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

ENTITY NAME:

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

FUNCTION/OBJ

FISCAL OFFICER

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

BUDGET ADJUSTMENT REQUEST

DOC. ID:	65-26-15						
FED. TAX ID.:	85-6000-130						
Please Identify One:							
	General Fund/Capital Outlay/Debt						
х	Direct Grant						
	Flowthrough	262	22				
	-	(Program of Ad	dm.)				
Name	Emergeno	y Connectiv	vity Fund				
Transportation (Local Board Only							
SELECT ONE							
	_INITIAL BUDG		(Flowthrough)				
х	INCREASE						

_DECREASE TRANSFERS

Operational (non-catagorical)		Fiscal	Year	2025-2026				
ADJUSTMENT CHANGES INTENT/SCOPE OF PROGRAM M YES OR NO No								
FLOWTHROUGH ONL	Υ							
BUDGET PERIOD _	July 1, 2025	_ TO _	June 30, 2026					
A. CARRYOVER								
B. TOTAL CURRENT Y	EAR ALLOCATION							
C. ADMINISTRATIVE POOL ALLOCATION								
TOTAL F	FUNDING AVAILABLE:							

FARMINGTON MUNICIPAL SCHOOLS

JUSTIFICATION

25-26 INCREASE AWARD

CONTACT: Colton McClanahan TELEPHONE: (505) 324-9840 TOTAL APPROVED BUDGET (Flowthrough) ROUND TO THE NEAREST DOLLAR REVENUE FUNCTION/OBJECT AND FUND **EXPENDITURE** AMOUNT OF ADJUSTED **PRESENT** ADD'L CODE DESCRIPTION **BUDGET** ADJUSTMENT BALANCE FROM FTE 46100 \$0.00 26222 1000.56119 Supply Assets>5000 \$0.00 \$21,662.50 \$21,662.50 \$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 \$21,662.50 SUB TOTAL 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 INDIRECT COST \$0.00 Board of Education meeting open to the public on: 8/12/25 TOTAL \$0.00 B. Justification for the transfer: Explanation such as "underbudgeted", "insufficient budget", or "needed to close out

	<u></u>					
SCHOOL DISTRICT CERTIFICATION				SDE APPROVAL		
SUPERINTENDENT		DATE	ANALYST	PROGRAM DIRECTOR		DATE

DATE

FUNCTION/OBJ

AGENCY SPPORT/SCHOOL BUD.

JUSTIFICATION

DATE