

SANTA FE COUNTY

RESOLUTION 1999 - 110

A RESOLUTION REQUESTING AUTHORIZATION TO MAKE THE BUDGET ADJUSTMENT DETAILED ON THIS FORM

Whereas, the Board of County Commissioners meeting in regular session on August 31, 1999, did request the following budget adjustment:

Department / Division: Sheriff Department / Region 3 Fund Name: General Fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2000 (July 1, 1999 - June 30, 2000)

1683551

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
101	1204 0000	372	0600	Region 3 / Federal Grant	20,263.00	
TOTAL (if SUBTOTAL, check here)					20,263.00	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
101	1204	425	50-90	Contractual Service/Other Contractual Services	20,263.00	
TOTAL (if SUBTOTAL, check here)					20,263.00	

Requesting Department Approval: [Signature] Title: County Sheriff Date: 8-30-99

Finance Department Approval: [Signature] Date: 8-31-99 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 9-1-99

SANTA FE COUNTY
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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Raymond L. Sisneros Dept/Div: Sheriff Department Phone No.: 986-2400

DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):

- 1) **Please summarize the request and its purpose.**
This request increases the present estimated Region 3 budget. Region 3 was awarded more than what was estimated and we need to equal the amounts.
- 2) **Why was this request not included in the Fiscal Year 2000 Operating Budget?**
An amount was estimated at \$223,452.00, but the actual amount given is \$243,715.00 leaving a \$20,263.00 difference.
- 3) **Is the transfer recurring or non-recurring and what are the future funding impacts of this request?**
No this request is non-recurring. Future funding is unknown at this time.
- 4) **Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:**
 - a) **If this is a state special appropriation, cite statute and attach a copy.**
This does not impact a state special appropriation.
 - b) **If this is a state or federal grant, cite grant name, number, award date and amount.**
This is a federal grant. Grant Name is "Region 3". Total award is \$243,715.00 (see attached). Other documentation is forthcoming.

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Raymond L. Sisneros Dept/Div: Sheriff Department Phone No.: 986-2400

DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):

- 4) (Continued):
 - c) If this request is a result of Commission action, please cite and attach a copy of supporting documentation.
This request is not the result of a Commission action.

 - d) Please identify other funding sources that can be used to match this request.
There are no other available funds for this request.

- 5) **If this request impacts the Capital Purchase category, please detail items to be purchased and what they will be used for.**
This request does not impact the Capital Purchase category at this time.

- 6) **Does this request have an FTE impact for the department/division? If request increases FTE, include number of positions, position type (term, permanent, etc.), and the future funding impact and revenue source.**
This request does not have an FTE impact.

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NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 31st Day of August, 1999.

Santa Fe Board of County Commissioners

[Handwritten signature of Paul Duran]
Paul Duran, Chairperson



[Handwritten signature of Rebecca Bustamante]
Rebecca Bustamante, County Clerk

Approved As To Form.

By *[Handwritten signature of Denice Brown]*
Denice Brown, County Attorney



1089 109
COUNTY OF SANTA FE)SS
STATE OF NEW MEXICO)
I hereby certify that this instrument was filed
for record on the 7 day of Sept A.D.
19 99, at 9:49 o'clock a m.
and was duly recorded in book 1083
page 551-554 of the records of
Santa Fe County.

Witness my Hand and Seal of Office
Rebecca Bustamante
County Clerk, Santa Fe County, N.M.
[Handwritten signature of Marcela Salazar]
Deputy

1683554