| PAGE 1 | | STATE OF NEW MEXICO DEPARTMENT OF EDUCATION | | |
|---|----------------|--|-------------------|--|
| SUBMIT COPIES (AS APPLICALBLE) | | 300 DON GASPAR | | |
| a. General Allocation Notice | | SANTA FE, NM 87501-2786 | | |
| B. Publication and form 910b-5 for | | | | |
| increase ocer \$1,000 in | | BUDGET A | DJUSTMENT REQUEST | |
| Operational (non-catagorical) | | | | |
| | | Fiscal Year | 2024-2025 | |
| ADJUSTMENT CHANGES INTENT/ | SCOPE OF PROGR | AM YES OR NO | No | |
| FLOWTHROUGH ONLY | | | | |
| BUDGET PERIOD FROM | July 1, 2024 | TO June 30 | , 2025 | |
| A. CARRYOVER | | | | |
| B. TOTAL CURRENT YEAR ALLOCATION C. ADMINISTRATIVE POOL ALLOCATION | | | | |
| | | | | |
| TOTAL FUNDING AVAI | ABLE: | | | |

| DOC. ID: | | 65-25-77 | | | |
|-----------------|----------------------------------|---------------|--|--|--|
| FED. TAX ID.: | 85-6000-130 | | | | |
| Please Identify | One: | | | | |
| | General Fund/Capital Outlay/Debt | | | | |
| | Direct Grant | | | | |
| х | Flowthrough | 27405 | | | |
| | (Program of Adm.) | | | | |
| Name | SCHOOL BUS CAMERAS | | | | |
| | | | | | |
| SELECT ONE: | | | | | |
| | INITIAL BUDG. | (Flowthrough) | | | |
| | INCREASE | | | | |
| | DECREASE | | | | |
| | MAINTENANC | E | | | |
| | TRANSFERS | | | | |
| | - | | | | |

ENTITY NAME: FARMINGTON MUNICIPAL SCHOOLS CONTACT: Stephany Andrews TELEPHONE: (505) 324-9840 TOTAL APPROVED BUDGET (Flowthrough)

| | | | ROUND TO THE NEAREST D | OLLAR | | | |
|---|-----------------------|-------------------------|------------------------|---------------|-------------|-------------|-------|
| REVENUE | | | | | | | |
| AND FUND | | | | PRESENT | AMOUNT OF | ADJUSTED | ADD'L |
| CODE | FROM | то | DESCRIPTION | BUDGET | ADJUSTMENT | BALANCE | FTE |
| 43202 | | 2700.56119 | SUPPLY ASSETS <\$5K | \$10,000.00 | \$30,000.00 | \$40,000.00 | |
| 27405 | | | | | | \$0.00 | |
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| | | i i | | | | \$0.00 | |
| Compliance with Section 10-15-I and 22-8-12 NMSA, 1978 Compliation: | | SUB TOTAL | \$30,000.00 | Total FTE | | | |
| A. The requested bu | dget/changes were au | thorized at a scheduled | | INDIRECT COST | \$0.00 | 1 | • |
| Board of Education r | neeting open to the p | ublic on: | | TOTAL | \$30,000.00 | 1 | |

B. Justification for the tranfer: Explanation such as "underbudgeted", "insufficient budget", or "needed to close out

Project" ARE NOT ACCEPTABLE. Attach additional sheets of necessary.

| FUNCTION/OBJ | JUSTIFICATION 24-25 INCREASE AWARD | FUNCTION/OBJ | JUSTIFICATION | |
|--------------|---------------------------------------|--------------|---------------|--|
| | | | | |
| | | | | |

| SCHOOL DISTRICT CERTIFICATION | | | SDE APPROVAL | |
|-------------------------------|------|---------|---------------------------|------|
| | | | | |
| SUPERINTENDENT | DATE | ANALYST | PROGRAM DIRECTOR | DATE |
| | | | | |
| FISCAL OFFICER | DATE | | AGENCY SPPORT/SCHOOL BUD. | DATE |