

**SANTA FE COUNTY**

**RESOLUTION 2005 - 39**

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

Whereas, the Board of County Commissioners meeting in regular session on March 29, 2005, did request the following budget adjustment:

Department / Division: Project & Facilities Management Department/Admin. Fund Name: Capital GRT

Budget Adjustment Type: Operating Transfer Fiscal Year: 2005 (July 1, 2004 - June 30, 2005)

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
260	0719	390	0300	Operating Transfer In	1,397	
<b>TOTAL (if SUBTOTAL, check here )</b>					1,397	

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
260	0719	434	5003	Contractual Services/Professional Services	1,397	
213	0713	481	5003	Contractual Services/Professional services		1,397
213	0713	490	0100	Operating Transfer Out	1,397	
<b>TOTAL (if SUBTOTAL, check here )</b>					2,794	1,397

Requesting Department Approval: [Signature] Title: Director Date: 2/9/05

Finance Department Approval: [Signature] Date: 3-22-05 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: [Signature] Date: 3-22-05

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*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**

Name: Angela Quintana Dept/Div: P&FMD/Admin. Phone No.: 992-9860

**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.  
The P&FM Department is requesting a transfer of \$1,397 from the OS&T Capital Outlay GRT fund to the EPA grant for the San Ysidro park restoration project.  
The identified expenditures was not allowed per EPA fund guidelines.
  
- 2) Why was this request not included in the Fiscal Year 2005 Operating Budget?  
The transaction occurred during FY '04 and not reconciled until FY '05 budget had been prepared.
  
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?  
N/A
  
- 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.  
N/A
  
  - b) If this is a state or federal grant, cite grant name, number, award date and amount.
    - EPA Grant CD-98675301-3

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Name: Angela Quintana Dept/Div: P&FMD/Admin. Phone No.: 992-9860

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- 4) (Continued):
  - c) If this request is a result of Commission action, please cite and attach a copy of supporting documentation.  
N/A
  
  - d) Please identify other funding sources that can be used to math this request.  
N/A
  
- 5) If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.  
N/A
  
- 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. N/A

