

SANTA FE COUNTY

RESOLUTION 2010 - 131

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 10, 2010, did request the following budget adjustment:

Department / Division: Fire Department/Fire Administration Fund Name: FEMA AFG Grant Fund (244)

Budget Adjustment Type: Budget Increase Fiscal Year: 2011 (July 1, 2010 - June 30, 2011)

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
244	0814	372	00-00	Federal Grants/FEMA	217,820	
					217,820	

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
244	0814	422	10-25	Salaries & Wages/Overtime Pay	5,760	
244	0814	422	30-02	Travel/OS Mileage & Fares	4,000	
244	0814	422	30-04	Travel/OS Meals & Lodging	4,000	
244	0814	422	50-03	Contractual Services/Professional Services	57,980	
244	0814	422	60-09	Supplies/Educational	14,080	
244	0814	422	70-33	Other Operating Costs/Workshops & Seminars	12,000	
244	0814	422	80-03	Capital Purchases/Equipment & Machinery	120,000	
					217,820	

Requesting Department Approval: Stan Holden Title: Chief Date: 7/01/10

Finance Department Approval: Jessamie Date: 8/4/10 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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.

Requesting BCC approval for a budget increase to the FEMA Grant (244) cost center to budget a new grant award in the amount of \$217,820 for the Santa Fe County Fire Department to cover the cost of training and a health & fitness program for the firefighters as well as equipment to include emergency generators or exhaust removal systems for four stations. (Grant Attached)

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title

- b) Professional Services (50-xx) and Capital Category (80-xx) detail:

Line Item	Detail (what specific things, contracts, or services are being added or deleted)	Amount
50-03	Medical Services for Firefighters for Fitness Program	57,980
80-03	Emergency Generators/Exhaust Removal Systems	120,000

- 2) Is the budget action for RECURRING expense _____ or for NON-RECURRING (one-time only) expense X

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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

- 3) 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, YES _____ NO X
 - b) Does this include state or federal funds? YES X NO _____
If YES, please cite and attach a copy of statute, if a special appropriation, or include grant name, number, award date and amount, and attach a copy of a award letter and proposed budget.

FEMA Grant Award (Attached)
 - c) Is this request is a result of Commission action? YES _____ NO X
If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc.).
 - d) Please identify other funding sources used to match this request.

222 Fund ¼% Tax available cash.

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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.

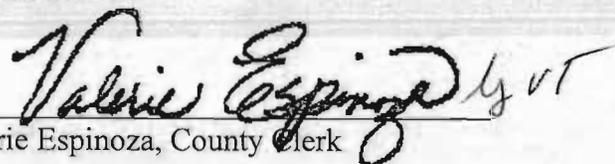
Approved, Adopted, and Passed This 10th Day of August, 2010.

Santa Fe Board of County Commissioners



Harry Montoya, Chairman

ATTEST:



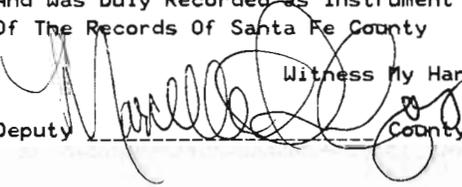
Valerie Espinoza, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

I Hereby Certify That This Instrument Was Filed for Record On The 11TH Day Of August, 2010 at 09:47:12 AM And Was Duly Recorded as Instrument # **1607559** Of The Records Of Santa Fe County


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

