

SANTA FE COUNTY

RESOLUTION 2010 - 28

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

Whereas, the Board of County Commissioners meeting in regular session on Feb. 23, 2010, did request the following budget adjustment:

Department / Division: Sheriff's Office Fund Name: Law Enforcement Operation Fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2010 (July 1, 2009 - June 30, 2010)

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
246	1201	372	09.04	Other/NMDOT-Selective Traffic Enforcement (S.T.E.P.) PA# 10-PT-RF-091	12,585.00	
TOTAL (if SUBTOTAL, check here)					12,585.00	

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
246	1201	424	10.25	Salary & Wages / Overtime	11,690.66	
246	1201	424	20.01	Employee Benefits / FICA Regular	724.83	
246	1201	424	20.02	Employee Benefits / FICA Medicare	169.51	
TOTAL (if SUBTOTAL, check here)					12,585.00	

Requesting Department Approval: [Signature] Title: Sheriff Date: 2-2-10

Finance Department Approval: [Signature] Date: 2/10/10 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 3/2/10 Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Greg Solano - Sheriff Dept/Div: Sheriff's Office Phone No.: (505) 986-2455

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.
Request to increase is to budget grant PA# 10-PT-RF-091 which will provide the funding for overtime needed to the Sheriff's office for the S.T.E.P – which is aimed at reducing traffic-related injuries and fatalities in the State of New Mexico.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
246-1201-424-10.25	Salary & Wages / Overtime	Existing / Permanent	Patrol

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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DEPARTMENT CONTACT:

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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
Title: Selective Traffic Enforcement Program (S.T.E.P.)
Project no: 10-PT-RF-091
Award Period: Oct 1, 2009 to Sept 30, 2010
Awarded Amt: \$12,585.00
c) Is this request is a result of Commission action? YES NO X
d) Please identify other funding sources used to match this request. N/A

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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 23rd Day of February, 2010.

Santa Fe Board of County Commissioners

[Signature]
Harry B. Montoya, Chairperson

[Signature]
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 3RD Day Of March, 2010 at 09:38:24 AM
And Was Duly Recorded as Instrument # 1592279
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy County Clerk, Santa Fe, NM

