Business Manager or Procurement Officer Amendment Form

The Charter Contract was entered into by and between the New Mexico Public Education Commission [RAICES DEL SABER XUNACHTLI COMMUNITY SCHOOL], hereafter "the School", effective [OI] [JULY], [2019]
The School was approved for a [S YEAR TERM] Charter Contract.

CHANGE OF: Susiness R	MANAGER CPO		вотн	
Charter Contract currently s	tates:		<u> </u>	
CURRENT BUSINESS MANAGER ERICA REYES	R OR PROCUREMENT OFFICE	R:		
Requests the Public Education	• •	ection <u> </u>	of the School's contract to read	
EFFECTIVE DATE OF CHANGE:	11/1/2021			
		REMENT OF	FICER AND CONTACT INFORMATION:	
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The School's Business Mana CHARTER SCHOOL REPRESENTATIVE Criteria:	ger or Procurement Office] on[1452221], and st be submitted to the PEC	er Amendm affirms the		
or implemented; an	ger or Procurement Office] on[1452221], and st be submitted to the PEG	er Amendm affirms the C within 30	ent is hereby submitted by school meets the following eligibility	
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The School's Business Mana CHARTER SCHOOL REPRESENTATIVE Criteria: Amendment musor implemented; and The school's gov Tulia Rivera-Tapia (Nov 5, 2021 14:06 MDT) Charter School Represent	ger or Procurement Office] on[1452221], and st be submitted to the PEC d erning board is in complia	er Amendm affirms the C within 30 ance with al	ent is hereby submitted by eschool meets the following eligibility days of the change being communical reporting requirements. Nov 5, 2021 Date	

AFFIDAVIT OF FINANCIAL RECORD CUSTODIAN

STATE OF NEW MEXICO)								
COUNTY OFLUNA)								
I,TERRANCE L D HESTER, [affiant] after being duly sworn, state:								
1. I live in the City ofDEMING, County ofLUNA, New Mexico. 2. In accordance with 6.80.4.16 NMAC, I agree to accept the responsibility of keeping the financial records of the charter school and recognized that I am in charge of maintaining public funds with fidelity and in accordance to public finance laws, rules and regulations. 3. I have completed the following training in the maintenance of financial records: a) NMASBO 2021 FALL CONFERENCE 4. Attached is a certificate of insurance that indicates that I am adequately bonded to take this responsibility. 5. I have earned the following certificates, licensures and/or degrees:								
Certificate, licensure or degree	Educational Institution	Date	Current Yes/No					
BA	NMSU	MAY 2011	N/A					
One-Year Certificate, School Business Official	Issued by NM-PED	7/1/2021	Yes, expires 6/30/2022					
[Signature of Affiant] Date Print Name of Affiant]								
<u>VERIFICATION</u>								
The forgoing Affidavit of Financial Records Custodian was subscribed and sworn to before me, this 30 day of November, 2021. [NotarioSeal.] NOTARY PUBLIC								

Revised 10-5-2011

My commission expires:

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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 11/5/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.											
PRODUCER			CONTACT NAME:	CONTACT NAME: Risk Services							
Poms & Associates Insurance Brokers			PHONE (A/C, No, Ext):	PHONE (A)C, No, Ext): (800)578-8802 (A)C, No): (818) 449							
CA License #0814733			E-MAIL ADDRESS:	E-MAIL ADDRESS: rservices@pomsassoc.com							
6700 Canoga Ave. #400 Woodland Hills, Ca 91367				PRODUCER CUSTOMER ID #:	PRODUCER CUSTOMER ID #: 00016280						
					INSURER(S) AFFORDING COVERAGE						
INSURED			INSURER A : Nev	INSURER A: New Mexico Public Schools Insurance Authority				N/A			
				*	INSURER B: Hanover insurance Company						
New Mexico Public Schools Insurance Authority Member: Raices Del Saber Xinachtil Community School 410 Old Taos Highway				INSURER C : Berkley Regional Insurance Company							
			INSURER D:								
Santa Fe, NM 87601				INSURER E :							
				INSURER F:							
<u> </u>	VER	AGES		CERTIFICATE NUMBER:			RE	VISION NUMBER:			
			DESCRIPTION OF	PROPERTY (Attach ACORD 101, Additional Rema	rks Schedule, if more	space is required)					
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SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)											
5	RE: Erica Reyes, Business Manager - Serving as financial records custodian & Terrance Hester - Serving as										
Business Services Specialist											
EVIDENCE OF INSURANCE											
EVIDENCE OF INSOLVANCE											
CERTIFICATE HOLDER CANCELLATION											
Southwest Regional Education Cooperative #10			SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE								
1321 E. Poplar Street				EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							

AUTHORIZED REPRESENTATIVE

1321 E. Poplar Street

Deming, NM 88030



STATE OF NEW MEXICO



In Recognition of
The Fulfillment of the Requirements for
School Personnel Licensure
this

ONE-YEAR CERTIFICATE SCHOOL BUSINESS OFFICIAL

is issued to

TERRANCE HESTER

Effective from July 01, 2021 to June 30, 2022 Licensure Number: 403595

Secretary of Education

Ryan Stewar