PAGE 1 SUBMIT COPIES (AS APPLICALBLE)				STATE OF NEW MEXICO DEPARTMENT OF EDUCATION 300 DON GASPAR SANTA FE, NM 87501-2786			DOC. ID: 65-24-125			
							FED. TAX	ID.:	85-6000-130	-
							Please Identify One: General Fund/Capital Outlay/Debt			
a. General Allocation Notice B. Publication and form 910b-5 for										
increase ocer \$1,000 in				BUDGET ADJUSTMENT REQUEST			X Direct Grant			
Operational (r	on-catagorical)			E' I V	0000 0004			Etc. d	05445	
ADJUSTMEN	T CHANGES IN	ITENT/SCOPE C	F PROGR	Fiscal Year AM YES OR NO	2023-2024 No	-		_ Flowthrough	25145 (Program of Adn	n.)
FLOWTHROUGH ONLY						-	Name	IMPAC [*]	T AID SPED	,
BUDGET PERIOD July		July 1, 2	2023	TO June 3	0, 2024		Trans	ortation (Loca	l Board Only	
A. CARRY C	VER						SELECT C	NE:		
B. TOTAL CURRENT YEAR ALLOCATION					\$60,480.00			_INITIAL BUD	G. (Flowthro	ough)
C. ADMINISTRATIVE POOL ALLOCATION				\$	-		X	_ INCREASE		
TOTAL FUNDING AVAILABLE:				\$	60,480.00			_DECREASE		
								_MAINTENAN		
								_TRANSFERS	3	
ENITITY () () () ()	_	EADAM OTON								
ENTITY NAM	E:	FARMINGTON	MUNICIPAL	L SCHOOLS						
	•									
CONTACT:		Phyllis Timme		— TELEPHONE: (505) 324-9840					
		•								
TOTAL APPR	OVED BUDGE	T (Flowthrough)	-							
			ROUN	D TO THE NEAR	ST DOLLAR					
REVENUE										
AND FUND					_	PRESENT				ADD'L
CODE	FROM	TO	DE	SCRIPTION	BUDGET		ADJU	ISTMENT	BALANCE	FTE
44301										
25145		2100.56113	Software				\$	59,028.48	\$ 59,028.48	
							<u> </u>			
Compliance w	ith Section 10-1	5-I and 22-8-12	VMSA 197	8 Compilation:	SUB TOT	·ΑΙ	\$	59,028.48	Total FTI	<u> </u>
Compliance with Section 10-15-I and 22-8-12 NMSA, 197 A. The requested budget/changes were authorized at a s					INDIRECT COST		*	\$1,451.52		
Board of Education meeting open to the public on:				6/11/24	TOTAL		\$	60,480.00		
				budgeted", "insuff	cient budget", o	r "ne	*			
		BLE. Attach add		•	,					
•				•						
FUNCTION/OBJ JUST			JUSTIFICA [*]	STIFICATION			CTION/OBJ	JUS	STIFICATION	
			24 Impact Aid Award							
	SCHOOL	N .			SDE APPROVAL					
						Christ	sta Kulidge			
SUPERINTENDENT				DATE:	ANALYST F	PROG	GRAM DIRECTOR DATE			
FISCAL OFFI	CER		_	DATE:	P	AGEN	ICY SPPOR	RT/SCHOOL BI	UD. DATE	