

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

STATE OF NEW MEXICO
PUBLIC EDUCATION DEPARTMENT
300 Don Gaspar Santa Fe, NM 87501-2786
Budget Adjustment Request

Doc. ID: 064-001-1516-0026-M
Fund Type: General Fund / Capital
Outlay / Debt Service
Adjustment Type: Maintenance

Fiscal Year: 2015-2016

Entity Name: Mosaic Academy Charter

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

Contact: Nancy J Ross, Business Manager

Total Approved Budget (Flowthrough):

Phone: 505-330-3203

Email: nancyross@q.com

FLOWTHROUGH ONLY	
Budget Period: Jul 1 2015 12:00AM	To: Jun 30 2016 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
31700 Capital Improvem ents SB-9	4000 Capital Outlay	54315 Maintenance & Repair - Bldgs/Grnds/Equipm ent (SB-9)	0000 No Program	0000 No Job Class	\$12,000	(\$5,830)	\$6,170	
31700 Capital Improvem ents SB-9	4000 Capital Outlay	54640 Rental - Lease To Purchase	0000 No Program	0000 No Job Class	\$6,009	\$1,573	\$7,582	
31700 Capital Improvem ents SB-9	4000 Capital Outlay	57332 Supply Assets (\$5,000 or less)	0000 No Program	0000 No Job Class	\$13,422	\$4,257	\$17,679	
Sub Total						\$0		
Indirect Cost								
DOC. TOTAL						\$0		

Justification:

To provide for additional copy costs and for small equipment for students.

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:

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		
<u>Name</u>	<u>Role</u>	<u>Date</u>
Nancy Ross	Business Manager	3/9/2016 11:46:15 PM