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

### STATE OF NEW MEXICO

#### PUBLIC EDUCATION DEPARTMENT

To:

**Doc. ID:** 019-000-1011-0026-IB **Fund Type:** Direct Grant

Adjustment Type: Initial Budget

# 300 Don Gaspar Santa Fe, NM 87501-2786 Budget Adjustment Request

## Fiscal Year: 2010-2011 Adjustment Changes Intent/Scope of Program Yes or No?: No Total Approved Budget (Flowthrough):

Entity Name: Gadsden Contact: Erica Villarreal Phone: 505-882-6707 Email: evillarreal@gisd.k12.nm.us

### FLOWTHROUGH ONLY

Budget Period: Jul 1 2010 12:00AM

Jun 30 2011 12:00AM

A. Approved Carryover: B. Total Current Year Allocation:

D. Total Funding Available:

Revenue 28158.0000.43203 \$45,747								
Fund	Function	Object	Program	Job Class	Present Budget	Adj Amt Exp	Adj Budget	ADD'L FTE
28158 Suicide Preventio n	1000 Instruction	56118 General Supplies and Materials	1010 Regular Education (K- 12) Programs	0000 No Job Class		\$45,747	\$45,747	
					Sub Total	\$45,747		
					Indirect Cost			
					DOC. TOTAL	\$45,747		

#### Justification:

Initial BAR for Suicide Prevention Grant for cash balance carryover.

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.