

SANTA FE COUNTY
RESOLUTION 2010 - 152

Page 1 of 4**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, 2010, did request the following budget adjustment:Department / Division: Fire Department/Fire Administration Fund Name: Fire Administration & Various Fire Districts Fire Fund (244/209)Budget Adjustment Type: Budget Transfer Between Funds 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
209	0831	390	02-44	Operating Transfer In – Chimayo	478.69	
209	0841	390	02-44	Operating Transfer In – Madrid	758.16	
TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/>)					1,236.85	

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
209	0831	422	70-01	Supplies/Rent of Equipment	478.69	
209	0841	422	50-90	Contractual Services/Other Contractual Services	758.16	
244	0801	422	60-01	Supplies/Inventory Exempt		1,236.85
244	0801	490	02-09	Operating Transfer Out – Fire Admin.	1,236.85	
TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/>)					2,473.70	1,236.85

Requesting Department Approval: Stan Holder Title: Chief Date: 7/21/10Finance Department Approval: Irma L. Corning Date: 8/11/10 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 Chimayo and Madrid Fire District Funds (209) to replace funds expended in FY-2009 utilizing the fire district's State Fire Fund Allocation that as a result of a recent audit were determined to be out of compliance with Article 53, Fire Protection Fund, and Title 10, Chapter 25, Part 10, Public Safety and Law Enforcement, State Fire Marshal, and Fire Protection Fund. The Fire Administration (244) cost center will reimburse the Chimayo and Madrid Fire Fund (209) the full amount of the expenditures.

a) Employee Actions

Line Item	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 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 _____ NO X
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
 - c) Is this request 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.

Not Applicable.

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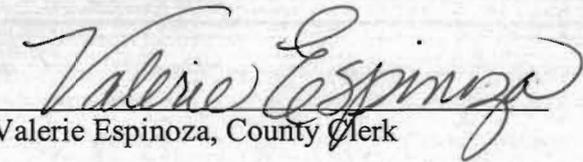
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

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

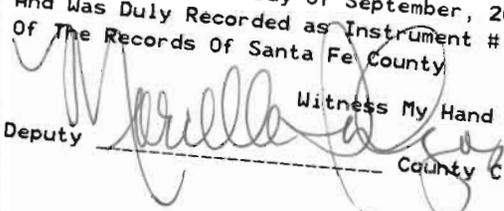
Santa Fe Board of County Commissioners


Harry Montoya, Chairman

ATTEST:


Valerie Espinoza, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss
I Hereby Certify That This Instrument Was Filed for
Record On The 2ND Day Of September, 2010 at 11:29:22 AM
And Was Duly Recorded as Instrument # 1609628
Of The Records Of Santa Fe County
Deputy  Witness My Hand And Seal Of Office
Valerie Espinoza
County Clerk, Santa Fe, NM