

RESOLUTION 2011 - 33

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

Whereas, the Board of County Commissioners meeting in regular session on March 29, 2011, did request the following budget adjustment:

Department / Division: CSD/Open Space Fund Name: General Fund

Budget Adjustment Type: Increase 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
101	7120	372	0900	Federal Grants	\$6,488	
TOTAL (if SUBTOTAL, check here <input type="checkbox"/>)					\$6,488	

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
101	7120	481	8010	Capital Purchases - Roadways & Grounds	\$6,488	
TOTAL (if SUBTOTAL, check here <input type="checkbox"/>)					\$6,488	

Requesting Department Approval: [Signature] Title: 3/29/11 Date: _____

Finance Department Approval: [Signature] Date: 3/29/11 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

RESOLUTION 2011 - 33

BUDGET ADJUSTMENT CONTINUATION SHEET

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
TOTAL (if SUBTOTAL, check here _____)						

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
TOTAL (if SUBTOTAL, check here _____)						

RESOLUTION 2011 - 33

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Colleen Baker Dept/Div: CSD/Open Space Phone No.: 505-992-9868

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 Budget Resolution is to increase the General Fund – Open Space Division to carry forward the balance of a grant (contract #D13367, project #SB-NM05-001-(02)) awarded by the Department of Transportation to develop an interpretive plan and install interpretive signs along the Santa Fe River for El Camino Real National Scenic Byway.

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
8010	To develop an interpretive plan and install interpretive signs along SF River for El Camino Real Nat'l Scenic Byway	\$6,488

- 2) Is the budget action for RECURRING expense _____ or for NON-RECURRING (one-time only) expense x

RESOLUTION 2011 - 33

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Colleen Baker Dept/Div: CSD/Open Space Phone No.: 505-992-9868

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

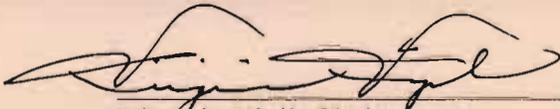
- 3) Does this request impact a revenue source? YES If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following: General Fund
a) If this is a state special appropriation, YES x NO
If YES, cite statute and attach a copy.
b) Does this include state or federal funds? YES x NO
If YES, please cite and attach a copy of statute, if a special appropriation, or include grant name, number, award date and amount, and attach a copy of a award letter and proposed budget.
Funds are derived from the US Department of Transportation Federal Highway Administration (FHWA), SAFETEA-LU Grant through the Title I Scenic Byways Program.
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.

RESOLUTION 2011 - 33

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.

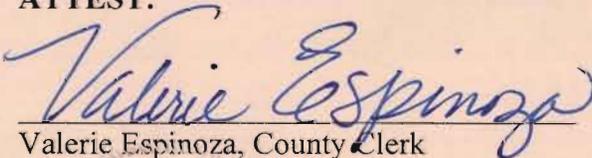
Approved, Adopted, and Passed This 29th Day of March, 2011.

Santa Fe Board of County Commissioners


Virginia Vigil, Chairperson



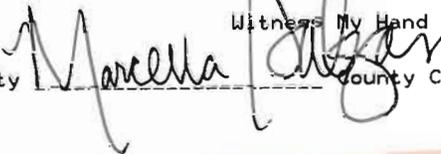
ATTEST:


Valerie Espinoza, County Clerk



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) ss PAGES: 5

I Hereby Certify That This Instrument Was Filed for Record On The 29TH Day Of March, 2011 at 02:33:31 PM And Was Duly Recorded as Instrument # 1630895 Of The Records Of Santa Fe County

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