

SANTA FE COUNTY
RESOLUTION 2016 - 136

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

Whereas, the Board of County Commissioners meeting in regular session on November 8, 2016, did request the following budget adjustment:

Department / Division: Fire Department/Fire Administration Fund Name: Fire Operations Fund (244)

Budget Adjustment Type: Budget Increase Fiscal Year: 2017 (July 1, 2016 - June 30, 2017)

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 |
|----------------------------------|---------------------------|------------------------|----------------------|--------------------------------|-----------------|-----------------|
| 244 | 0000 | 360 | 01-90 | Revenue/Miscellaneous Donation | 1,000 | |
| TOTAL (if SUBTOTAL, check here) | | | | | 1,000 | |

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 |
|----------------------------------|---------------------------|------------------------|----------------------|--------------------------|-----------------|-----------------|
| 244 | 0801 | 421 | 60-12 | Supplies/Food Provisions | 1,000 | |
| TOTAL (if SUBTOTAL, check here) | | | | | 1,000 | |

Requesting Department Approval: [Signature] Title: DS Chief Date: 10/16/16

Finance Department Approval: [Signature] Date: 10-27-16 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 10-8-16 Updated by: _____ Date: _____

SANTA FE COUNTY
RESOLUTION 2016 126

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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.

Requesting BCC approval for a budget increase to the Fire Operations Fund (244) for a monetary donation made by Hope Curtis to the Santa Fe County Fire Department to be utilized for the purchases of rehabilitation supplies used at extended fire and EMS scenes by the SFC Fire Department field staff and volunteers.

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 |
|-----------|--|--------|
| | | |
| | | |
| | | |

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

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DEPARTMENT CONTACT:

Name: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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
 - 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. 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.

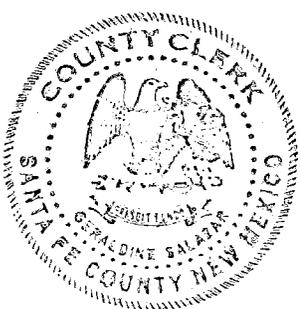
Approved, Adopted, and Passed This 8th Day of November, 2016.

Santa Fe Board of County Commissioners

Miguel Chavez
Miguel Chavez, Chair

ATTEST:

Geraldine Salazar
Geraldine Salazar, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss BCC RESOLUTIONS
PAGES: 4

I Herby Certify That This Instrument Was Filed for Record On The 14TH Day Of November, 2016 at 03:32:18 PM and Was Duly Recorded as Instrument # 1809570 of The Records Of Santa Fe County

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

