Must submit backup for all BARs, except transfers of funds for SEG or direct grants

STATE OF NEW MEXICO

PUBLIC EDUCATION DEPARTMENT

Doc. ID: 033-000-1112-0013-M

Fund Type: General Fund / Capital Outlay / Debt Service

300 Don Gaspar Santa Fe, NM 87501-2786

Budget Adjustment Request

Adjustment Type: Maintenance

Fiscal Year: 2011-2012

Adjustment Changes Intent/Scope of Program Yes or No?: No

Total Approved Budget (Flowthrough):

Contact: Kerri L Frizzell, Director of Finance

Phone: 575-433-0100

Entity Name: Hobbs

Email: frizzellk@hobbsschools.net

FLOWTHROUGH ONLY

...

Budget Period: Jul 1 2011 12:00AM

To: Jun 30 2012 12:00AM

A. Approved Carryover:

B. Total Current Year Allocation:

D. Total Funding Available:

Fund	Function	Object	Program	Job Class	Present Budget	Adj Amt Exp	Adj Budget	ADD'L FTE
11000 Operation al	2100 Support Services-Students	51100 Salaries Expense	2000 Special Programs	1313 Occupational Therapists	\$236,816	(\$100,000)	\$136,816	(1.50)
11000 Operation al	2100 Support Services-Students	51300 Additional Compensation	2000 Special Programs	1313 Occupational Therapists	\$10,611	\$25,000	\$35,611	
11000 Operation al	2100 Support Services-Students	53213 Occupational Therapists - Contracted	2000 Special Programs	0000 No Job Class	\$96,630	\$75,000	\$171,630	
	•	•	•	0	Sub Total	\$0		(1.50)
					Indirect Cost			
					DOC. TOTAL	\$0		

Justification:

To move compensation budget for 1.5 FTE Occupational Therapists to additional compensation-OT and ancillary services-OT per James Johns/SPED

Compliance with Sections 10-15-1 and 22-8-12, NMSA, 1978 Compilation:

A. The requested budget/changes were authorized at a scheduled Board of Education or Governance Council meeting open to the public on: 8/23/2011 B. Justification for the transfer: Explanation such as "underbudgeted", "insufficient budget", or "needed to close out Project" ARE NOT ACCEPTABLE. Attach additional

B. Justification for the transfer: Explanation such as "underbudgeted", "insufficient budget", or "needed to close out Project" ARE NOT ACCEPTABLE. Attach additional sheets if necessary.

ALL TRANSFER BARS MUST NET OUT TO ZERO ON THE DOC. TOTAL LINE.

Approvals by Digital Signature							
Name	Role	Date					
Sabrina Amador	Business Manager	8/26/2011 1:32:21 PM					
TJ Parks	Superintendent	8/26/2011 1:35:39 PM					
Sabrina Amador	Local / Governance Board	8/26/2011 1:39:23 PM					

CR:	11000E2100	51100	2000	916	1313	17900	00000	\$100,000
DR:	11000E2100	51300	2000	916	1313	17900	00000	25,000
DR:	11000E2100	53213	2000	916	0000	00100	00000	75,000