

SANTA FE COUNTY

RESOLUTION 2006 - 52

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

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

Department / Division: County Sheriff / Region III Fund Name: General 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
101	1204	372	0800	Federal Grants / Region III	\$28,870.00	
TOTAL (if SUBTOTAL, check here)					\$28,710.00	

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	1204	425	1025	Salary & Wages / Overtime	\$1,200.00	
101	1204	425	1026	Salary & Wages / Term Employees		\$60.00
101	1204	425	2001	Employee Benefits / FICA - Regular		\$50.00
101	1204	425	2002	Employee Benefits / FICA - Medicare		\$50.00
101	1204	425	3001	Travel / In State Mileage & Fares		\$96.00
101	1204	425	3003	Travel / In State Meals & Lodging		\$65.00
101	1204	425	3004	Travel / Out of State Meals & Lodging		\$426.00
TOTAL (if SUBTOTAL, check here X)					\$1,200.00	\$747.00

Requesting Department Approval: [Signature] Title: Major Date: 3-17-06

Finance Department Approval: [Signature] Date: 3/21/06 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
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	1204	425	4002	Maintenance / Contracts	\$903.30	
101	1204	425	4004	Maintenance / Vehicles	\$1,145.00	
101	1204	425	4007	Maintenance / Supplies	\$375.00	
101	1204	425	4009	Maintenance / Services	\$570.00	
101	1204	425	5003	Contractual Services / Professional Services	\$10,155.00	
101	1204	425	5090	Contractual Services / Other Contractual Services	\$2,719.00	
101	1204	425	6005	Supplies / Med & Lab Supplies	\$119.49	
101	1204	425	6007	Supplies / Office Supplies	\$691.42	
101	1204	425	7003	Other Operating Costs / Telephones	\$6,653.79	
101	1204	425	7008	Other Operating Costs / Liability Insurance	\$750.00	
101	1204	425	7015	Other Operating Costs / Property Insurance	\$750.00	
101	1204	425	7033	Other Operating Costs / Seminars & Workshops	\$375.00	
101	1204	425	7036	Other Operating Costs / Postage & Mail	\$50.00	
101	1204	425	7090	Other Operating Costs / Misc.	\$3,000.00	
TOTAL (if SUBTOTAL, check here _____)					\$29,457.00	\$747.00

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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.):

- 1) Please summarize the request and its purpose.
This request is to budget a portion of the federal grant for the Region III Drug Task Force awarded by the Justice Assistance Grant Program through the New Mexico Department of Public Safety. The awarded amount is \$240,000 for the period of October 1, 2005 to September 30, 2005. A budget of \$200,817 was established for the period of October 1, 2005 to June 30, 2006 with the remainder of the grant to be included as part of the first quarter for fiscal year 2007; however, additional funds need to be budgeted in fiscal year 2006 for anticipated expenditures.
- 2) Why was this request not included in the Fiscal Year 2006 Operating Budget?
The final approved amount was not known when the fiscal year 2006 operating budget was prepared since this grant was changed by the Justice Assistance Grant Program to run on a federal fiscal year (October 1, 2005 to September 30, 2006).
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
This increase should be non-recurring.
- 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.
Region III Grant #05-JAG-PPA 02-Region III-FY06 Amount: \$240,000
Effective: October 1, 2005 – September 30, 2006

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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.
\$80,000 of salaries and benefits for the Santa Fe County Sheriff's Deputies used by this program provides the matching funds required.
- 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 28th Day of March, 2006.

Santa Fe Board of County Commissioners

[Signature]
Harry Montoya, Chairperson

[Signature]
Valerie Espinoza, County Clerk



Approved As To Form.

By *[Signature]*
Stephen Ross, County Attorney

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss
BCC RESOLUTIONS
PAGES: 5
I Hereby Certify That This Instrument Was Filed for
Record On The 6TH Day Of April, A.D., 2006 at 14.56
And Was Duly Recorded as Instrument # 1427716
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy *[Signature]* County Clerk, Santa Fe, NM