

SANTA FE COUNTY

RESOLUTION 2013 - 11

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

Whereas, the Board of County Commissioners meeting in regular session on January 29, 2013, did request the following budget adjustment:

Department / Division: Country Sheriff Fund Name: Law Enforcement Operations Fund (LEOF-246)

Budget Adjustment Type: Budget Increase Fiscal Year: 2013 (July 1, 2012 - June 30, 2013)

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	1221	371	0900	State Grants / Selective Traffic Enforcement Prog	\$2,824	
246	1222	372	0904	Federal Grants / Operation Driving While Intoxicated	\$33,694	
246	1229	371	0900	State Grants / Operation Buckle Down	\$3,358	
TOTAL (if SUBTOTAL, check here)					\$39,876	

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	1221	424	1025	Salary & Wages / Overtime	\$2,784	
246	1221	424	2002	Employee Benefits / FICA-Medicare	\$40	
246	1222	424	1025	Salary & Wages / Overtime	\$33,212	
246	1222	424	2002	Employee Benefits / FICA-Medicare	\$482	
246	1229	424	1025	Salary & Wages / Overtime	\$3,310	
246	1229	424	2002	Employee Benefits / FICA-Medicare	\$48	
TOTAL (if SUBTOTAL, check here)					\$39,876	

Requesting Department Approval: [Signature] Title: Sheriff Date: 1-16-13

Finance Department Approval: [Signature] Date: 1/17/13 Entered by: _____ Date: _____

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

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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)						

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Robert Garcia - 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 for increases to the following budgets for overtime/personal services awarded to the Sheriff's Office by NMDOT/Programs Divisions, Traffic Safety Bureau:
 - PA# 13-AL-64-091 / Operation DWI
 Funding from this grant will assist the Santa Fe County Sheriff's Office with the needed overtime to conduct DWI Sobriety Check points and Saturation Patrols aimed at reducing alcohol-related crashes, injuries, and deaths.
 - PA# 13-OP-RF-091/Operation Buckle Down
 Funding from this grant assist the Santa Fe County Sheriff's Office with the overtime needed to participate in a minimum of 1 nighttime seatbelt operation in the CIOT national mobilization operation.
 - PA# 13-RF-01-091/Selective Traffic Enforcement Program (S.T.E.P)
 Funding from this program will pay for the overtime needed to conduct traffic activities aimed at reducing traffic related injuries and fatalities.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
ODWI / 10.25	Salary & Wages / Overtime	Existing/Permanent	Patrol
OBD / 10.25	Salary & Wages / Overtime	Permanent	Patrol/Deputy
S.T.E.P. / 10.25	Salary & Wages/Overtime	Existing/Permanent	Patrol/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:

Name: Robert Garcia - 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.):

- 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, if a special appropriation, or include grant name, number, award date and amount, and attach a copy of a award letter and proposed budget.

Operation Driving While Impaired (ODWI)

Project No.: 13-AL-64-091
 Award Period: October 1, 2012 to September 30, 2013
 Amount Awarded: \$33,694.00

Operation Buckle Down (OBD)

Project No.: 13-OP-RF-091
 Award Period: October 1, 2012 to September 30, 2013
 Amount Awarded: \$3,358.00

Selective Traffic Enforcement Program (S.T.E.P.)

Project No.: 13-RF-01-091
 Award Period: October 1, 2012 to September 30, 2013
 Amount Awarded: \$2,824.00

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- 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.
N/A

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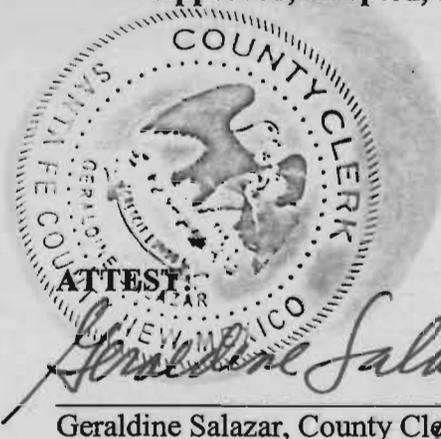
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 29th Day of January, 2013.

Santa Fe Board of County Commissioners

Kathy Holian

Kathy Holian, Chairperson

 ATTEST:
Geraldine Salazar 1/29/13
Geraldine Salazar, County Clerk



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) ss PAGES: 6
I Hereby Certify That This Instrument Was Filed for
Record On The 4TH Day Of February, 2013 at 03:09:27 PM
And Was Duly Recorded as Instrument # 1695662
Of The Records Of Santa Fe County
Deputy Merelle Salazar Witness My Hand And Seal Of Office
Geraldine Salazar
County Clerk, Santa Fe, NM