

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: 001-706-2324-0019-M

Fund Type: Direct Grant

Adjustment Type: Maintenance

Fiscal Year: 2023-2024

Entity Name: Coral Community Charter

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

Contact: Katy Sanchez, Business Manager

Total Approved Budget (Flowthrough):

Phone: (505) 908-1420

Email: ksanchez@coralcharter.com

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

Fund	Function	Object	Program	Location	Job Class	Present Budget	Adj Amt Exp	Adj Budget	ADD'L FTE
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	53711 Other Charges	0000 No Program	001706 Coral Community Charter	0000 No Job Class	\$33,754	(\$4,356)	\$29,398	
25153 Title XIX MEDICAID 3/21 Years	2100 Support Services-Students	53414 Other Services	2000 Special Programs	001706 Coral Community Charter	0000 No Job Class	\$2,697	\$2,284	\$4,981	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	51100 Salaries Expense	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants	\$2,000	\$1,000	\$3,000	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52111 Educational Retirement	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$560	\$560	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52112 ERA - Retiree Health	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$75	\$75	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52210 FICA Payments	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$200	\$200	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52220 Medicare Payments	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$60	\$60	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52312 Life	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$5	\$5	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52500 Unemployment Compensation	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$10	\$10	
25153 Title XIX MEDICAID 3/21 Years	2400 Support Services-School Administration	52720 Workers Compensation Employer's Fee	0000 No Program	001706 Coral Community Charter	1217 Secretarial/Cler ical/Technical Assistants		\$2	\$2	

25153 Title XIX MEDICAL D 3/21 Years	2500 Central Services	53414 Other Services	0000 No Program	001706 Coral Community Charter	0000 No Job Class		\$160	\$160	
						Sub Total	\$0		
						Indirect Cost			
						DOC. TOTAL	\$0		

**Justification:**

To reallocate funds between line items and object codes for actual expenditures.

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: 10/10/2023

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		
Name	Role	Date
Katy Sanchez	Business Manager	10/10/2023 5:00:47 PM
Lori Bachman	Superintendent	10/10/2023 5:54:24 PM
Katy Sanchez	Local / Governance Board	10/11/2023 8:30:56 AM

Local / Governance Board Approved

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