

SANTA FE COUNTY

RESOLUTION 1999 - III

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 31, 1999, did request the following budget adjustment:

1683555

Department / Division: Sheriff Department / Region 3-Program Income Fund Name: General Fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2000 (July 1, 1999 - June 30, 2000)

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
101	1205	350	0400	Region 3 Program Income	13,756.25	
<b>TOTAL (if SUBTOTAL, check here )</b>					13,756.25	

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
101	1205	425	70-42	Other Operating Costs/Sheriff Expense	13,756.25	
<b>TOTAL (if SUBTOTAL, check here )</b>					13,756.25	

Requesting Department Approval: [Signature] Title: County Sheriff Date: 8-30-99

Finance Department Approval: [Signature] Date: 8-31-99 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: [Signature] Date: 8-1-99

**SANTA FE COUNTY**  
**RESOLUTION 1999 - 111**

*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**

Name: Raymond L. Sisneros      Dept/Div: Sheriff Department      Phone No.: 986-2400

**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.**  
This request is a percentage of forfeiture proceedings, which Region 3 is entitled to and is in a county account. This money will be for narcotic program use.
- 2) **Why was this request not included in the Fiscal Year 1999 Operating Budget?**  
The money is there in a county account, which at this time needs to be placed in a budget. This is why the placement is being requested.
- 3) **Is the transfer recurring or non-recurring and what are the future funding impacts of this request?**  
This request is non-recurring. Future funding is unknown.
- 4) **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, cite statute and attach a copy.**  
This is not a state special appropriation.
  - b) **If this is a state or federal grant, cite grant name, number, award date and amount.**  
This is not from a state or federal grant.

1683556

**SANTA FE COUNTY**  
**RESOLUTION 1999 - 111**

*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**

Name: Raymond L. Sisneros Dept/Div: Sheriff Department Phone No.: 986-2400

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

- 4) (Continued):
  - c) If this request is a result of Commission action, please cite and attach a copy of supporting documentation.  
This request is not the result of Commission action.
  
  - d) Please identify other funding sources that can be used to match this request.  
There are no other available funds for this request.
  
- 5) **If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.**  
This request does not increase the Capital Purchase category.
  
- 6) **Does this request have an FTE impact for the department/division? If request increases FTE, include number of positions, position type (term, permanent, etc.), and the future funding impact and revenue source.**  
This request does not have an FTE impact.

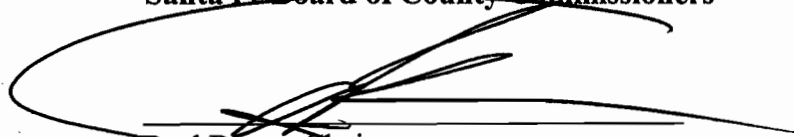
1683557

SANTA FE COUNTY  
RESOLUTION 1999 - 111

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.

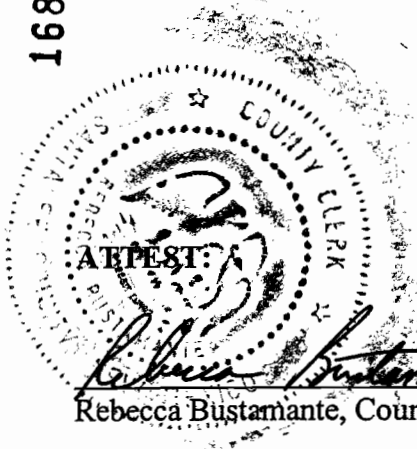
Approved, Adopted, and Passed This 31<sup>st</sup> Day of August, 1999.

Santa Fe Board of County Commissioners



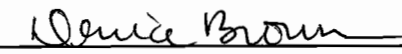
Paul Duran, Chairperson

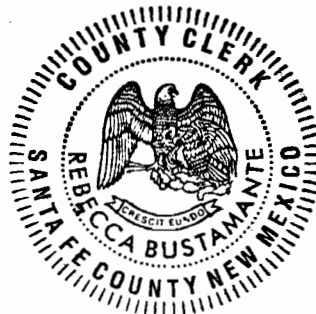
1683558



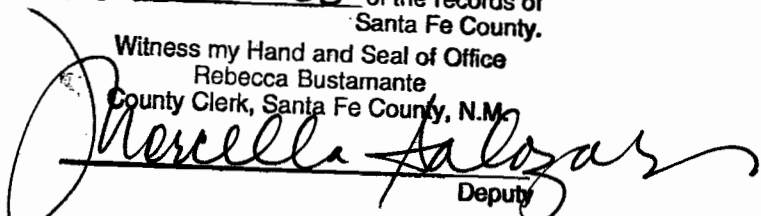
  
Rebecca Bustamante, County Clerk

Approved As To Form.

By   
Denice Brown, County Attorney



1089110  
COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) SS  
I hereby certify that this instrument was filed  
for record on the 7 day of Sept A.D.  
19 99, at 9:50 o'clock a m  
and was duly recorded in book 1683  
page 555-558 of the records of  
Santa Fe County.

Witness my Hand and Seal of Office  
Rebecca Bustamante  
County Clerk, Santa Fe County, N.M.  
  
Deputy