SFC CLERK RECORDED 07/27/2005

SANTA FE COUNTY

RESOLUTION 2005 - 108

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

Whereas, the Board of County Commissioners meeting in regular session on July 26, 2005, did request the following budget adjustment:

Department / Division: County Manager, Legal and Land Use

Fund Name: General Fund (101)

Budget Adjustment Type: Budget Increase

Fiscal Year: 2006 (July 1, 2005 - June 30, 2006)

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	0000	311	0501	Property Tax / Current	153,757	
TOTAL (if SUBTOTAL, check here ____)					153,757	

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	0101	412	1022	Salary & Wages / Permanent Employees	22,175	
101	0101	412	2001	Employee Benefits / FICA - Regular	1,375	
101	0101	412	2002	Employee Benefits / FICA - Medicare	322	
101	0101	412	2003	Employee Benefits /Retirement Contributions	4,215	
101	0101	412	2005	Employee Benefits / Healthcare	1,784	
101	0101	412	2006	Employee Benefits / Retiree Healthcare	288	
TOTAL (if SUBTOTAL, check here X)					30,159	

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

Finance Department Approval: _____ **Date:** 7.19.05 **Entered by:** _____ **Date:** _____

County Manager Approval: _____ **Date:** 7/25/05

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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
101	0102	411	1021	Salary & Wages / Exempt Employees	32,234	
101	0102	411	2001	Employee Benefits / FICA - Regular	1,999	
101	0102	411	2002	Employee Benefits / FICA - Medicare	467	
101	0102	411	2003	Employee Benefits / Retirement Contributions	6,128	
101	0102	411	2005	Employee Benefits / Healthcare	2,591	
101	0102	411	2006	Employee Benefits / Retiree Healthcare	419	
101	0201	412	1021	Salary & Wages / Exempt Employees	19,893	
101	0201	412	2001	Employee Benefits / FICA - Regular	1,233	
101	0201	412	2002	Employee Benefits / FICA - Medicare	288	
101	0201	412	2003	Employee Benefits / Retirement Contributions	3,782	
101	0201	412	2005	Employee Benefits / Healthcare	1,600	
101	0201	412	2006	Employee Benefits / Retiree Healthcare	259	
101	0506	414	1022	Salary & Wages / Permanent Employees	1,989	
101	0506	414	2001	Employee Benefits / FICA - Regular	123	
101	0506	414	2002	Employee Benefits / FICA - Medicare	29	
101	0506	414	2003	Employee Benefits / Retirement Contributions	378	
101	0506	414	2005	Employee Benefits / Healthcare	160	
101	0506	414	2006	Employee Benefits / Retiree Healthcare	26	
101	0115	412	5090	Contractual Services / Other Contractual Services	75,000	
101	0302	412	8003	Capital Purchases / Equipment & Machinery		25,000
TOTAL (if SUBTOTAL, check here ____)					178,757	25,000

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SANTA FE COUNTY

RESOLUTION 2005 - 109

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Gerald Gonzales **Dept/Div:** County Manager **Phone No.:** 986-6200

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.

- 2) Why was this request not included in the Fiscal Year 2006 Operating Budget?
  It was not anticipated that these funds would be needed when the fiscal year 2006 operating budget was prepared.

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

- 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.

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SANTA FE COUNTY

RESOLUTION 2005 - 109

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Gerald Gonzales **Dept/Div:** County Manager **Phone No.:** 986-6200

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.
  - d) Please identify other funding sources that can be used 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.
- 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 is to increase the County Manager's FTEs by (1.0) for a permanent Voter Outreach Coordinator position.

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SANTA FE COUNTY

RESOLUTION 2005 - 109

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 July 2005.

Santa Fe Board of County Commissioners

Michael Anaya, Chairperson 7-26-05

ATTEST:

Valerie Espinoza, County Clerk 7-26-05

Approved As To Form.

By _____
Stephen Ross, County Attorney

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

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I Hereby Certify That This Instrument Was Filed for Record On The 27TH Day Of July, A.D., 2005 at 14 47 And Was Duly Recorded as Instrument # 1390692 Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy _____ County Clerk, Santa Fe, NM