## PAGE 1

SUBMIT COPIES (AS APPLICALBLE)

a. General Allocation Notice

B. Publication and form 910b-5 for

**ENTITY NAME:** CONTACT:

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

TELEPHONE (505) 324-9840

DISABILITY (JC 1711)

WKRS COMP (JC 1711)

**GEN SUPPLIES & MATLS** 

increase ocer \$1.000 in		BUDGET ADJUSTMENT REQUEST			
Operational (non-catagorical)  ADJUSTMENT CHANGES	INTENT/SCOPE OF PI	Fiscal Year _		2025-2026 No	
FLOWTHROUGH ONLY					- Nam
BUDGET PERIOD	July 1, 2025	ТО	June 30, 202	26	
A. CARRYOVER					SELE
B. TOTAL CURRENT YEAR	R ALLOCATION				
C. ADMINISTRATIVE POO	L ALLOCATION				
TOTAL FUND	ING AVAILABLE:				

DOC. ID:	(	65-26-23
FED. TAX ID	**	85-6000-130
Please Ident	ify One:	
	General Fund/0	Capital Outlay/Debt
Х	Direct Grant	
	Flowthrough _	26107
	(I	Program of Adm.)
Name		
SELECT ON	E:	
X	_INITIAL BUDG	. (Flowthrough)
	INCREASE	
	_DECREASE	
	MAINTENANC	E
	TRANSFERS	

TOTAL APPR	KOAFD RODG	JET (Flowthron	ugn)				
			ROUND TO THE NEAREST	DOLLAR			
REVENUE AND FUND CODE		N/OBJECT DITURE TO	DESCRIPTION	PRESENT BUDGET	AMOUNT OF ADJUSTMENT	ADJUSTED BALANCE	ADD'L FTE
	FROM	10	DESCRIPTION	BODGET	ADJOSTWENT		1115
43214						\$0.00	
26107		1000.51100	SALARY (JC 1711)	\$0.00	\$129,300.00	\$129,300.00	2.5
		1000.51300	ADD PAY (JC 1411)	\$0.00	\$12,000.00	\$12,000.00	
		1000.51300	ADD PAY (JC 1711)	\$0.00	\$22,000.00	\$22,000.00	
		1000.52111	ERA (JC 1411)	\$0.00	\$2,000.00	\$2,000.00	
		1000.52111	ERA (JC 1711)	\$0.00	\$50,000.00	\$50,000.00	
		1000.52112	RHCA (JC 1411)	\$0.00	\$1,000.00	\$1,000.00	
		1000.52112	RHCA (JC 1711)	\$0.00	\$5,000.00	\$5,000.00	
		1000.52210	FICA (JC 1411)	\$0.00	\$1,000.00	\$1,000.00	
		1000.52210	FICA (JC 1711)	\$0.00	\$17,000.00	\$17,000.00	
		1000.52220	MEDICARE (JC 1411)	\$0.00	\$500.00	\$500.00	
		1000.52220	MEDICARE (JC 1711)	\$0.00	\$4,000.00	\$4,000.00	
		1000.52312	LIFE (JC 1711)	\$0.00	\$700.00	\$700.00	
		1000.52313	DENTAL (JC 1711)	\$0.00	\$2,000.00	\$2,000.00	
		1000.52314	VISION (JC 1711)	\$0.00	\$300.00	\$300.00	

\$0.00

\$0.00

\$0.00

SUB TOTAL

INDIRECT COST

TOTAL

FUNCTION/OBJ

\$1,000.00

\$200.00

\$16,000.00

\$264,000.00

\$0.00

\$264,000.00

\$1,000.00

\$200.00

\$16,000.00

\$0.00 \$0.00 \$0.00

**JUSTIFICATION** 

Total FTE

9/9/25 Board of Education meeting open to the public on: 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.

**JUSTIFICATION** 

**FARMINGTON MUNICIPAL SCHOOLS** 

Phyllis Timme

1000.52315

1000.52720

1000.56118

Compliance with Section 10-15-I and 22-8-12 NMSA, 1978 Compilation:

A. The requested budget/changes were authorized at a scheduled

FUNCTION/OBJ

FY25-26 AWARD		 
	_	
	_	
SCHOOL DISTRICT CERTIFICATION		SDE APPROVAL

SCHOOL DISTRIC	T CERTIFICATION	1	SDE APPROVA	L
SUPERINTENDENT	DATE	ANALYST	PROGRAM DIRECTOR	DATE
FISCAL OFFICER	DATE		AGENCY SPPORT/SCHOOL BUD.	DATE
		_		