

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

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

BUDGET ADJUSTMENT REQUEST

Fiscal Year 2023-2024

ADJUSTMENT CHANGES INTENT/SCOPE OF PROGRAM YES OR NO No

FLOWTHROUGH ONLY

BUDGET PERIOD FROM July 1, 2023 TO June 30, 2024

A. CARRYOVER _____

B. TOTAL CURRENT YEAR ALLOCATION _____

C. ADMINISTRATIVE POOL ALLOCATION _____

TOTAL FUNDING AVAILABLE: _____

DOC. ID:	65-24-80
FED. TAX ID.:	85-6000-130
Please Identify One:	
_____	General Fund/Capital Outlay/Debt
_____	Direct Grant
<input checked="" type="checkbox"/>	Flowthrough <u>27126</u>
	(Program of Adm.)
Name	<u>Community Schools Grant</u>
SELECT ONE:	
_____	INITIAL BUDG. (Flowthrough)
_____	INCREASE
_____	DECREASE
_____	MAINTENANCE
<input checked="" type="checkbox"/>	TRANSFERS

ENTITY NAME: FARMINGTON MUNICIPAL SCHOOLS

CONTACT: Stephany Andrews 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					
43202	1000.53330		Prof Dev Apache (017)	\$20,000.00	(\$13,000.00)	\$7,000.00	
27126	1000.5612		Supplies (017)	\$5,000.00	(\$2,500.00)	\$2,500.00	
		2100.51100	Salaries (1211)	\$0.00	\$15,500.00	\$15,500.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
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						\$0.00	
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						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
						\$0.00	
				SUB TOTAL	\$0.00		
				INDIRECT COST	\$0.00		
				TOTAL	\$0.00		
						Total FTE	

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: 4/9/24

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
	Transfer to Cover PR		

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