

**RESOLUTION 2010 - 74**

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

Whereas, the Board of County Commissioners meeting in regular session on April 27, 2010 did request the following budget adjustment:

Department / Division: CM/Finance Division Fund Name: Lodgers' Tax Advertising

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
215	0000	371	90-00	State Grants	\$2,850	
<b>TOTAL (if SUBTOTAL, check here )</b>					\$2,850	

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
215	0320	433	50-03	Contractual Services / Professional Services	\$2,850	
<b>TOTAL (if SUBTOTAL, check here )</b>					\$2,850	

Requesting Department Approval: *[Signature]* Title: Finance Director Date: 4/19/10

Finance Department Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

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**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

DEPARTMENT CONTACT: Name: Evelyn Valencia Dept/Div: CM/Finance Division Phone No.: (505) 996-6363

**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 is a request to budget a Grant received from the New Mexico Department of Tourism for the purpose of promoting tourism for the State of New Mexico through Santa Fe County.

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

This increase is anticipated to be non-recurring for Fiscal Year 2010.

- 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  
If YES, cite statute and attach a copy.

- b) Does this include state or federal funds? YES X NO \_\_\_\_\_

If YES, please cite and attach a copy of statute, or include grant name, number, award date and amount, and attach a copy of an award letter and proposed budget.

New Mexico Department of Tourism Cooperative Marketing Grant Agreement  
Agreement #: 10-418-3002-0085

Amount: \$2,850  
Effective: July 1, 2009 – June 30, 2010

- 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.

Lodgers' Tax receipts will be used to match this request.

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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 27th Day of April, 2010.**

**Santa Fe Board of County Commissioners**

  
\_\_\_\_\_  
Harry Montoya, Chairperson

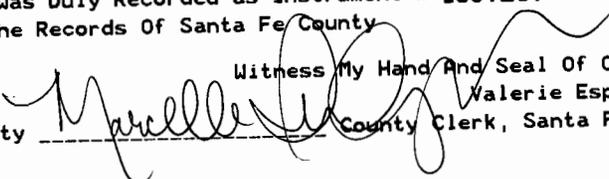
**ATTEST:**

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

COUNTY OF SANTA FE     )  
STATE OF NEW MEXICO    ) ss

BCC RESOLUTIONS  
PAGES: 3

I Hereby Certify That This Instrument Was Filed for  
Record On The 28TH Day Of April, 2010 at 12:56:32 PM  
And Was Duly Recorded as Instrument # **1597257**  
Of The Records Of Santa Fe County

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

