

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

BUDGET ADJUSTMENT REQUEST

Fiscal Year 2024-2025

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

ADJUSTMENT CHANGES INTENT/SCOPE OF PROG M YES OR NO No

FLOWTHROUGH ONLY

BUDGET PERIOD	<u>July 1, 2024</u>	TO	<u>June 30, 2025</u>
A. CARRYOVER	_____		
B. TOTAL CURRENT YEAR ALLOCATION	_____		
C. ADMINISTRATIVE POOL ALLOCATION	_____		
TOTAL FUNDING AVAILABLE:	_____		

DOC. ID:	65-25-66
FED. TAX ID.:	85-6000-130
Please Identify One:	
General Fund/Capital Outlay/Debt	
<input checked="" type="checkbox"/>	Direct Grant
<input type="checkbox"/>	Flowthrough <u>25184</u>
(Program of Adm.)	
Name	<u>INDIAN ED FORMULA GRANT</u>
SELECT ONE:	
<input type="checkbox"/>	INITIAL BUDG. (Flowthrough)
<input type="checkbox"/>	INCREASE
<input checked="" type="checkbox"/>	DECREASE
<input type="checkbox"/>	MAINTENANCE
<input type="checkbox"/>	TRANSFERS

ENTITY NAME: FARMINGTON MUNICIPAL SCHOOLS  
CONTACT: Phyllis Timme 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	ADD'L FTE
	FROM	TO					
11112						\$0.00	
25184	1000.56118		GENERAL SUPPLIES & MATLS	\$94,607.00	(\$35,584.00)	\$59,023.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
				SUB TOTAL	(\$35,584.00)		Total FTE
				INDIRECT COST	\$0.00		
				TOTAL	(\$35,584.00)		

Compliance with Section 10-15-I 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: 2/11/25  
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.

FUNCTION/OBJ	JUSTIFICATION	FUNCTION/OBJ	JUSTIFICATION
	FY23-24 CASH CARRYOVER		

SCHOOL DISTRICT CERTIFICATION	
SUPERINTENDENT	DATE
FISCAL OFFICER	DATE

SDE APPROVAL	
PROGRAM DIRECTOR	DATE
AGENCY SPPORT/SCHOOL BUD.	DATE

ANALYST

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

BUDGET ADJUSTMENT REQUEST

Fiscal Year 2024-2025  
No

SUBMIT COPIES (AS APPLICABLE)  
a. General Allocation Notice  
B. Publication and form 910b-5 for  
increase ocer \$1,000 in  
Operational (non-categorical)

ADJUSTMENT CHANGES INTENT/SCOPE OF PROGM YES OR NO

FLOWTHROUGH ONLY

Table with budget period (July 1, 2024 to June 30, 2025) and categories: A. CARRYOVER, B. TOTAL CURRENT YEAR ALLOCATION, C. ADMINISTRATIVE POOL ALLOCATION, TOTAL FUNDING AVAILABLE.

DOC. ID: FED. TAX ID.: 85-6000-130  
Please Identify One:  
General Fund/Capital Outlay/Debt  
Direct Grant  
Flowthrough (Program of Adm.)  
Name  
Transportation (Local Board Only)  
SELECT ONE:  
INITIAL BUDG. (Flowthrough)  
INCREASE  
DECREASE  
MAINTENANCE  
TRANSFERS

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

ROUND TO THE NEAREST DOLLAR

Main budget table with columns: REVENUE AND FUND CODE, FUNCTION/OBJECT EXPENDITURE (FROM, TO), DESCRIPTION, PRESENT BUDGET, AMOUNT OF ADJUSTMENT, ADJUSTED BALANCE, ADD'L FTE. Includes a summary row for SUB TOTAL, INDIRECT COST, and TOTAL.

Compliance with Section 10-15-I 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:  
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.

Justification table with columns: FUNCTION/OBJ, JUSTIFICATION.

SCHOOL DISTRICT CERTIFICATION table with rows for SUPERINTENDENT, FISCAL OFFICER and DATE.

SDE APPROVAL table with rows for PROGRAM DIRECTOR, AGENCY SPPORT/SCHOOL BUD. and DATE.