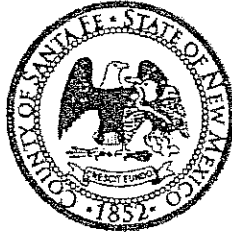


Henry P. Roybal
Commissioner, District 1

Anna Hansen
Commissioner, District 2

Robert A. Anaya
Commissioner, District 3



Anna T. Hamilton
Commissioner, District 4

Edward H. Moreno
Commissioner, District 5

Katherine Miller
County Manager

To: Board of County Commissioners

Fr: Don Moya, Finance Division Director

CC: Undersheriff Ron Madrid

Date: April 12, 2017

Re: Resolution No. 2017 - _____, A Resolution Requesting a Budget Increase to the Law Enforcement Operations Fund (246) to Budget One (1) Grant Awarded Through the Bureau of Land Management / \$5,000 (Finance Division/Don Moya)

Issue:

The Santa Fe Sheriff's Office is requesting a budget increase to budget grant funds for overtime reimbursement.

Background:

Funds are to be used for overtime for law enforcement services at Santa Ana Cruz Lake Recreation area, urban interface area known as the Camel Tracks, and the Buchman Road/Diablo Canyon.

Action Requested:

The Sheriff's Office requests approval to increase the Law Enforcement Operation Fund (246) in the amount of \$5,000.

SANTA FE COUNTY

RESOLUTION 2017-

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

Whereas, the Board of County Commissioners meeting in regular session on _____, did request the following budget adjustment

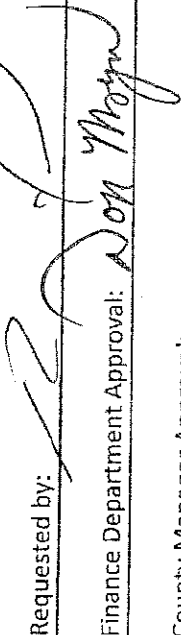


Department / Division: Sheriff's Office Fund Name: LEOF/BLM: 246-1235
 Budget Adjustment Type: Increase Fiscal Year: 2017 (July 1, 2016 - June 30, 2017)

BUDGETED REVENUE: (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	1235	380	0106	BUREAU OF LAND MANAGEMENT	\$ 5,000	
TOTAL (IF SUBTOTAL, check here) →					\$ 5,000	\$ -

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
246	1235	424	1025	SALARY & WAGES / OVERTIME	\$ 5,000	
TOTAL (IF SUBTOTAL, check here) →					\$ 5,000	\$ -

Requested by:  Title: 
 Date: 7-18-17 Entered by:  Date: _____
 Finance Department Approval: _____ Date: _____
 County Manager Approval: _____ Date: _____

SANTA FE COUNTY

RESOLUTION 2017-

ATTACH ADDITIONAL SHEETS IF NECESSARY

DEPARTMENT CONTACT:

Name: Undersheriff Ron Madrid Dept/Div: Sheriff's Office Phone No: 505-986-2457

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 Sheriff's Office received additional grant funds from the Bureau of Land Management (BLM), the Farmington office in the amount of \$15,000. These funds are to be used for Law Enforcement services at Santa Cruz Lake Recreation Area, urban interface area known as the Camel Tracks, and the Buchanan Road/Diablo Canyon in accordance with the Statement of Work.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass Overtime)	Position Type (permanent, term)	Position Title
10.25	OVERTIME	FULL-TIME/PERMANENT	DEPUTY / 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

SANTA FE COUNTY

RESOLUTION 2017- _____

ATTACH ADDITIONAL SHEETS IF NECESSARY

DEPARTMENT CONTACT:

Name: Undersheriff Ron Madrid Dept/Div: Sheriff's Office Phone No: 505-986-2457

3) Does this request impact a revenue source? If YES, 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 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 an award letter and proposed budget.

Name: Bureau of Land Management

Grant Number: L13PX00442

Award Date: 5/1/17 - 4/30/18

Amount: \$15,000

c. Is this request 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.

SANTA FE COUNTY

RESOLUTION 2017- _____

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 _____ Day of _____, 2017.

Santa Fe Board of County Commissioners

Henry P. Roybal, Chairperson

ATTEST:

Geraldine Salazar, County Clerk

Received during budget preparation, will be going to BCC/CM/Legal/Purchasing for review April 2017

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1 CONTRACT ID CODE	PAGE OF PAGES	
2 AMENDMENT/MODIFICATION NO 0007		3 EFFECTIVE DATE See Block 16C	4 REQUISITION/PURCHASE REQ. NO. 0040325631	5 PROJECT NO. (If applicable)
6A ADMINISTERED BY	6B CODE LXF	7 ADMINISTERED BY (If other than Item 6) CODE		
5.1 NM-FARMINGTON DIST OFC (NMF00) 6251 COLLEGE BLVD STE A FARMINGTON NM 87402				
8 NAME AND ADDRESS OF CONTRACTOR (No. street, county, State and ZIP Code) SANTA FE, COUNTY OF Attn: GOVERNMENT POC 102 GRANT AVE SANTA FE NM 87501-2061		9A AMENDMENT OF SOLICITATION NO <input checked="" type="checkbox"/>		
		9B DATED (SEE ITEM 11)		
		10A MODIFICATION OF CONTRACT/ORDER NO. L13PX00442 <input checked="" type="checkbox"/>		
		10B DATED (SEE ITEM 13) 04/02/2013		
CODE 0070017436	FACILITY CODE			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers is extended, is not extended.
 Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12 ACCOUNTING AND APPROPRIATION DATA (If required)
 01 Net Increase: \$15,000.00

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

<input type="checkbox"/>	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
<input type="checkbox"/>	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation data, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
<input type="checkbox"/>	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
<input checked="" type="checkbox"/>	D. OTHER (Specify type of modification and authority) FAR 52.217-9 OPTION TO EXTEND THE TERM OF THE CONTRACT

E. IMPORTANT: Contractor is not, is required to sign this document and return 1 copies to the issuing office

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)
 DUNS#053297131

Invoice Review Required: Y

THE PURPOSE OF MODIFICATION 0007 IS TO:

1. BILATERALLY EXERCISE OPTION YEAR FOUR (4) IN ACCORDANCE WITH FAR 52.217-9;
2. PERIOD OF PERFORMANCE IS 05/01/2017 TO 04/30/2018;
3. TOTAL AMOUNT OBLIGATED FOR THIS MODIFICATION IS \$15,000.00;
4. NEW TOTAL OBLIGATED AMOUNT FOR THIS AWARD IS \$70,500.00;
5. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

Delivery: 04/30/2018

Payment Terms:

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect

15A NAME AND TITLE OF SIGNER (Type or print)		16A NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Eleanor Tuppeconnie	
15B CONTRACTOR/OFFEROR	15C DATE SIGNED	16B UNITED STATES OF AMERICA	16C DATE SIGNED
(Signature of person authorized to sign)		(Signature of Contracting Officer)	

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
L13PX00442/0007

PAGE OF
2 2

NAME OF OFFEROR OR CONTRACTOR
SANTA FE, COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
00014	<p>PP30 Delivery Location Code: 0004276462 BLM-NMSO-SD OFFICE 301 DINOSAUR TRAIL SANTA FE NM 87508 US</p> <p>Account Assignm: K G/L Account: 6100.252R0 Business Area: L000 Commitment Item: 252R00 Cost Center: LLW0120200 Functional Area: L10200000.NU0000 Fund: 17XL1109AF Fund Center: LLW0120200 Project/WBS: LX.SI.LEAG0000 PR Acct Assign: 01 FOB: Destination Period of Performance: 05/01/2013 to 04/30/2018</p> <p>Change Item 00014 to read as follows (amount shown is the obligated amount):</p> <p>Option Year Four (4) - Law Enforcement Services Period of Performance: 05/01/2017 to 04/30/2018</p>				15,000.00



