

BOARD OF TRUSTEES
AGENDA

<input type="checkbox"/> Workshop	<input checked="" type="checkbox"/> Regular	<input type="checkbox"/> Special
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- (A) Report Only Recognition

Presenter(s):

Briefly describe the subject of the report or recognition presentation.

- (B) Action Item

Presenter(s): SAMUEL MIJARES, SUPERINTENDENT
ISMAEL MIJARES, DEPUTY SUPERINTENDENT FOR BUSINESS & FINANCE

Briefly describe the action required.

CONSIDER AND TAKE APPROPRIATE ACTION ON THE REQUEST TO AMEND THE GENERAL FUND AND CAPITAL PROJECTS FUND BUDGETS.

- (C) Funding source: Identify the source of funds if any are required.

RE-ALIGNMENT OF FUNDS; BUDGET REVENUE ESTIMATES AND CARRY FORWARD FUNDS.

- (D) Clarification: Explain any question or issues that might be raised regarding this item.

SEE ATTACHED MEMORANDUM.



EAGLE PASS INDEPENDENT SCHOOL DISTRICT

TO: Samuel Mijares, Superintendent

FROM: Ismael Mijares, Deputy Superintendent for Business & Finance

DATE: November 2, 2023

SUBJECT: *Budget Amendments*

Digitally
signed by
Ismael
Mijares
Date:
2023.11.02
15:28:35
'05'00'


This is the first of three (3) times during the year when principals and directors are allowed to submit budget amendments to transfer funds within their allocation. Attached are the General Fund Budget Amendments submitted by the campuses and departments.

The Budget Amendments also include carry forward funds from prior year and revenue increases in the amount of: \$31,079 for 166-State Bilingual; \$140,280 for 170-Middle Rio Grande-CCPS, \$1,000,000 for 172-State on-Behalf, and \$3,187,938 for 616-Special Projects.



MEMORANDUM

TO: Ismael Mijares,
Deputy Superintendent for Business & Finance

FROM: Jaime H. Gonzalez, 
Bilingual/Gifted and Talented/Fine Arts/Title III, Part A Director

SUBJECT: *Budget Amendment (166) Bilingual Funds*

DATE: September 28, 2023

Attached is a budget change request being submitted to be presented at the next regular school board meeting aligning the 166 Bilingual budget.

Accounts have been adjusted accordingly and a brief summary is listed below.

Should you have any questions or concerns, please contact our office.

Increase in General Supplies
Decrease in Staff Travel, and Control Items

APPROVED:  SEP 28 2023
John Cox,
Deputy Superintendent for Curriculum & Instruction

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 166

STATE BILINGUAL

PAGE 1 OF 1

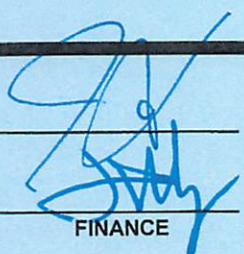
DATE: 10/31/2023

REFERENCE NO. _____

ACCOUNT NUMBER								DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)	
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.						
166	00	3XXX			4	XX	X	XX	BUDGETARY FUND BALANCE	-	(53,473)
166	11	6XXX			4	XX	X	XX	SUPPLIES	+	(53,473)
TOTAL										0.00	

REASON FOR REQUEST: REALIGNMENT OF FUNDS.

ORIGINATOR  10-31-23



 FINANCE

11/1/23
 DATE

10-31-23
 DATE

 SUPERINTENDENT DATE

 BOARD OFFICER DATE

DISAPPROVAL: _____ NAME DATE

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund: 166
STATE BILINGUAL

PAGE 1 OF 1

DATE: 9/25/2023

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.				DESCRIPTION		
166	11	6XXX	XX	XXX	4	XX	X	XX	INSTRUCTIONAL	-	53,000
166	13	6XXX	XX	XXX	4	XX	X	XX	CURRICULUM & INST. STAFF DEV.	+	(3,000)
166	21	6XXX	XX	XXX	4	XX	X	XX	INSTRUCTIONAL LEADERSHIP	+	(50,000)
TOTAL											-

REASON FOR REQUEST: Realignment of Funds

ORIGINATOR

	<u>9/29/23</u>			
	DATE	SUPERINTENDENT	DATE	
FINANCE	<u>11-8-23</u>	BOARD OFFICER	DATE	
	DATE			

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

Life Skills Program for Student Parents

904 Kelso Drive, Eagle Pass, Tx. 78852 (830)758-7019-Office (830)773-6317 - Fax

MEMORANDUM

TO: Samuel Mijares, Superintendent of Schools
FROM: Lizzet Duran, PEP Supervisor LD
DATE: October 4, 2023
RE: CCPS Carry Forward

I am requesting your approval to submit a board agenda item to consider and take appropriate action on the request to appropriate the carry-forward Child Care Provider Services funds in the dollar amount of \$140,280.00.

The EPISD receives fund for child care services provided to school-age parents who meet the eligibility requirements for Child Care Provider Services Local Workforce Development Board Middle Rio Grande Development Council.

Approved by: Mr. Jesus Costilla Date: 10-4-23
Mr. Jesus Costilla, Executive Director for Human Resources

Thank you,

LD/so

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund:170 -MIDDLE RIO GRANDE

PAGE 1 OF 1

DATE: 10/4/23


REFERENCE NO. _____

ACCOUNT NUMBER							DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.				
170	61	63XX	XX	XXX	4	XX XXX	SUPPLIES & MATERIALS	-	72,000
170	61	64XX	XX	XXX	4	XX XXX	OTHER OPERATING EXPENSES	-	68,280
170	00	37XX	XX	XXX	4	XX XXX	FUND DRAWING	+	140,280

REASON FOR REQUEST: TO APPROPRIATE CARRY-FORWARD CHILD-CARE PROVIDER SERVICES FUND

 ^{10/4/23} ORIGINATOR



 FINANCE	DATE <u>10-9-23</u> DATE	_____ SUPERINTENDENT _____ BOARD OFFICER	_____ DATE _____ DATE
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DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 172

TRS CARE ON-BEHALF

PAGE 1 OF 1

DATE: 10/4/2023

REFERENCE NO. _____

ACCOUNT NUMBER								DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)	
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.						
172	00	5XXX			4	XX	X	XX	REVENUE	+	1,000,000
172	11	6XXX			4	XX	X	XX	TRS CARE ON-BEHALF	+	(500,000)
172	36	6XXX			4	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
172	51	6XXX			4	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
172	52	6XXX			4	XX	X	XX	TRS CARE ON-BEHALF	-	500,000
									TOTAL		0.00

REASON FOR REQUEST: REALIGNMENT OF FUNDS.

ORIGINATOR

[Signature] 10-9-23

 DATE 10-9-23
 FINANCE DATE

 SUPERINTENDENT

 DATE

 BOARD OFFICER

 DATE

DISAPPROVAL: _____
 NAME DATE

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____
 NAME DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund: 173-4 EARLY ED

PAGE 1 OF 1

DATE: 10/24/2023

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
173	11	6XXX			4	XX	X	XX	INSTRUCTIONAL	+	(1,200)
173	23	6XXX			4	XX	X	XX	SCHOOL LEADERSHIP	-	1,500
173	33	6XXX			4	XX	X	XX	HEALTH SERVICES	+	(100)
173	61	6XXX			4	XX	X	XX	COMMUNITY SERVICES	+	(200)
									TOTAL		-

REASON FOR REQUEST: To realignment of funds

ORIGINATOR

11-2-23

DATE

SUPERINTENDENT

DATE

FINANCE

11-2-23
DATE

BOARD OFFICER

DATE

DISAPPROVAL:

NAME

DATE

REASON FOR DISAPPROVAL:

PROCESSED BY ACCOUNTING:

NAME

DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 175

MAMA PATROL

PAGE 1 OF 1

DATE: 10/4/2023

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
175	00	3XXX			4	XX	X	XX	BUDGETARY FUND BALANCE	+	305,534
175	52	6XXX			4	XX	X	XX	SALARIES	-	305,534
TOTAL											0.00

REASON FOR REQUEST: TO APPROPRIATE MAMA PATROL FUNDS.

ORIGINATOR

[Signature]
10983


 FINANCE DATE 10-9-23

 SUPERINTENDENT DATE

 BOARD OFFICER DATE

DISAPPROVAL: _____
 NAME DATE

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____
 NAME DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 176

SCHOOL SAFETY

PAGE 1 OF 1


DATE: 11/2/2023

REFERENCE NO. _____

ACCOUNT NUMBER									NOM.	AMOUNT INCREASE/(DECREASE)	
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
176	00	5XXX			4	XX	X	XX	REVENUES	+	400,000
176	00	7XXX			4	XX	X	XX	TRANSFER IN-M&O	+	562,500
176	52	6XXX			4	XX	X	XX	SALARIES	-	962,500
TOTAL										0.00	

REASON FOR REQUEST: TO APPROPRIATE SCHOOL SAFETY FUNDS.

ORIGINATOR

 11-2-23

DATE

7-2-23

DATE

SUPERINTENDENT

DATE

BOARD OFFICER

DATE

DISAPPROVAL:

NAME

DATE

REASON FOR DISAPPROVAL:

PROCESSED BY ACCOUNTING:

NAME

DATE

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

Fund: 199-4 M & O

PAGE 1 OF 1

DATE: 10/16/2023

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
199	11	6XXX			4	XX	X	XX	INSTRUCTIONAL	-	15,000
199	12	6XXX			4	XX	X	XX	INSTRUCTIONAL RESOURCES AND MEDIA	+	(7,000)
199	13	6XXX			4	XX	X	XX	CURRICULUM AND INSTRUCTION STAFF DEV	-	800
199	23	6XXX			4	XX	X	XX	SCHOOL LEADERSHIP	+	(14,800)
199	36	6XXX			4	XX	X	XX	CO-CURRICULAR/EXTRA CURRICULUM	-	6,900
199	51	6XXX			4	XX	X	XX	PLANT MAINTENANCE & OPERATIONS	+	(700)
199	61	6XXX			4	XX	X	XX	COMMUNITY SERVICES	+	(200)
									TOTAL		-

REASON FOR REQUEST: To realign funds in the M & O Fund to continue operations for the 2023-2024 school year.

ORIGINATOR 11-2-23

 11-2-23
 FINANCE DATE

_____ SUPERINTENDENT _____ DATE _____
 _____ BOARD OFFICER _____ DATE _____

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 199

Maintenance & Operations

PAGE 1 OF 1

DATE: 11/2/2023

REFERENCE NO. _____

ACCOUNT NUMBER									DESCRIPTION	NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.						
199	52	6XXX			4	XX	X	XX	SALARIES	+	(562,500)
199	00	8XXX			4	XX	X	XX	TRANSFER OUT-SCHOOL SAFETY	-	562,500
TOTAL										0.00	

REASON FOR REQUEST: REALIGNMENT OF FUNDS.

ORIGINATOR 11-2-23

_____	DATE	SUPERINTENDENT	DATE
	<u>11-2-23</u>	_____	_____
FINANCE	DATE	BOARD OFFICER	DATE

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____

Eagle Pass Independent School District

BUDGET CHANGE REQUEST

FUND: 616

CONST.- SPECIAL PROJECTS

PAGE 1 OF 1

DATE: 11/2/2023

REFERENCE NO. _____

ACCOUNT NUMBER										NOM.	AMOUNT INCREASE/(DECREASE)
FUND	FUNC	OBJ.	SUB- OBJ.	ORG.	PROG.			DESCRIPTION			
616	00	3XXX			4	XX	X	XX	BUDGETARY FUND BALANCE	+	3,187,938
616	81	6XXX			4	XX	X	XX	CONSTRUCTION -SPECIAL PROJECTS	-	3,187,938
TOTAL											0.00

REASON FOR REQUEST: TO APPROPRIATE SPECIAL PROJECTS FUNDS.

ORIGINATOR

	DATE <u>11-2-23</u>	SUPERINTENDENT	DATE
FINANCE	DATE	BOARD OFFICER	DATE

DISAPPROVAL: _____ NAME _____ DATE _____

REASON FOR DISAPPROVAL: _____

PROCESSED BY ACCOUNTING: _____ NAME _____ DATE _____