

## SANTA FE COUNTY

RESOLUTION 2001 - 40

1880188

Page 1 of 4**A RESOLUTION REQUESTING AUTHORIZATION TO MAKE THE BUDGET ADJUSTMENT DETAILED ON THIS FORM**

Whereas, the Board of County Commissioners meeting in regular session on March 27, 2001, did request the following budget adjustment:

Department / Division: County Sheriff / Region III - Program Income Fund Name: General FundBudget Adjustment Type: Budget Increase Fiscal Year: 2001 (July 1, 2000 - June 30, 2001)

BUDGETED REVENUES: (use continuation sheet, if necessary)

| FUND<br>CODE<br>XXX                                       | DEPARTMENT/<br>DIVISION<br>XXXX | ACTIVITY<br>BASIC/SUB<br>XXX | ELEMENT/<br>OBJECT<br>XXXX | REVENUE<br>NAME                      | INCREASE<br>AMOUNT | DECREASE<br>AMOUNT |
|-----------------------------------------------------------|---------------------------------|------------------------------|----------------------------|--------------------------------------|--------------------|--------------------|
| 101                                                       | 1205                            | 360                          | 0500                       | Misc. Revenue / Sale of Fixed Assets | 1,700              |                    |
| TOTAL (if SUBTOTAL, check here <input type="checkbox"/> ) |                                 |                              |                            |                                      | 1,700              |                    |

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

| FUND<br>CODE<br>XXX                                       | DEPARTMENT/<br>DIVISION<br>XXXX | ACTIVITY<br>BASIC/SUB<br>XXX | ELEMENT/<br>OBJECT<br>XXXX | CATEGORY / LINE ITEM<br>NAME                     | INCREASE<br>AMOUNT | DECREASE<br>AMOUNT |
|-----------------------------------------------------------|---------------------------------|------------------------------|----------------------------|--------------------------------------------------|--------------------|--------------------|
| 101                                                       | 1205                            | 425                          | 7008                       | Other Operating Costs / Insurance (Non-Employee) | 1,700              |                    |
| TOTAL (if SUBTOTAL, check here <input type="checkbox"/> ) |                                 |                              |                            |                                                  | 1,700              |                    |

Requesting Department Approval: [Signature] Title: Under Sheriff Date: 03-19-01Finance Department Approval: Katherine Miller Date: 3-20-01 Entered by: [Signature] Date:           County Manager Approval: [Signature] Date: 3-29-01

SFC CLERK RECORDED 07/19/2004

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**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**DEPARTMENT CONTACT:**

Name: Raymond L. Sisneros, Sheriff Dept/Div: County Sheriff 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 to budget proceeds received from the sale of Region III vehicles.
- 2) Why was this request not included in the Fiscal Year 2001 Operating Budget?  
This information was unknown at the time the Fiscal Year 2001 operating budget was being prepared.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?  
This request is anticipated to be non-recurring for FY01.
- 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:  
This request increases the sale of fixed assets revenue.
  - a) If this is a state special appropriation, cite statute and attach a copy.  
This request is not a state special appropriation.
  - b) If this is a state or federal grant, cite grant name, number, award date and amount.  
This request is not a state or federal grant.

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Page 3 of 4**ATTACH ADDITIONAL SHEETS IF NECESSARY.****DEPARTMENT CONTACT:**Name: Raymond L. Sisneros, SheriffDept/Div: County SheriffPhone 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 a 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 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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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 27<sup>th</sup> Day of March, 2001.

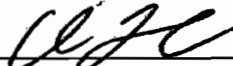
Santa Fe Board of County Commissioners

  
Paul Duran, Chairperson

ATTEST

  
Rebecca Bustamante, County Clerk

Approved As To Form.

By   
Steve Kopelman, County Attorney



COUNTY OF SANTA FE  
STATE OF NEW MEXICO 11501326  
I hereby certify that this instrument was filed  
for record on the 29 day of March A.D.  
20 01 at 4:00 o'clock P.m.  
and was duly recorded in book 1880  
page 188-191 of the records of  
Santa Fe County  
Witness my Hand and Seal of Office  
Rebecca Bustamante  
County Clerk, Santa Fe County, N.M.  
  
Deputy

SFC CLERK RECORDED 07/19/2004