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SUBMIT COPIES (AS APPLICALBLE)

a. General Allocation Notice
B. Publication and form 910b-5 for increase ocer $1,000 in Operational (non-catagorical)

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

BUDGET ADJUSTMENT REQUEST

Fiscal Year 2025-2026

ADJUSTMENT CHANGES INTENT/SCOPE OF PROG M YES OR NO: No

FLOWTHROUGH ONLY

BUDGET PERIOD	July 1, 2025	TO	June 30, 2026
A. CARRYOVER			
B. TOTAL CURRENT YEAR ALLOCATION			
C. ADMINISTRATIVE POOL ALLOCATION			
TOTAL FUNDING AVAILABLE:			

DOC. ID: 65-26-105 0121-I
FED. TAX ID.: 85-6000-130

Please Identify One:
- ____ General Fund/Capital Outlay/Debt
- X Direct Grant
- ____ Flowthrough 25153 (Program of Adm.)

Name: MEDICAID

SELECT ONE:
- ____ INITIAL BUDG. (Flowthrough)
- X INCREASE
- ____ DECREASE
- ____ MAINTENANCE
- ____ TRANSFERS

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

ROUND TO THE NEAREST DOLLAR

REVENUE AND FUND CODE	FUNCTION/OBJECT EXPENDITURE FROM	TO	DESCRIPTION	PRESENT BUDGET	AMOUNT OF ADJUSTMENT	ADJUSTED BALANCE	ADD'L FTE
44301						$0.00	
25153		2100.51100	SALARY (JC1215)	$0.00	$2,487,515.53	$2,487,515.53	
						$0.00	
						$0.00	
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						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
				SUB TOTAL	$2,487,515.53	Total FTE	
				INDIRECT COST	$0.00		
				TOTAL	$2,487,515.53		

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: 5/12/26

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	FUNCTION/OBJ	JUSTIFICATION
	1ST - 3RD QUARTER RECEIPTS		

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