

SANTA FE COUNTY

RESOLUTION 2000 - 04

1729691

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

Whereas, the Board of County Commissioners meeting in regular session on Jan. 25, 2000, did request the following budget adjustment:

Department / Division: County Sheriff / Administration 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	1201	360	0102	Contributions, Donations & Agreements/Sheriff	200.00	
<b>TOTAL (if SUBTOTAL, check here )</b>					200.00	

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	1201	424	6008	Supplies/Field Supplies	200.00	
<b>TOTAL (if SUBTOTAL, check here )</b>					200.00	

Requesting Department Approval: [Signature] Title: Under Sheriff Date: 1-11-00

Finance Department Approval: [Signature] Date: 1/18/00 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: [Signature] Date: 1-24-2000

SANTA FE COUNTY  
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*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.**  
To budget a \$200.00 donation received from Ms. Nancy G. Dickenson for K-9 supplies.
- 2) **Why was this request not included in the Fiscal Year 1999 Operating Budget?**  
It was not anticipated that this donation would be received.
- 3) **Is the transfer recurring or non-recurring and what are the future funding impacts of this request?**  
This increase is non-recurring.
- 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 increase is not a state or federal grant.

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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 funding sources to match 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 impact 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.

1729693

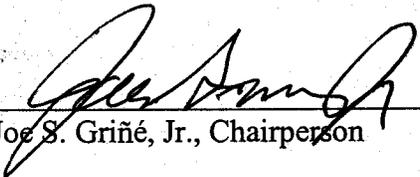
SANTA FE COUNTY

RESOLUTION 2000 - 04

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 25<sup>th</sup> Day of January, 2000.

Santa Fe Board of County Commissioners

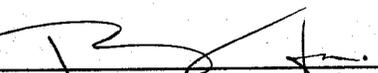
  
\_\_\_\_\_  
Joe S. Griñe, Jr., Chairperson

1729694



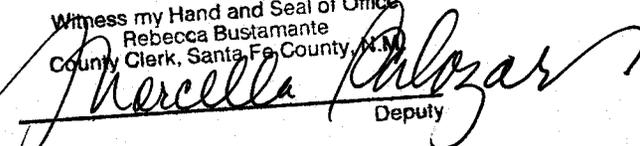
  
\_\_\_\_\_  
Rebecca Bustamante, County Clerk

Approved As To Form.

By   
\_\_\_\_\_  
Denice Brown, County Attorney



1104.188 } SS  
COUNTY OF SANTA FE  
STATE OF NEW MEXICO  
I hereby certify that this instrument was filed  
for record on the 26 day of Jan A.D.  
20 00 at 8:18 o'clock PM  
and was duly recorded in book 1729  
page 691-694 of the records of  
Santa Fe County.

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