SFC CLERK RECORDED 12/02/2004

# SANTA FE COUNTY



## RESOLUTION 2004 - 153

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

**Whereas, the Board of County Commissioners meeting in regular session on November 30, 2004, did request the following budget adjustment:**

Department / Division: County Sheriff Department  Fund Name: General 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 |
|---|---|---|---|---|---|---|
| 101 | 1201 | 372 | 09-04 | Federal Grants | 16,200.00 | |
| TOTAL (if SUBTOTAL, check here ____) | | | | | 16,200.00 | |

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 |
|---|---|---|---|---|---|---|
| 101 | 1201 | 424 | 10-25 | Salary & Wages/Overtime | 15,965.00 | |
| 101 | 1201 | 424 | 20-02 | Employee Benefits/FICA-Medicare | 235.00 | |
| TOTAL (if SUBTOTAL, check here ____) | | | | | 16,200.00 | |

**Requesting Department Approval:** _____ **Title:** County Sheriff (Under Sheriff) **Date:** 11-15-04

**Finance Department Approval:** _____ **Date:** 11.19.04 **Entered by:** _____ **Date:** _____

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

SFC CLERK RECORDED 12/02/2004

# SANTA FE COUNTY



## RESOLUTION 2004 - 153

***ATTACH ADDITIONAL SHEETS IF NECESSARY.***

**DEPARTMENT CONTACT:**

**Name:** Greg Solano **Dept/Div:** Sheriff Department **Phone No.:** 986-2455

**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.**
  Increase to the General Fund (101)/County Sheriff's Office overtime line item for alcohol-impaired driving countermeasures or enforcement of DWI/DUI related laws.

- **2) Why was this request not included in the Fiscal Year 1999 Operating Budget?**
  This grant was awarded after the fiscal year 2005 operating budget was prepared.

- **3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?**
  To our knowledge this is not to recur.

- **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.
    Operation DWI Grant / #05-AL-64-091 / awarded Oct.2004-Sept.2005 / $22,680.00.

SFC CLERK RECORDED 12/02/2004

# SANTA FE COUNTY



## RESOLUTION 2004 - 153

*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**

**Name:** Greg Solano **Dept/Div:** Sheriff Department **Phone No.:** 986-2455

**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.
    There are no other available funds to match this request.

- **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 increase the Capital Purchase 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 does not have an FTE impact.

SFC CLERK RECORDED 12/02/2004

# SANTA FE COUNTY



## RESOLUTION 2004 - 153

**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 November, 2004.**

**Santa Fe Board of County Commissioners**

Paul Campos, Chairperson

COUNTY CLERK

**ATTEST**

Rebecca Bustamante, County Clerk

BCC RESOLUTION
COUNTY OF SANTA FE ) PAGES: 4
STATE OF NEW MEXICO ) ss
I Hereby Certify, That This Instrument Was Filed
Recorded On The 2ND Day Of December A D , 2004 at 2
And Was Duly Recorded As Instrument #
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Rebecca Bustamante
Deputy County Clerk, Santa Fe, NM

**Approved As To Form.**

By Sylvia Collard for
Stephen Ross, County Attorney

COUNTY CLERK
REBECCA BUSTAMANTE
SANTA FE COUNTY NEW MEXICO