

## SANTA FE COUNTY

Page 1 of 4

RESOLUTION 2010 - 149

## 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<sup>st</sup> 2010, did request the following budget adjustment:Department / Division: Growth Management/Affordable HousingFund Name: Developer Fees Fund (231)Budget Adjustment Type: Budget IncreaseFiscal 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
231	0000	385	0400	Budgeted Cash	290,000	
<b>TOTAL (if SUBTOTAL, check here )</b>					290,000	

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
231	0541	471	7101	Down Payment Assistance (LC)	110,000	
231	0515	471	7101	Down Payment Assistance	140,000	
231	0541	471	5003	Professional Services (LC)	40,000	
<b>TOTAL (if SUBTOTAL, check here )</b>					290,000	

Requesting Department Approval: Jack Kolkmeier *J. Kolkmeier* Title: Division Director Date: 8-5-10Finance Department Approval: Jessie Martinez Date: 8/6/10 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

**SANTA FE COUNTY**  
**RESOLUTION 2010 - 149**

*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**    Name: Jack Kolkmeier                      Dept/Div: Growth Management/Affordable Housing                      Phone No.: 505 995-2711

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

- 1) This request increases the budget to allow for the Affordable Housing Department to disburse Developer Subsidy, Down payment Assistance, and pay for a professional services contract with the University of New Mexico.

a) Employee Actions

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

- 2) Is the budget action for RECURRING expense \_\_\_\_\_ or for NON-RECURRING (one-time only) expense XX

The increase is anticipated to be non-recurring for fiscal year 2011.

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*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

DEPARTMENT CONTACT: Name: Jack Kolkmeier      Dept/Div: Growth Management/Affordable Housing      Phone No.: 505 955-2711

**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 XXX  
If YES, cite statute and attach a copy.  
This is not a state special appropriation
  
  - b) Does this include state or federal funds? YES \_\_\_\_\_ NO XXX  
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.  
This is not a state or federal grant.
  
  - c) Is this request is a result of Commission action? YES \_\_\_\_\_ NO XXX
  
  - d) Please identify other funding sources used to match this request.  
There are no other funding sources to match this request.

SANTA FE COUNTY

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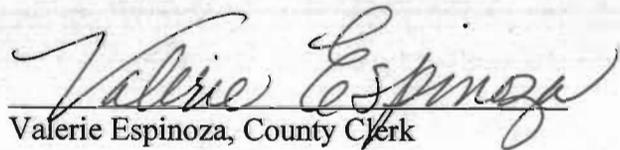
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 31th Day of August, 2010.

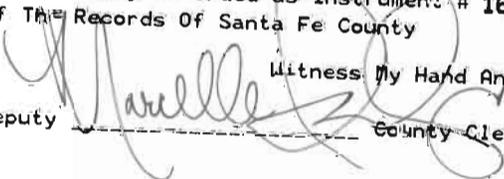
Santa Fe Board of County Commissioners

  
\_\_\_\_\_  
Harry B. Montoya, Chairperson

ATTEST:

  
\_\_\_\_\_  
Valerie Espinoza, County Clerk



COUNTY OF SANTA FE ) BCC RESOLUTIONS  
STATE OF NEW MEXICO ) ss PAGES: 4  
I Hereby Certify That This Instrument Was Filed for  
Record On The 2ND Day Of September, 2010 at 11:29:19 AM  
And Was Duly Recorded as Instrument # 1609625  
Of The Records Of Santa Fe County  
  
Witness My Hand And Seal Of Office  
Valerie Espinoza  
Deputy \_\_\_\_\_ County Clerk, Santa Fe, NM