PAGE 1	STATE OF	NEW MEXICO
	DEPARTMEN	T OF EDUCATION
SUBMIT COPIES (AS APPLICALBLE)	300 DC	N GASPAR
a. General Allocation Notice	SANTA FE,	NM 87501-2786
B. Publication and form 910b-5 for		
increase ocer \$1,000 in	BUDGET ADJU	STMENT REQUEST
Operational (non-catagorical)		
	Fiscal Year	2024-2025
ADJUSTMENT CHANGES INTENT/SCOPE OF PROG	RAM YES OR NC	No
FLOWTHROUGH ONLY		
BUDGET PERIOD FROM July 1, 2024	TO June 30,	2025
A. CARRYOVER		
B. TOTAL CURRENT YEAR ALLOCATION		

DOC. ID:	65-25-85				
FED. TAX I	D.:	85-6000-130			
Please Identify One:					
	General Fund/Capital Outlay/Debt				
x	Direct Grant				
	Flowthrough	26121			
	(Program of Adm.)				
Name	W.K. Kellogg Foundation				
SELECT O	NE:				
	INITIAL BUDG.	(Flowthrough)			
	INCREASE				
Х	DECREASE				
	MAINTENANCE				
	TRANSFERS				

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

				ROUND TO THE NEAREST	DOLLAR			
REVENUE	FUNCTIC	N/OBJECT						
AND FUND	ND EXPENDITURE				PRESENT	AMOUNT OF	ADJUSTED	ADD'L
CODE	FROM	TO		DESCRIPTION	BUDGET	ADJUSTMENT	BALANCE	FTE
26121	#########			Supplies		(\$36,910.00)	(\$36,910.00)	
41921	#########			Supplies		(\$50,000.00)	(\$50,000.00)	
	#########		Profess	ional Development		(\$60,000.00)	(\$60,000.00)	
							\$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	
Compliance with Section 10-15-I and 22-8-12 NMSA, 1978 Compilation:		SUB TOTAL	(\$146,910.00)	Total FTE				
A. The requested budget/changes were authorized at a scheduled		INDIRECT COST	(\$3,090.00)	]				
Board of Education meeting open to the public on: 3/11/25		TOTAL	(\$150,000.00)					

Board of Education meeting open to the public on:

C. ADMINISTRATIVE POOL ALLOCATION

TOTAL FUNDING AVAILABLE:

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 Decreasing incorrect beginning balance reve	nue code.		FUNCTION/OBJ	JUSTIFICATION
	_				
·			1		
	SCHOOL DISTRICT CERTIFICATION				SDE APPROVAL
SUPERINTENDENT	DA	TE	ANALYST	PROGRAM DIRECTOR	DATE
FISCAL OFFICER	DA	TE		AGENCY SPPORT/SCHOOL BUD.	DATE