

SANTA FE COUNTY

RESOLUTION 2002 - 168

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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 December 20, 2002, did request the following budget adjustment:

Department / Division: Fire Administration / Mobile Health Care Van

Fund Name: EMS-Health Care Fund (232)

Budget Adjustment Type: Increase

Fiscal Year: 2003 (July 1, 2002 - June 30, 2003)

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
232	0801	341	95-00	Charges for Services / Other (St. Vincent's MOA)	37,500	
TOTAL (if SUBTOTAL, check here)					37,500	

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
232	0801	421	10-26	Term Employees	22,724	
232	0801	421	10-25	Overtime	1,136	
232	0801	421	20-01	FICA / Regular	1,409	
232	0801	421	20-02	FICA / Medicare	330	
232	0801	421	20-03	Retirement Contributions	4,320	
232	0801	421	20-05	Health Care	2,236	
232	0801	421	20-06	Retirement Health Care	295	
232	0801	421	40-04	Vehicle Maintenance	5,050	
TOTAL (if SUBTOTAL, check here)					37,500	

Requesting Department Approval: [Signature] Title: Chief, Santa Fe County Fire Dept. Date: 12/16/02

Finance Department Approval: [Signature] Date: 12-20-02 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 12/19/02

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DEPARTMENT CONTACT:

Name: R. Carlos Nava

Dept/Div: Fire Administration

Phone No.: 992-3072

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 establish the FY 2003 operating budget for the Santa Fe County Mobile Health Care Van. This request is a result of the MOA between Santa Fe County and St. Vincent's Hospital.
- 2) Why was this request not included in the fiscal year 2003 Operating Budget?
This information was unknown at the time.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
Once established, this budget will be a part of the annual operating budget.
- 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.
This request is not a state or federal grant.
 - 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.
N/A
- 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 will add one FTE to the Santa Fe County Fire Department.
Position: Captain, Fire Department, EMS Division
Type: TERM, dependent on funding through Santa Fe County – St. Vincent's MOA
Tool #: 8004-00012

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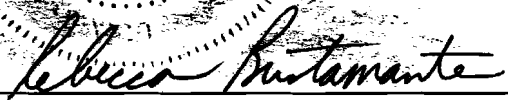
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 20th Day of December 2002.

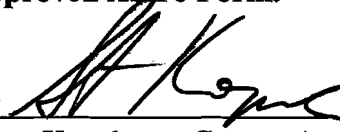
Santa Fe Board of County Commissioners

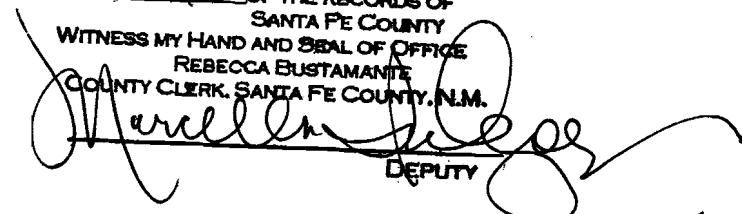

Paul Duran, Chairperson

ATTEST:


Rebecca Bustamante, County Clerk

Approved As To Form.

By 
Steve Kopelman, County Attorney

1240 261
COUNTY OF SANTA FE
STATE OF NEW MEXICO } ss
I HEREBY CERTIFY THAT THIS INSTRUMENT WAS FILED
FOR RECORD ON THE 23 DAY OF DEC AD.
20 02 AT 10:31 O'CLOCK 9 M
AND WAS DULY RECORDED IN BOOK 2296
PAGE 138-140 OF THE RECORDS OF
SANTA FE COUNTY
WITNESS MY HAND AND SEAL OF OFFICE
REBECCA BUSTAMANTE
COUNTY CLERK, SANTA FE COUNTY, N.M.

DEPUTY