

SANTA FE COUNTY
RESOLUTION 2001 - 148

Page ____ of ____

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

Whereas, the Board of County Commissioners meeting in regular session on September 25, 2001, did request the following budget adjustment:

Department / Division: Sheriff's Office Fund Name: Correction Fees

Budget Adjustment Type: Increase Fiscal Year: 2002 (July 1, 2001 - June 30, 2002)

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
201	0000	385	0200	Budgeted Cash - State Funds	30,000.00	
TOTAL (if SUBTOTAL, check here)						

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
201	0130	419	7031	Other Operating Costs - Care of Prisoners	30,000.00	
TOTAL (if SUBTOTAL, check here)						

Requesting Department Approval: _____ Title: _____ Date: 9-18-01

Finance Department Approval: _____ Date: 9-19-01 Entered by: _____ Date: _____

County Manager Approval: _____ Date: 9-25-01

SANTA FE COUNTY
RESOLUTION 2001 - 148

Page ____ of ____

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Susan Lucero Dept/Div: Finance Phone No.: 995-2781

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 has exhausted its departmental budget for care of prisoner costs and expects to incur more charges throughout the fiscal year.
- 2) Why was this request not included in the Fiscal Year 2002 Operating Budget?
Budgeted expenditures were appropriated for this fiscal year, but due to increased costs above what has been incurred historically, there is insufficient budget within the Sheriff's department for care of prisoner charges.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
The increased expenditure is recurring and will impact the need for future funding of this type of request.
- 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 funded through a recurring state appropriation received quarterly through the Supreme Court of New Mexico, Administrative Office of the Courts.
 - b) If this is a state or federal grant, cite grant name, number, award date and amount.
State allotment received through the Supreme Court of New Mexico, Administrative Office of the Courts.

SANTA FE COUNTY
RESOLUTION 2001 - 148

Page ____ of ____

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: _____ Dept/Div: _____ Phone No.: _____

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 a result of Commission action.
 - d) Please identify other funding sources that can be used to match this request.

No other funding sources are required as a match 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 impact the Capital Purchases 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.

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SANTA FE COUNTY
RESOLUTION 2001 - 148


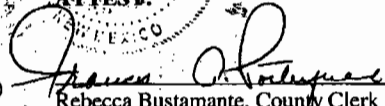
Page ____ of ____

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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 25th Day of September, 2001.

Santa Fe Board of County Commissioners

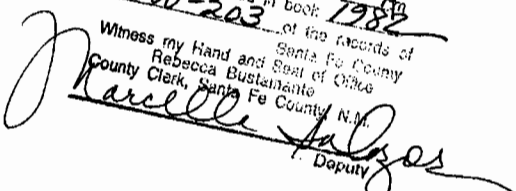

Paul Duran, Chairperson


ATTEST

for: Rebecca Bustamante, County Clerk

Approved As To Form.

By 
Steve Kopelman, County Attorney



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COUNTY OF SANTA FE
STATE OF NEW MEXICO } SS
I hereby certify that this instrument was filed
for record on the 28 day of Sept A.D.
20 01 at 8:42 o'clock PM
and was duly recorded in book 1982
page 200-203
Witness my Hand and Seal of Office
Santa Fe County
County Clerk, Santa Fe County, N.M.

Marcelle Alvarez
Deputy