

2622188

SANTA FE COUNTY

RESOLUTION 2003 - 105

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

Whereas, the Board of County Commissioners meeting in regular session on August 12, 2003, did request the following budget adjustment:

Department / Division: Finance Fund Name: General, Fire Tax ¼%, EMS-Healthcare, Housing Capital Improvement and Housing Enterprise

Budget Adjustment Type: Budget Transfers Between Funds 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
505	1410	390	0100	Operating Transfer In	2,168	
517	0430	390	0300	Operating Transfer In	69,821	
101	0000	390	0500	Operating Transfer In	1,931	
TOTAL (if SUBTOTAL, check here)					73,920	

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
101	0000	490	0100	Operating Transfer Out	2,168	
101	0302	412	8003	Capital Purchases / Equipment & Machinery		2,168
222	0821	490	0100	Operating Transfer Out	65,886	
222	0821	422	8001	Capital Purchases / Buildings & Structures		65,886
TOTAL (if SUBTOTAL, check here X)					68,054	68,054

Requesting Department Approval: [Signature] Title: Accounting Supervisor Date: 8/6/03

Finance Department Approval: [Signature] Date: 8/5/03 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

SANTA FE COUNTY

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BUDGET ADJUSTMENT CONTINUATION SHEET

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
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
301	0465	490	0100	Operating Transfer Out	2,046	
301	0465	471	8003	Capital Purchases / Equipment & Machinery		2,046
517	0430	490	0100	Operating Transfer Out	1,931	
517	0430	471	8003	Capital Purchases / Equipment & Machinery		1,931
232	0421	490	0100	Operating Transfer Out	1,889	
232	0421	461	8003	Capital Purchases / Equipment & Machinery		1,889
505	1410	444	8003	Capital Purchases / Equipment & Machinery	2,168	
517	0430	471	8003	Capital Purchases / Equipment & Machinery	3,935	
517	0430	471	8001	Capital Purchases / Buildings & Structures	65,886	
101	0113	412	8003	Capital Purchases / Equipment & Machinery	1,931	
TOTAL (if SUBTOTAL, check here)					147,840	73,920

2622190

SANTA FE COUNTY

RESOLUTION 2003 - 105

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Teresa Martinez Dept/Div: Finance Phone No.: 995-2780

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 transfers budget between funds to establish budget authority to enable Finance to transfer capital assets between the General Fixed Asset Account Group and Enterprise Funds as required by GASB 34-35. Santa Fe County is implementing this new accounting rule in Fiscal Year 2003.
- 2) Why was this request not included in the Fiscal Year 2003 Operating Budget?
These transfers of capital assets occurred after the fiscal year 2003 operating budget had been prepared.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
This transfer is non-recurring for fiscal year 2003.
- 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 not a state special appropriation.
 - b) If this is a state or federal grant, cite grant name, number, award date and amount.
This is not a state or federal grant.

SANTA FE COUNTY

RESOLUTION 2003 - 105

2622191

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Teresa Martinez Dept/Div: Finance Phone No.: 995-2780

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 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.
There is a net zero effect to the capital purchases category overall, and strictly affects capital asset transfers between funds.
- 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 12th Day of August, 2003.

Santa Fe Board of County Commissioners



Jack Sullivan
Jack Sullivan, Chairperson

ATTEST

Rebecca Bustamante
Rebecca Bustamante, County Clerk



Approved As To Form.

By *[Signature]* 8-6-03
County Attorney

1283521
COUNTY OF SANTA FE
STATE OF NEW MEXICO } ss
I HEREBY CERTIFY THAT THIS INSTRUMENT WAS FILED
FOR RECORD ON THE 14 DAY OF Aug. A.D.
20 03 AT 9:17 O'CLOCK P.M.
AND WAS DULY RECORDED IN BOOK 2622
PAGE 188-192 OF THE RECORDS OF
SANTA FE COUNTY

WITNESS MY HAND AND SEAL OF OFFICE
REBECCA BUSTAMANTE
COUNTY CLERK, SANTA FE COUNTY, N.M.
Marcella Palazar
DEPUTY