

1950424

**SANTA FE COUNTY**  
**RESOLUTION 2001- 99**

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

Whereas, the Board of County Commissioners meeting in regular session on July 31, 2001, did request the following budget adjustment:

Departments/Divisions: Community Health & Economic Development/ DWI Program Fund Name: Local DWI Program

Budget 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                              | 0404                            | 371                          | 04-00                      | DWI/State Grants | \$56,360           |                    |
| TOTAL (if SUBTOTAL, check here ) |                                 |                              |                            |                  | \$56,360           |                    |

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                              | 0404                            | 464                          | 60-08                      | Field Supplies               | \$9,170            |                    |
| 101                              | 0404                            | 464                          | 60-90                      | Other Supplies               | \$2,556            |                    |
| 101                              | 0404                            | 464                          | 80-03                      | Equipment & Machinery        | \$36,539           |                    |
| 101                              | 0404                            | 464                          | 80-04                      | Furniture & Fixtures         | \$8,095            |                    |
| TOTAL (if SUBTOTAL, check here ) |                                 |                              |                            |                              | \$56,360           |                    |

Requesting Department Approval: [Signature]  
 Robert A. Anaya

Title: Director Date: 7/18/01

Finance Department Approval: [Signature] Date: 7-24-01

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

County Manager Approval: [Signature] Date: 7-20-01

Date: 7-31-01

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1950425 ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Robert A. Anaya

Dept/Div: Community Health & Economic Development/ DWI Program

Phone #: 992-3060

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 CHEDD budget by \$56,360.00. The purpose of this request is to increase the budget to include additional monies available from the Local DWI Program through the Department of Finance and Administration of the State of New Mexico for FY-2001.

- 2) Why was this request not included in the Fiscal Year 2001 Operating Budget?

The exact total of monies available are not known until later on in the fiscal year so we were unable to include the full amount in our budget.

- 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 nonrecurring. 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:

This request includes State funding.

- 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 a State grant.

Grant Name : Local DWI Program  
Award Date : 07/01/00 Annual Grant

Grant Number : None  
Amount : \$770,638.00

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Robert A. Anaya

Dept/Div: Community Health & Economic Development/DWI Program

Phone #: 992-3060

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.  
Match is in-kind only.
- 5) If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.  
One (1) copier, office partitions for Teen Court located at Magistrate Court, one (1) binding machine, and several car video cameras. The copier, and office partitions are necessary to continue operating at Teen Court. The binder will be used at the DWI Program office to put together booklets for use in different areas of the program, and the car video cameras are for the Sheriff's and City Police Departments to be installed in official vehicles for traffic stops.
- 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.), the future funding impact and revenue source.  
This request does not have a FTE impact.  
There are no future funding impacts or revenue sources.

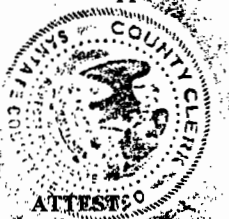
1950427

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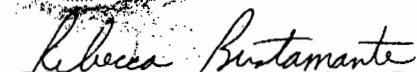
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 31 Day of July, 2001



Santa Fe Board of County Commissioners

  
Paul Duran, Chairman

  
Rebecca Bustamante, County Clerk

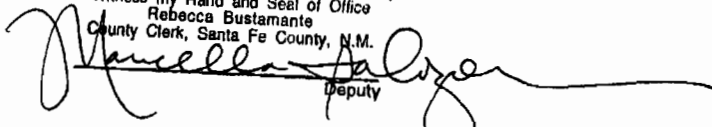


Approved as to Form & Legal Sufficiency.

By   
Santa Fe County Attorney's Office

1166596  
COUNTY OF SANTA FE  
STATE OF NEW MEXICO } SS  
I hereby certify that this instrument was filed  
for record on the 1 day of Aug, A.D.  
20 01 at 8:26 o'clock PM  
and was duly recorded in book 1950  
page 424-427 of the records of

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

  
Deputy