTED PAYMENT <u>AMOUNT</u>	TOTAL ANNUALIZED SALARY AND CONTRACTED <u>PAYMENT</u>	FRINGE <u>BENEFITS</u>	OTHER <u>BENEFITS **</u>		
A							·		<u> </u>		
C			·				·				
E			·								
4. List the five highest paid independent contractors (individual or firm) that received payments in excess of \$50,000.											
	<u>NAME</u>			TYPE OF SERVICE		AMOUNT PAID					
A B.											
C.						_					
E.						_					
	er of additional employees		-								
** Cash	<ul> <li>If an individual is reported under more than one position title code on CFR-4, please check the box in column 2.</li> <li>Cash value of awards, rewards, loans or other benefits made in lieu of, or in addition to, monetary compensation or regular fringe benefits.</li> <li>Regular fringe benefits are received by all classes or categories of employees. (e.g.: Payroll Taxes)</li> </ul>										
B C D E 4. List th A B C E 5. Numb * If an ir ** Cash	he five highest paid indepe (1) <u>NAME</u> er of additional employees ndividual is reported unde value of awards, rewards,	TITLE CODE *	PAID PAID (2) TYPE OF S Salary and/or con ition title code or its made in lieu o	that received p SERVICE tracted paymer of CFR-4, please of, or in additior	SALARY SALARY Sayments in excess of (3) AMOUNT PAID Comparison Amount is in excess check the box in conto, monetary compo	PAYMENT <u>AMOUNT</u>	SALARY AND CONTRACTED PAYMENT	<u>BENEFITS</u>	BENEFITS **		