

SANTA FE COUNTY

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RESOLUTION 2006 - 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 June 27, 2006, did request the following budget adjustment:

Department / Division: Health & Human Services / EMS - Healthcare

Fund Name: EMS - Healthcare Fund

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
232	0421	341	95-03	MOA / St. Vincent's Hospital Self Funding	\$661,567	
TOTAL (if SUBTOTAL, check here)					\$661,567	

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
232	0421	461	70-17	Other Operating Costs / Sole Community Provider	\$661,567	
TOTAL (if SUBTOTAL, check here)					\$661,567	

Requesting Department Approval: Paul G. [Signature]

Title: BUDGET ADMINISTRATION

Date: 6-20-06

Finance Department Approval: [Signature]

Date: 6/2/06

Entered by: _____

Date: _____

County Manager Approval: [Signature]

Date: 6-20-06

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Steve Shepherd

Dept/Div: HHSD

Phone No.: 992-9841

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 is for an increase to the EMS-Healthcare Fund (232) to budget revenue received from St. Vincent Hospital for their "self funding" portion of the Sole Community Provider Program. Santa Fe County is a pass through for this revenue which is then paid out to the New Mexico Human Services Department.
- 2) Why was this request not included in the Fiscal Year 2006 Operating Budget?
This revenue was received after 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?
This increase is non-recurring for fiscal year 2006.
- 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.

9007/05/90 (RECEIVED) MAY 10 2006

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Steve Shepherd

Dept/Div: HHSD

Phone No.: 992-9841

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 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 impact the capital purchases 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.

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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 27th Day of June, 2006.

Santa Fe Board of County Commissioners



Harry Montoya, Chairperson


ATTEST:


Valerie Espinoza, County Clerk

Approved As To Form.

By 

Stephen Ross, County Attorney




COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

Hereby Certify That This Instrument Was Filed for
Record On The 30TH Day Of June, A.D., 2006 at 14:29
and Was Duly Recorded as Instrument # 1440222
The Records Of Santa Fe County

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



Valerie Espinoza, County Clerk