

SANTA FE COUNTY

RESOLUTION 2013 - 76

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 27, 2013 did request the following budget adjustment:

Department / Division: Sheriff's Department / Region III

Fund Name: Law Enforcement Operational Fund (246)

Budget Adjustment Type: Baseline Increase

Fiscal Year: 2014 (July 1, 2013 - June 30, 2014)

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	1208	372	0600	Federal Grants / Drug Enforcement	618.71	
TOTAL (if SUBTOTAL, check here )					618.71	

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	1208	425	73-02	Sheriff's Expense	618.71	
TOTAL (if SUBTOTAL, check here )					618.71	

Requesting Department Approval: [Signature] Title: Chief Sheriff Date: 8-13-13  
 Finance Department Approval: [Signature] Date: 8/14/13 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_  
 County Manager Approval: [Signature] Date: 8-27-13 Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

**SANTA FE COUNTY**  
**RESOLUTION 2013 - 76**

**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**DEPARTMENT CONTACT:** Name: Ralph Lopez, Program Manager Dept/Div: Sheriff's Dept. / Region III Phone No.: 505-473-7021

**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 request is to budget grant funding carried over as a result of the HIDTA Director approving the extension of funds from previous fiscal year, HIDTA Award G12SN0011A to be spent within this calendar year.

a) Employee Actions None

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

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

SANTA FE COUNTY

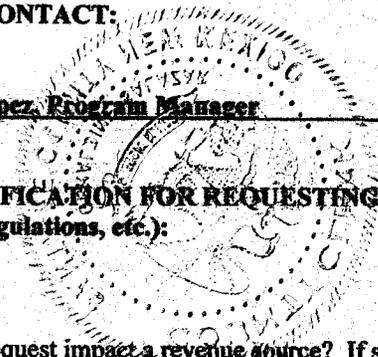
RESOLUTION 2013 - 76

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Ralph Lopez, Program Manager Dept/Div: Sheriff's Dept. / Region III Phone No.: 505-473-7021

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. HIDTA Grant Award G12N0011A – Approved Extension letter attached.
  - 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.

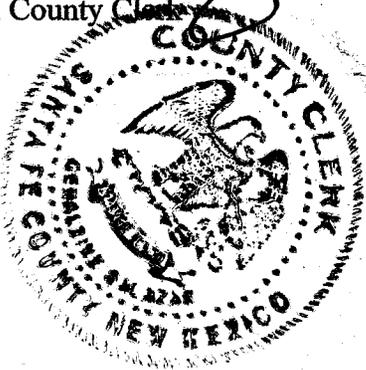
Approved, Adopted, and Passed This 27th Day of August, 2013.

Santa Fe Board of County Commissioners

Kathy Holan  
Kathy Holan, Chairperson

ATTEST:

Geraldine Salazar  
Geraldine Salazar, County Clerk  
8/27/2013



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss

BCC RESOLUTIONS  
PAGES: 4

I Hereby Certify That This Instrument Was Filed for  
Record On The 29TH Day Of August, 2013 at 11:01:48 AM  
And Was Duly Recorded as Instrument # 1716528  
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office  
Geraldine Salazar  
Deputy County Clerk, Santa Fe, NM

Mirella Salazar