

**STATE OF NEW MEXICO
PUBLIC EDUCATION DEPARTMENT
300 DON GASPAR
SANTA FE, NEW MEXICO 87501-2786**

LIST OF UNLIQUIDATED OBLIGATIONS

DEADLINE: 7/29/2011

THIS FORM MUST BE RECEIVED BY ADMINISTRATIVE SERVICES DIVISION BY JULY 29, 2011 FOR THE FISCAL YEAR ENDED 6/30/11 AS SUPPORTING DOCUMENTATION FOR A BAR (BUDGET ADJUSTMENT REQUEST) TO REBUDGET UNEXPENDED FUNDS.

ONLY THOSE OBLIGATIONS WHICH APPEAR ON THIS LIST MAY BE LIQUIDATED. THIS FORM IS ONLY NECESSARY FOR EXPIRING FEDERAL GR OR CARL PERKINS' FUNDS. STATE FUNDS ARE INELIGIBLE FOR UNLIQUIDATED OBLIGATIONS.

ENTITY NAME: Gadsden Independent School District	BUDGET PERIOD: 2010-2011
PROGAM NAME: IDEA B ARRA/Stimulus	FUNDING CODE: 24206
CONTACT NAME: Erica Villarreal	TELEPHONE: 575-882-6244

REMINDER: To qualify, the obligations must meet the requirements as defined in Education Department General Administrative Regulation. Services are obligated when services are performed. The obligations must have been incurred prior to June 30, and paid after July 1. (**VOCATIONAL EDUCATION ONLY:** Equipment items must be obligated before April 1st).

Function	Object	Job Class	Description	UNLIQUIDATED OBLIGATION AMOUNT
1000	51100	1412	Salaries Expense	5,000.00
1000	52111	1412	Educational Retirement	221.18
1000	53330	0	Professional Development	10,200.00
1000	53414	0	Other Services	24,804.25
1000	56113	0	Software	148,276.36
1000	56118	0	General Supplies and Materials	541,491.59
1000	57331	0	Fixed Assets More than 5000	69,605.00
1000	57332	0	Supply Asset 5000 or Less	912,736.37
2100	53212	0	Speech Therapists Contracted	16,700.00
2100	56118	0	General Supplies and Materials	187,083.93
2100	57332	0	Supply Asset 5000 or Less	140,201.72
2200	53330	0	Professional Development	199.00
2300	53713	0	Indirect Costs	36,606.05
TOTAL				2,093,125.45

I certify that these obligations are correct and have been made for the above-named project and that all amounts were obligated on or before the last date of the approved project period.

Signature of Authorized Representative	Date			
PED Approval Program Signature: _____ Approved Amount: \$ _____ ASD <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;">/</td> <td style="width: 20px; height: 20px;">/</td> </tr> </table>			/	/
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