

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:** 001-706-2324-0005-1  
**Fund Type:** General Fund / Capital Outlay / Debt Service

**Adjustment Type:** Increase

**Fiscal Year:** 2023-2024

**Entity Name:** Coral Community Charter  
**Contact:** Katy Sanchez, Business Manager  
**Phone:** 505-908-1420  
**Email:** Ksanchez@Axiomanalytics.org

**Adjustment Changes Intent/Scope of Program Yes or No?:** No  
**Total Approved Budget (Flowthrough):**

<b>FLOWTHROUGH ONLY</b>	<b>Budget Period:</b> 2023-07-01	<b>To:</b> 2024-06-30
<b>A. Approved Carryover:</b>		
<b>B. Total Current Year Allocation:</b>		
<b>D. Total Funding Available:</b>		

Revenue 21000.0000.41604 \$14

Fund	Function	Object	Program	Location	Job Class	Present Budget	Adj Amt Exp	Adj Budget	ADD'L FTE
21000 Food Services	3100 Food Services Operations	55915 Other Contract Services	0000 No Program	001706 Coral Community Charter	0000 No Job Class	\$14,562	\$14	\$14,576	
Sub Total							\$14		
Indirect Cost									
<b>DOC. TOTAL</b>							<b>\$14</b>		

**Justification:**

Increase Revenue budget for Student Meal Payments.

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: 9/12/2023

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>
Katy Sanchez	Business Manager	9/12/2023 4:44:43 PM
Lori Bachman	Superintendent	9/13/2023 8:31:57 AM
Desiree Martinez	Budget Analyst	9/13/2023 9:06:00 AM
Lorenzo Dominguez	Budget Supervisor	9/13/2023 12:32:39 PM