SFC CLERK RECORDED 04/06/2006

SANTA FE COUNTY

RESOLUTION 2006 - 47

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 28, 2006, did request the following budget adjustment:

Department / Division: Various Departments Fund Name: General Fund (101)

Budget Adjustment Type: Budget Increase Fiscal Year: 2006 (July 1, 2005 - June 30, 2006)

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	0000	311	0501	Property Tax / Current	205,500	
TOTAL (if SUBTOTAL, check here ____)					205,500	

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	0102	411	3005	Travel / Gas & Oil	3,700	
101	0112	412	3005	Travel / Gas & Oil	200	
101	0116	412	3005	Travel / Gas & Oil	600	
101	0506	414	3005	Travel / Gas & Oil	600	
TOTAL (if SUBTOTAL, check here X)					5,100	

Requesting Department Approval: _____ **Title:** _____ **Date:** _____

Finance Department Approval: _____ **Date:** 3/21/06 **Entered by:** _____ **Date:** _____

County Manager Approval: _____ **Date:** _____

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SANTA FE COUNTY

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BUDGET ADJUSTMENT CONTINUATION SHEET

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
TOTAL (if SUBTOTAL, check here ____)						

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	0601	441	3005	Travel / Gas & Oil	2,200	
101	0602	441	3005	Travel / Gas & Oil	2,000	
101	0603	442	3005	Travel / Gas & Oil	3,200	
101	0604	452	3005	Travel / Gas & Oil	11,000	
101	0605	443	3005	Travel / Gas & Oil	30,000	
101	0702	415	3005	Travel / Gas & Oil	10,200	
101	0703	412	3005	Travel / Gas & Oil	2,500	
101	0715	412	3005	Travel / Gas & Oil	3,500	
101	0718	412	3005	Travel / Gas & Oil	800	
101	1201	424	3005	Travel / Gas & Oil	135,000	
TOTAL (if SUBTOTAL, check here ____)					205,500	

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Susan Lucero **Dept/Div:** Finance **Phone No.:** 986-6375

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 is for a budget increase for property tax revenue to increase the budget for fuel for various departments within the General Fund (101).

- 2) Why was this request not included in the Fiscal Year 2006 Operating Budget?
  An estimated budget was included in the fiscal year 2006 operating budget for fuel countywide; however, actual expenditures have been much higher than anticipated due to increasing fuel prices.

- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
  This increase should be non-recurring.

- 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 is not a state special appropriation.
  - b) If this is a state or federal grant, cite grant name, number, award date and amount.
    This is not a state or federal grant.

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RESOLUTION 2006 - 47

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: ~~Susan Lucero~~ Roman Abeyta **Dept/Div:** Finance **Phone No.:** 986-6375

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 a result of Commission action.
  - d) Please identify other funding sources that can be used to match this request.
    There are no other funding sources to match this request.
- 5) If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.
  This request does not impact the capital purchases category.
- 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 28th Day of February, 2006.

Santa Fe Board of County Commissioners

Harry Montoya, Chairperson

ATTEST:

Valerie Espinoza, County Clerk

Approved As To Form.

By

Stephen Ross, County Attorney

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 5

I Hereby Certify That This Instrument Was Filed for Record On The 6TH Day Of April, A.D., 2006 at 14:56 And Was Duly Recorded as Instrument # 1427711 Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy
County Clerk, Santa Fe, NM