

SUBMIT COPIES (AS APPLICABLE)

- a. General Allocation Notice
- b. Publication and form 910b-5 for increase over \$1,000 in Operational (non-categorical)

**STATE OF NEW MEXICO  
DEPARTMENT OF EDUCATION  
300 DON GASPAR  
SANTA FE, NM 87501-2786**

**BUDGET ADJUSTMENT REQUEST**

Fiscal Year 2023-2024

ADJUSTMENT CHANGES INTENT/SCOPE OF PROGRAM YEAS OR NO    M YES OR NO    No

**FLOWTHROUGH ONLY**

BUDGET PERIOD <u>July 1, 2023</u> TO <u>June 30, 2024</u>
A. CARRYOVER _____
B. TOTAL CURRENT YEAR ALLOCATION _____
C. ADMINISTRATIVE POOL ALLOCATION _____
TOTAL FUNDING AVAILABLE: _____

DOC. ID: <u>65-24-65</u>
FED. TAX ID.: <u>85-6000-130</u>
Please Identify One:
<input type="checkbox"/> General Fund/Capital Outlay/Debt
<input type="checkbox"/> Direct Grant
<input checked="" type="checkbox"/> Flowthrough <u>24189</u>
(Program of Adm.)
Name <u>Student Supp Academic</u>
SELECT ONE:
<input type="checkbox"/> INITIAL BUDG. (Flowthrough)
<input type="checkbox"/> INCREASE
<input checked="" type="checkbox"/> DECREASE
<input type="checkbox"/> TRANSFER
<input type="checkbox"/> MAINTENANCE

ENTITY NAME: FARMINGTON MUNICIPAL SCHOOLS  
 CONTACT: Colton McClanahan TELEPHONE: (505) 324-9840  
 TOTAL APPROVED BUDGET (Flowthrough) \_\_\_\_\_

ROUND TO THE NEAREST DOLLAR

REVENUE AND FUND CODE	FUNCTION/OBJECT EXPENDITURE		DESCRIPTION	PRESENT BUDGET	AMOUNT OF ADJUSTMENT	ADJUSTED BALANCE	ADDL FTE
	FROM	TO					
44500	1000.55817		Student Travel	\$6,000.00	(\$2,423.00)	\$3,577.00	
24189						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
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						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
				SUB TOTAL	(\$2,423.00)		Total FTE
				INDIRECT COST	\$0.00		
				TOTAL	(\$2,423.00)		

Compliance with Section 10-15-1 and 22-8-12 NMSA, 1978 Compilation:  
 A. The requested budget changes were authorized at a scheduled Board of Education meeting open to the public on: 3/19/24  
 B. Justification for the transfer: Explanation such as "underbudgeted", "insufficient budget", or "needed to close out Project" ARE NOT ACCEPTABLE. Attach additional sheets of necessary.

<table style="width: 100%;"> <tr> <th style="width: 30%;">FUNCTION/OBJ</th> <th>JUSTIFICATION</th> </tr> <tr> <td>_____</td> <td><u>FY24 Final C26Award and FY21 Carryover</u></td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>	FUNCTION/OBJ	JUSTIFICATION	_____	<u>FY24 Final C26Award and FY21 Carryover</u>	_____	_____	_____	_____	_____	_____	<table style="width: 100%;"> <tr> <th style="width: 30%;">FUNCTION/OBJ</th> <th>JUSTIFICATION</th> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>	FUNCTION/OBJ	JUSTIFICATION	_____	_____	_____	_____	_____	_____	_____	_____
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SCHOOL DISTRICT CERTIFICATION				SDE APPROVAL			
SUPERINTENDENT	DATE	ANALYST	PROGRAM DIRECTOR	DATE	DATE	DATE	DATE
_____	_____	_____	_____	_____	_____	_____	_____
FISCAL OFFICER	DATE		AGENCY SPPORT/SCHOOL BUD.	DATE			DATE
_____	_____		_____	_____			_____