SFC CLERK RECORDED 11/04/2004

SANTA FE COUNTY

RESOLUTION 2004 - 135

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

Whereas, the Board of County Commissioners meeting in regular session on October 26, 2004, did request the following budget adjustment:

Department / Division: PFMD/Admin Fund Name: State Special Appropriations fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2005 (July 1, 2004 - June 30, 2005)

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
518	1870	371	9000	**Youth Development Facility**-Special Appropriation State	$362,000.00	
232	0724	371	9000	**Coordinated Health Complex**- Special Appropriation State	$100,000.00	
318	0747	371	9000	**Youth Shelter/Family Services**- Special Appropriation State	$650,000.00	
TOTAL (if SUBTOTAL, check here X)					$1,112,000.00	

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
518	1870	426	8002	**Youth Development Facility**-Contractual Services/Other Cont. Services	$30,000.00	
518	1870	426	8001	**Youth Development Facility**-Capital Purchases/ bldg. structures	$332,000.00	
232	0724	464	8001	**Coordinated Health Complex**- Capital Purchase/bldg. Struct.	$100,000.00	
318	0747	481	8001	**Youth Shelter/Family Services**- Capital Purchase/bldg. Struct.	$650,000.00	
TOTAL (if SUBTOTAL, check here X)					$1,112,000.00	

Requesting Department Approval: _____ **Title:** Director **Date:** _____

Finance Department Approval: _____ **Date:** 10-19-04 **Entered by:** _____ **Date:** _____

County Manager Approval: _____ **Date:** _____

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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
318	0749	371	9000	**Agua Fria Community Center**/Special Appropriation State	$180,000.00	
318	0748	371	9000	**Camino Real River Corridor**/special appropriation State	$80,000.00	
318	0751	371	9000	**Madrid Ball Park**/special appropriation State	$275,000.00	
318	0736	371	9000	**Pojoaque Valley little league fields**/special appropriation state	$15,000.00	
318	0745	371	9000	**Recovering Alcoholics center**/special appropriations state	$300,000.00	
318	0759	371	9000	**Santa Fe County Fairgrounds**/special appropriations state	$100,000.00	
318	0762	371	9000	**First Judicial District**/special appropriation state	$100,000.00	
318	0763	371	9000	**La Puebla Community Center**/special appropriation state	$50,000.00	
318	0735	371	9000	**211 Call center**/special appropriation state	$30,000.00	
232	0724	385	0200	**Coordinated Health complex**-Operating transfer in/Special Revenues	$36,500.00	
TOTAL (if SUBTOTAL, check here ____)					$2,278,500.00	

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
318	0749	481	8001	**Agua Fria Community Center**/ Capital Purchase/bldg. structures.	$180,000.00	
318	0748	481	8001	**Camino Real river Corridor**/ Capital Purchase/bldg. structures.	$80,000.00	
318	0751	481	8001	**Madrid Ball park**/ Capital Purchase/bldg. Struct.	$275,000.00	
318	0736	481	8001	**Pojoaque Valley little league fields**/ Capital Purchase/bldg. structures.	$15,000.00	
318	0745	481	8001	**Recovering alcoholics center**/ Capital Purchase/bldg. structures.	$300,000.00	
318	0759	481	5090	**Santa Fe County Fairgrounds**/ Contractual Services/other cont. services	$25,000.00	
318	0759	481	8001	**Santa Fe County Fairgrounds**/ Capital Purchase/ bldg. structures	$75,000.00	
318	0762	481	5090	**First Judicial District**/contractual services-other contractual services	$100,000.00	

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318	0763	481	5090	**La Puebla Community Center**/Contractual Services-other cont. services	$50,000.00	
318	0735	481	8003	**211 Call Center**/Cap. Purch.-equip/machinery	$30,000.00	
232	0724	464	8001	**Coordinated Health Complex**-cap. Purch./bldg structures	$36,500.00	
TOTAL (if SUBTOTAL, check here ____)					**$2,278,500.00**	

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SANTA FE COUNTY

RESOLUTION 2004 - 135

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name:_____ **Dept/Div:**_____ **Phone No.:**_____

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.
  The P&FM Department is requesting to budget new project appropriations from State special appropriations fund.
  The P&FM Department is requesting to re-budget unencumbered cash balance for the Coordinated Health Complex.

- 2) Why was this request not included in the Fiscal Year 2005 Operating Budget?
  New monies were awarded in October 2004. Re-budgeted cash was requested in FY2005 and given the direction to BAR the amount after July 1, 2004.

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

- 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.

    211 call center #04-L-NR-I-3-G-1032 & 2383 $30,000.00
    Coordinated health complex #04-L-NR-I-3-G-1017, 1040 $100,000.00
    YS&FS #04-L-NR-I-3-G-1025, 1029, 2376 $650,000.00
    RAP center #04-L-NR-I-3-G-2326 $300,000.00
    Fairgrounds #04-L-NR-I-3-G-2380, 1795 $100,000.00
    1st judicial courthouse #04-L-NR-I-3-G-330 $100,000.00
    YDF #04-L-NR-I-3-G-1016, 1038,1027,331 $362,000.00
    Poj. Valley little league #04-L-NR-I-3-G-1023 $15,000.00
    Agua Fria CC #04-L-NR-I-3-G-1028, 332 $180,000.00
    Camino Real #04-L-NR-I-3-G-2379, 1794 $80,000.00
    Madrid Ballpark #04-L-NR-I-3-G-325 $275,000.00
    La Puebla CC #04-L-NR-I-3-G-1641 $50,000.00

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

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Angela Quintana **Dept/Div: P&FMD/Admin.** **Phone No.: 992-9860**

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.
    N/A
  - 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.
  Capital Purchase/building structures category will be used for new construction on the various projects.

- 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.
  N/A

SANTA FE COUNTY

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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 26th Day of October, 2004.

Santa Fe Board of County Commissioners

Paul Campos, Chairperson

ATTEST:

Rebecca Bustamante, County Clerk

Approved As To Form.

By _____
for Stephen Ross, County Attorney

BCC RESOLUTION
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STATE OF NEW MEXICO)
COUNTY OF SANTA FE) ss

I Hereby Certify That This Instrument Was Filed
Page 6 On The 4TH Day Of November, A.D. 2004 at
And Was Duly Recorded as Instrument #
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Rebecca Bustamante
County Clerk, Santa Fe, NM

Deputy