

RESOLUTION 2011 - 124

**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 30, 2011, did request the following budget adjustment:

Department / Division: Public Works/Projects & Facilities

Fund Name: State Special Appropriations Fund (318)

Budget Adjustment Type: Budget Increase

Fiscal Year: 2012 (July 1, 2011 - June 30, 2012)

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
318	0745	385	0600	Budgeted Cash	\$18,658.44	
TOTAL (if SUBTOTAL, check here )					\$18,658.44	

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
318	0745	481	7090	Other Operating Costs	\$18,658.44	
TOTAL (if SUBTOTAL, check here )					\$18,658.44	

Requesting Department Approval: [Signature]

Title: Div. Dir.

Date: 8/16/11

Finance Department Approval: [Signature]

Date: 8/22/2011

Entered by: \_\_\_\_\_

Date: \_\_\_\_\_

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

Date: \_\_\_\_\_

Updated by: \_\_\_\_\_

Date: \_\_\_\_\_

**SANTA FE COUNTY**  
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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:    Name: Agnes Lopez                      Dept/Div: Public Works/Projects & Facilities                      Phone No.: 955-6516

**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.

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
7090	Funds to be reimbursed to the Santa Fe Recovery Center.	\$18,658.44

- 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:

DEPARTMENT CONTACT: Name: Agnes Lopez Dept/Div: Public Works/Projects & Facilities Phone No.: 955-6516

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

Santa Fe County received \$300,000 from the State Legislature on behalf of the Santa Fe Recovery Center to acquire a building for a recovering alcoholic's center in Santa Fe County. The grant was not enough to complete the project therefore The Recovery center donated funds to complete the project. The building has been construction and the project is complete. The remaining funds must be budgeted in the 2012 fiscal year in order to refund the money to the Center.

- 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:

These donated funds were budgeted in the (318) account for the Santa Fe Recovery Project.

- 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 \_\_\_\_\_ 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 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.

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 30th Day of August, 2011.

Santa Fe Board of County Commissioners

*Virginia Vigil*  
Virginia Vigil, Chairperson

ATTEST:

*Valerie Espinoza*  
Valerie Espinoza, County Clerk



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss BCC RESOLUTIONS  
I Hereby Certify That This Instrument Was Filed for PAGES: 4  
Record On The 31ST Day Of August, 2011 at 02:48:12 PM  
And Was Duly Recorded as Instrument # 1644087  
Of The Records Of Santa Fe County  
Deputy *Marcella Salazar* Witness My Hand And Seal Of Office  
Valerie Espinoza  
County Clerk, Santa Fe, NM