

RESOLUTION 2006 - 32

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

Whereas, the Board of County Commissioners meeting in regular session on February 28, 2006, did request the following budget adjustment:

Department / Division: County Sheriff / Region III - Program Income 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	1205	350	04-00	Fines & Forfeitures	\$300	
TOTAL (if SUBTOTAL, check here)					\$300	

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	1205	425	60-05	Supplies / Med & Lab Supplies	\$300	
TOTAL (if SUBTOTAL, check here)					\$300	

Requesting Department Approval: [Signature] Title: Sheriff Date: 2-14-06
 Finance Department Approval: [Signature] Date: 2-21-06 Entered by: _____ Date: _____
 County Manager Approval: [Signature] Date: 2/22/06

RESOLUTION 2006 - 32

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Ralph Lopez - Region III Dept/Div: County Sheriff Phone No.: 473-7021

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.

RESOLUTION 2006 - 32

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 28th Day of February, 2006.

Santa Fe Board of County Commissioners



[Signature]
Harry Montoya, Chairperson

ATTEST
[Signature]
Valerie Espinoza, County Clerk

Approved As To Form.

By *[Signature]*
Stephen Ross, County Attorney



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) ss PAGES: 4
I Hereby Certify That This Instrument Was Filed for
Record On The 2ND Day Of March, A.D., 2006 at 08 55
And Was Duly Recorded as Instrument # 1422478
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
[Signature] Valerie Espinoza
Deputy County Clerk, Santa Fe, NM