

**SANTA FE COUNTY**  
**RESOLUTION 2011 - 60**

**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 26, 2011, did request the following budget adjustment:**

Department / Division: Sheriff / Region III Fund Name: Federal Funds; JAG Recovery Act.

Budget Adjustment Type: Budget 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
246	1218	372	0800	Federal Grants / Drug Enforcement (Region III)	1,835.00	
246	9000	385	0100	Budgeted Cash		781.00
<b>TOTAL (if SUBTOTAL, check here )</b>						781.00

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	1218	425	20-01	FICA - Regular	99.00	
246	1218	425	70-42	Sheriff's Expense	836.00	
246	1218	425	80-09	Vehicles	900.00	
246	9028	425	30-05	Gas & Oil		781.00
<b>TOTAL (if SUBTOTAL, check here )</b>					1,835.00	781.00

Requesting Department Approval: [Signature] Title: Sheriff Date: 4-5-11

Finance Department Approval: [Signature] Date: 4/27/11 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: Ralph Lopez / Region III Dept/Div: County Sheriff / Region III Phone No.: 473-7021

**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.  
 The amount of \$1,835.00 is a baseline increase to bring the budgeted amount equal with the Grant Awarded amount through the Department of Public Safety for Fiscal Year 2009.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
2001	Amount increased to complete fiscal year		

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 XX or for NON-RECURRING (one-time only) expense \_\_\_\_\_

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*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

DEPARTMENT CONTACT:

Name: Ralph Lopez Dept/Div: Sheriff's Dept. / Region III Phone No.: 473-7021

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

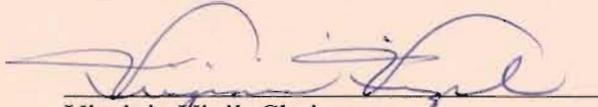
- 3) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:
  - a) If this is a state special appropriation, YES \_\_\_\_\_ NO XX  
If YES, cite statute and attach a copy.
  - b) Does this include state or federal funds? YES XX 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. These monies are a Federal Award through the ARRA Grant FY09 which is a two year Award; amount is \$248,724.00, Sub Grant Agreement RA-JAG-Region III-SFY10
  - c) Is this request is a result of Commission action? YES \_\_\_\_\_ NO XX  
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.

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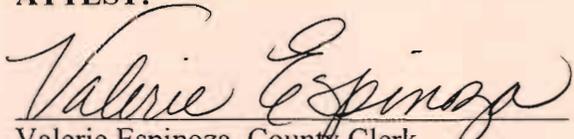
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 26th Day of April, 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: 4

I Hereby Certify That This Instrument Was Filed for Record On The 27TH Day Of April, 2011 at 10:36:43 AM And Was Duly Recorded as Instrument # 1633474 Of The Records Of Santa Fe County

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