

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

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

BUDGET ADJUSTMENT REQUEST

Fiscal Year 2024-2025
No

ADJUSTMENT CHANGES INTENT/SCOPE OF PROGRAM YES OR NO
FLOWTHROUGH ONLY

BUDGET PERIOD	July 1, 2024	June 30, 2025
A. CARRYOVER		
B. TOTAL CURRENT YEAR ALLOCATION	\$	147,418.00
C. ADMINISTRATIVE POOL ALLOCATION		
TOTAL FUNDING AVAILABLE:	\$	147,418.00

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

DOC. ID: 65-26-05

FED. TAX ID.: 85-6000-130

Please Identify One:
General Fund/Capital Outlay/Debt

XX Direct Grant

Flowthrough 25147
(Program of Adm.)

NAME: Impact Aid Indian Ed
Transportation (Local Board Only)

SELECT ONE:

INITIAL BUDG. (Flowthrough)

XX INCREASE

DECREASE

TRANSFERS

MAINTENANCE

REVENUE AND FUND	FUNCTION/OBJECT EXPENDITURE		DESCRIPTION	PRESENT BUDGET	AMOUNT OF ADJUSTMENT	ADJUSTED BALANCE	ADD'L FTE
	FROM	TO					
1	44301	4000.54500	Capital Outlay-Construction		83,500.00	\$83,500.00	
2	25147	2100.51300	Additional Compensation (1214)		1,500.00	\$1,500.00	
3		2300.53711	Other Charges-Rental		5,000.00	\$5,000.00	
4		1000.55817	Student Travel		57,418.00	\$57,418.00	
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
				SUB TOTAL	\$147,418.00	Total FTE	
				INDIRECT COST			
				TOTAL	\$147,418.00		

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: 7/8/25
Project" ARE NOT ACCEPTABLE. Attach additional sheets of necessary.

FUNCTION/OBJ	JUSTIFICATION
	FY24-25 Voucher received in June
	Application #21171

FUNCTION/OBJ	JUSTIFICATION

SCHOOL DISTRICT CERTIFICATION	
SUPERINTENDENT	DATE

SDE APPROVAL	
ANALYST	PROGRAM DIRECTOR
	DATE

FISCAL OFFICER

DATE

AGENCY SPPORT/SCHOOL BUD.

DATE