

SANTA FE COUNTY

RESOLUTION 2003- 141

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

Whereas, the Board of County Commissioners meeting in regular session on September 30, 2003 did request the following budget adjustment:

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

Budget Adjustment Type: Budget Increase

Fiscal Year: 2004: (July 1, 2003 - June 30, 2004)

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
101	0405	371	04-00	DWI/State Grants		9,218
101	0406	385	08-00	Budget Cash/Fees/Co-Payments	54,950	
101	0409	385	01-00	Budget Cash	2,427	
TOTAL (if SUBTOTAL, check here)					57,377	9,218

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	0405	464	50-03	Professional Services		9,218
101	0406	464	50-03	Professional Services	34,450	
101	0406	464	80-03	Equipment and Machinery	10,500	
101	0406	464	60-08	Field Supplies	10,000	
101	0409	464	50-90	Other Contractual Services	1,700	
101	0409	464	60-08	Field Supplies	727	
TOTAL (if SUBTOTAL, check here)					57,377	9,218

Requesting Department Approval: _____

Robert A. Anaya

Title: Director Date: 9/10/03

Finance Department Approval: _____ Date: 9/24/03

Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

2676370

SANTA FE COUNTY

RESOLUTION 2003 141

2676371

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/DWI Program budget by \$57,377.00, and decreases it by \$9,218.00. The purpose of this request is to increase the Teen Court and Screening Program budgets utilizing cash revenues available for anticipated expenditures needed to continue operating both programs for FY-2004. A decrease in the Community DWI funds is necessary to arrive at the correct amount that was awarded for the current fiscal year.

- 2) Why was this request not included in the Fiscal Year 2004 Operating Budget?

The available cash was not predictable prior to the existing fiscal year ending, so we were unable to include it in our Operating Budget until now. The Community DWI budget was an estimate at the time that the budget had to be prepared, and the correct amount has now been awarded.

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

This budget increase/decrease and the resulting expenditures are non-recurring. There is 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 does impact a revenue source.

- 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 award.

Grant Name: Community DWI Grant
Award Date: 7/1/03 Annual Grant

Grant Number: 04-CD-31-091
Amount: \$66,181.00

SANTA FE COUNTY
RESOLUTION 2003- 141

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.):

2676372

- 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.
This does impact the Capital Purchases category to include the purchase of a copier to be used by the DWI Program.
- 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 does not impact the FTEs.

SANTA FE COUNTY

RESOLUTION 2003- 141

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 30th Day of September, 2003

2676373



ATTEST:

Santa Fe Board of County Commissioners

Jack Sullivan
Jack Sullivan, Chairman

Rebecca Bustamante
Rebecca Bustamante, County Clerk



Approved as to Form & Legal Sufficiency.

By *Sophia Collins*
for Santa Fe County Attorney's Office

1294. 273 } SS
COUNTY OF SANTA FE
STATE OF NEW MEXICO
THEREBY CERTIFY THAT THIS INSTRUMENT WAS FILED
FOR RECORD ON THE 6 DAY OF OCT A.D.
20 03 AT 8:13 O'CLOCK AM
AND WAS DULY RECORDED IN BOOK 2676
PAGE 370-373 OF THE RECORDS OF
SANTA FE COUNTY

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