



New Mexico Public Education Commission

Business Manager Change Notification Instructions

Purpose: To notify the Public Education Commission (PEC) of a change in the school's Head Administrator, Business Manager or Procurement Officer.

Submission Deadline: Changes to the school personnel do not require prior approval of the PEC; however, notice must be received within 30 calendar days of the change. Only one personnel change may be submitted per form. If more than one personnel change is being submitted, the school must submit separate forms.

Notifications completed 14 days prior to the next PEC meeting will be placed on the next agenda. Notifications of this type are typically placed on the consent agenda; however, any notification may be removed from the consent agenda and moved to the regular agenda for full discussion and possible action by the PEC.

Business Manager changes will be added to the board of finance documentation on file with CSD.

Information the school must provide for Business Manager change:

- X Fully completed form
- X Affidavit of financial record custodian (a completed and notarized affidavit of financial record custodian)
- X Certificate of insurance (a certificate of insurance indicating the business manager is adequately bonded to take responsibility as the financial record custodian)
- X School business official license (copy of current, valid school business official license)

Contact charter.schools@ped.nm.gov if you have questions about completing or submitting documents.

Personnel Change Notification Form. Submit this form and all supporting documents to **Epicenter**.

Business Manager Change Notification Form

The Charter Contract was entered into by and between the New Mexico Public Education Commission (PEC) and Explore Academy – Rio Rancho (586-001), hereafter "the school," effective on 7/1/2022, includes implementation year.

The school is notifying the PEC of a change in Business Manager

Current Business Manager: Axiom Analytics - Josh Padilla

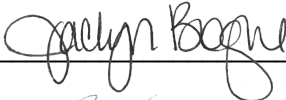
New Business Manager: The Vigil Group - Amber Pena

Contact information for new Business Manager (phone, email): office 505-938-7716; cell 505-470-0998; amber@vigilgroup.net

Number of Business Manager changes, including this change, submitted to PEC in the last 12 months:
Zero (0)

Effective Date: July 1, 2025

The school's notification is hereby submitted by:

Signature of School Representative:  **Date:** 7/28/2025

Signature of Governing Board Chair:  **Date:** 7/28/2025.

For PEC/CSD Use Only

PEC Meeting Date: Click or tap to enter a date.

Agenda: ☐ Consent (typical) ☐ Regular (unusual circumstance)

The school's notification was: ☐ Accepted ☐ Rejected (provide reason)

Electronic signature of CSD Director: _____ **Date:** Click or tap to enter a date.

AFFIDAVIT OF FINANCIAL RECORD CUSTODIAN

STATE OF NEW MEXICO)
)
COUNTY OF Bernalillo)

I, Amber Peña, [affiant] after being duly sworn, state:

1. I live in the city of Albuquerque, County of Bernalillo, 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 Conferences 2012 – present
 - b) State Audit Rule Training
 - c) NMASBO Spring Budget
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
BBA	University of New Mexico	May 2011	Yes
SBO – Level 2	NMPED	July 2024	Yes

FURTHER AFFIANCE SAYETH NAUGHT.

[Signature]
[Signature of Affiant]

07/16/2025
Date

Amber Peña
[Print Name of Affiant]

VERIFICATION

The forgoing Affidavit of Financial Records Custodian was subscribed and sworn to before me, this 16 day of July, 2027.

[Notary Seal]

STATE OF NEW MEXICO
NOTARY PUBLIC
ANTHONY SOLANO
Commission # 1124036
My Comm. Exp. 02/13/2027

[Signature]
NOTARY PUBLIC

My commission expires: 02/13, 2027.

STATE OF NEW MEXICO



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

LEVEL TWO SCHOOL BUSINESS OFFICIAL
is issued to

AMBER MARIE PENA

Effective from July 01, 2024 to June 30, 2033
Licensure Number: 351871

ISSUED

A handwritten signature in black ink, appearing to be "M. R.", is written over the title of the Secretary of Education.

Secretary of Education



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/18/2025

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.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Poms & Associates Insurance Brokers CA License #0814733 4500 Park Granada, Suite 206 Calabasas CA 91302	CONTACT NAME: David Livingston PHONE (A/C, No, Ext): (800) 578-8802 E-MAIL ADDRESS: dlivingston@pomsassoc.com FAX (A/C, No): (818) 449-9321
INSURED The Vigil Group, Inc. 8012 Pennsylvania Cir NE Albuquerque NM 87110	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Ins/PHI INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
	NAIC # 18058

COVERAGES**CERTIFICATE NUMBER:** 25-26 GL only**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			PHBX20000861	07/01/2025	07/01/2026	EACH OCCURRENCE \$ 1,000,000
			DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000				
			MED EXP (Any one person) \$ 10,000				
			PERSONAL & ADV INJURY \$				
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						BODILY INJURY (Per person) \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
							EACH OCCURRENCE \$
							AGGREGATE \$
							\$
							PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/>
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Explore Academy Rio Rancho 6090 Zenith Ct NE Rio Rancho NM 87144	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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