a. Genera	1 COPIES (AS APPLICALBL al Allocation Notice ation and form 910b-5 for	E)	STATE OF NEW MEXICO DEPARTMENT OF EDUCATION 300 DON GASPAR SANTA FE, NM 87501-2786			65-24-83 85-6000-130 Please Identity One: General Fund/Capital Outlay/Debt			
increase of	ocer \$1,000 in		BUDGET ADJUSTMENT REQUEST		XX Direct Grant				
	nal (non-catagorical)					25131			
	TMENT CHANGES INT THROUGH ONLY	ENT/SCOPE OF PF	ROGRAM YES OR NO	No	(Program of Adm.) NAME: Johnson O'Malley				
		July 1, 2023	June 30	, 2024		(Local Board Only)			
	RYOVER AL CURRENT YEAR	ALLOCATION			INITIAL BUD	G. (Flowthrough)			
	IINISTRATIVE POOL		L FUNDING AVAILABLE:		XX INCREASE DECREASE TRANSFERS MAINTENAN				
ENTITY CONTA	NAME:	Phyllis Timme	FARMINGTON MUNICIPAL SCHOOLS TELEPHONE: ((505) 324-9840					
	APPROVED BUDGE			· · · · ·					
REVEN			ROUND TO THE NEAREST						
AND FUND	EXPEND FROM	ITURE TO	DESCRIPTION	PRESENT BUDGET	AMOUNT OF ADJUSTMENT		ADD'L FTE		
1 4151			acher Salary (1411)	\$5,000.00					
2 2513		ER		450.00					
3	1000.52112411		A Health	\$75.00	, ,				
4	1000.52112411	FIC		\$170.00	, ,	\$ -			
5	1000.52210411		dicare	\$50.00		\$ -			
5 6	1000.52220411		dent Travel	30,000.00	, ,	\$ -			
7	1000.55817		oplies/Materials	\$50,000.00		\$ -			
			oport Travel	\$10,000.00	, , ,	\$ -			
8	2100.55813		oport Supplies/Materials	15,000.00		\$ -			
9	2100.56118		· · · ·		, , , ,				
10	2100.51100214		tive Am. Youth Advisor Salary (1214		, , , ,				
11	2100.51100217		cretary (1217)	\$5,000.00	· · · · · · · · · · · · · · · · · · ·				
12	2100.52111214	ER		\$9,000.00	,				
13	2100.52112214		A Health	\$2,000.00	,	\$ -			
14	2100.52210214	FIC		\$3,500.00					
15	2100.52220214		dicare	\$1,000.00		\$ -			
16	2100.52311214		alth Insurance	\$3,000.00		\$ -			
17	2100.52312214		/ERISA	\$200.00	, ,	\$ -			
18	2100.52313214	Der		\$300.00	, ,				
19	2100.52314214	Visi		\$100.00					
20	2100.52315214	Disa	ability	\$200.00	, ,	\$ -			
21	2100.52710214	Wo	rkman's Comp Premium	\$800.00					
22	2100.52720214	Wo	rkman's Comp Fee	\$75.00) (75.00)				
23	2100.52500214	500214 Unemployment Insurance		\$100.00) (100.00)	\$ -			
24									
25									
26									
27									
28									
29									
Complian	ce with Section 10-15-I and	22-8-12 NMSA, 1978 (Compilation:	SUB TOTA	(194,020.00)	Total FTE			
A. The red	A. The requested budget/changes were authorized at a scheduled			INDIRECT COS	ST				
Board of I	Education meeting open to	the public on:	4/9/24	TOTA	(194,020.00)				
Project"	ARE NOT ACCEPTABLE	E. Attach additional sh	neets of necessary.		•	J			
FUN	NCTION/OBJ		JUSTIFICATION		FUNCTION/OBJ	JUSTIFICATION			
		Decrease App	roved Budget for SY23-24 for 41510 Revenue Code						
		SCHOOL DISTR	RICT CERTIFICATION	F	SDE APPROVAL				
SUPERI	NTENDENT		DATE	ANALYST PR	OGRAM DIRECTOR	DATE			
FISCAL	OFFICER		DATE	AG	ENCY SPPORT/SCHOOL BUD.	DATE			

	PAGE 2				DEPARTMENT OF EDUCATION			DOC. ID: FED. TAX ID	65-24-83 : 85-6000-130 Please Identify One:			
	a. General Allo	IES (AS APPLICALB ocation Notice and form 910b-5 for	LE)	300 DON GASPAR SANTA FE, NM 87501-2786				d/Capital Outlay/Debt				
	increase ocer			BUDG	ET ADJUSTMENT REG	UEST		XX	Direct Grant			
		. .				2024 Io	-		Flowthrough	25131		
-	FLOWTHROUGH ONLY							NAME:	Johi	rogram of Adm.) nson O'Malley		
	BUDGET PERIOD July 1, 2023 June 30, 2024 A. CARRYOVER							SELECT ON		Local Board Only)	_	
		CURRENT YEAR							INITIAL BUD	G. (Flowthrough)		
	0.700101110			TOTAL FUNDING AVAILABLE:				XX	DECREASE	5		
	ENTITY NA	ME:		FARMINGTON MUNICIPAL	SCHOOLS		_		MAINTENAN	ICE		
	CONTACT:		Phyllis Timme	TEL		324-9840	•	.			_	
	REVENUE				TO THE NEAREST DOLL/	AR	•	1			1	
	AND	EXPEN				PRESEN			JNT OF	ADJUSTED	ADD'L	
	FUND	FROM	TO	DESCRIPTI		BUDGE				BALANCE	FTE	
1	25131	2300.51100114		Admin. Assistant Salary	(1114)	\$10,000		(1	10,000.00)	\$ -		
2		2300.52111114		ERA		1,750			(1,750.00)	\$ -		
3		2300.52112114		ERA Health		\$270 \$650			(270.00)	\$ - \$ -		
4		2300.52210114		FICA Medicare		\$650 \$170			(650.00)	4		
5 6		2300.52220114		Medicare Health Insurance		\$170 \$270			(170.00) (270.00)	<u>\$</u> - \$-		
6 7		2300.52311114 2300.52312114		Life/ERISA			.00		(270.00)	\$ -		
7 8		2300.52312114 2300.52313114		Dental		\$125			(125.00)	\$ -		
о 9		2300.52313114 2300.52314114		Vision			.00		(40.00)	\$ -		
9 10		2300.52314114 2300.52710114		Workman's Comp Premiu	m	\$200			(40.00)	\$ -		
10		2300.52710114		Workman's Comp Fee	11	\$200			(200.00)	\$ -		
12		2300.52500114		Unemployment Insurance			.00		(30.00)	\$ -		
13		2300.55813		Employee Travel - Non-Te	acher	\$28,453		(28,453.29)	\$ -		
14		2300.33013				φ20,400	.20	(20,433.237	Ŷ		
15												
16												
17												
18												
19												
20												
21												
22												
23												
24												
25												
26												
27												
28												
29												
	Compliance with Section 10-15-I and 22-8-12 NMSA, 1978 Compilation:				SUB TOTAL		∟ (42,053.29)		Total FTE			
	A. The requested budget/changes were authorized at a scheduled					INDIRECT COST						
	Board of Educ	ation meeting open t	o the public on:	4/9/24		тс	DTAL	. (2	36,073.29)			
	Project" ARE	NOT ACCEPTABL	E. Attach addit	ional sheets of necessary.								
i	FUNCTI	ON/OBJ	Deeree	JUSTIFICATION			FL	JNCTION/OBJ		JUSTIFICATION		
			Decrea	se Approved Budget for SY23-24 for 41	STO REVENUE CODE							
						•						
	SCHOOL DISTRICT CERTIFICATION					1	Ē		SDE AP	PROVAL		
	SUPERINTE	NDENT			DATE	ANALYST	PRO	GRAM DIRECT	OR	DAT	E	
	FISCAL OFFICER DATE						AGE	AGENCY SPPORT/SCHOOL BUD. DATE				