

1893232  
2323681

**SANTA FE COUNTY**  
**RESOLUTION 2001- 52**

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

Whereas, the Board of County Commissioners meeting in regular session on April 24, 2001, did request the following budget adjustment:

Department/Division: Community Health & Economic Development/Housing Authority

Fund Name: Section 8 Programs

Budget Adjustment Type: Budget Increase

Fiscal Year: 2001: (July 1, 2000 - June 30, 2001)

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
227	0000	381	01-00	Subsidies / Housing & Urban Development (HUD)	69,943	
228	0450	381	01-00	Subsidies / Housing & Urban Development (HUD)	38	
<b>TOTAL (if SUBTOTAL, check here <input type="checkbox"/>)</b>					<b>69,981</b>	

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
227	0449	471	50-90	Other Contractual Services	59,212	
227	0449	471	50-91	Other Contractual Services: Admin. Fee Port Outs	16,212	
227	0000	490	01-00	Operating Transfer Out		5,481
228	0450	471	50-90	Other Contractual Services		1,968
228	0450	490	01-00	Operating Transfer Out	2,006	
<b>TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/>)</b>					<b>77,430</b>	<b>7,449</b>

Requesting Department Approval: Robert A. Anaya

Title: Executive Director

Date: 4/17/01

Finance Department Approval: Katherine Miller Date: 4/19/01

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

SANTA FE COUNTY

RESOLUTION 2001- 52

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Robert A. Anaya

Dept/Div: Community Health & Economic Development/Housing Authority

Phone #: 992-3056

1893233  
3323691

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 increases the Housing Authority's Section 8 Funds (227 & 228) in order to reconcile the County Budget to the revised HUD Budget effective April 1, 2001.

- 2) Why was this request not included in the fiscal year 2001 Operating Budget?

A budget was established for our Section 8 Programs during the fiscal year 2001 Operating Budget; however, a budget revision was approved by HUD in order accommodate an increase in leased Section 8 Units.

- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?

This budget increase and the resulting expenditures are non-recurring. There are no future funding impacts.

- 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 request is not a state special appropriation.

- b) If this is a state or federal grant, cite grant name, number, award date and amount.

Federal Grant Name:	FY 2001 Housing Vouchers Program	FY 2001 Existing Certificates Program
Federal Grant Number:	NM050 VO 0018-0021	NM050 CE 0006
Award Date:	03/28/01	03/28/01
Award Amount:	\$ 1,402,251	\$ 120,086

1893234

SANTA FE COUNTY  
RESOLUTION 2001- 52

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Robert A. Anaya

Dept/Div: Community Health & Economic Development/Housing Authority

Phone #: 992-3056

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 that can be used 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 affect 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 has no FTE impact.

SANTA FE COUNTY

RESOLUTION 2001- 52

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.

1893235  
5323681

Approved, Adopted, and Passed This 24th Day of April, 2001.

Santa Fe Board of County Commissioners



Paul D. Duran, Chairperson



Rebecca Bustamante  
Rebecca Bustamante, County Clerk



Approved As To Form.

By Steve Kopelman  
Steve Kopelman, County Attorney

1153 498

COUNTY OF SANTA FE } SS  
STATE OF NEW MEXICO  
I hereby certify that this instrument was filed  
for record on the 25 day of April A.D.  
20 01 at 12:08 o'clock pm  
and was duly recorded in book 1893  
page 232-235 of the records of  
Santa Fe County

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

Marcella Pulgar  
Deputy