# **RESOLUTION 2008** - 40

## 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 25, 2008, did request the following budget adjustment:

RECORDED 03/26/2008 SANTA FE COUNTY

Department / Division: County Sheriff / Region III

Fund Name: <u>Federal Forfeiture Fund (225)</u>

Budget Adjustment Type: <u>Budget Increase</u>

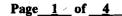
Fiscal Year: <u>2008 (July 1, 2007 - June 30, 2008)</u>

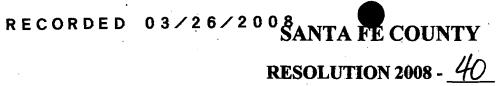
BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
225	1205	350	0300	Fines &Forfeitures	1,176.49	
TOTAL (i	TOTAL (if SUBTOTAL, check here)				1,176.49	· · · · · · · · · · · · · · · · · · ·

#### 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
225	1205	425	7003	Other Operating Costs / Telephone	1,176.49	
TOTAL (i	f SUBTOTAL, ch	eck here)		· · · · · · · · · · · · · · · · · · ·	1,176.49	
Requesting	g Department Ap	proval:	4.	Title: Under Shor iff	C D	ate: <u>3-/0-08</u>
Finance Department Approval: 2100 March March Date: 3/19/06 Entered by: Date:						
County Manager Approval						





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#### ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:	Name: <u>Ralph Lopez</u>	Dept/Div: <u>Sheriff / Region III</u>	Phone No.: <u>473-7021</u>
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# 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.

Request is to budget \$1,176.49 of federal forfeiture restitutions related to Region III program court settlements received in fiscal year 2008.

a) Employee Actions

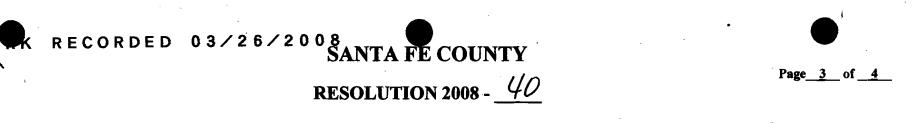
Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
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b) Professional Services (50-xx) and Capital Category (80-xx) detail:

Line Item	Detail (what specific things, contracts, or services are being added or deleted)	Amount

• 2) Is the budget action for RECURRING expense <u>X</u> or for NON-RECURRING (one-time only) expense

This request may be recurring depending on funds that may be forfeited to the County as a result of Region III program court settlements. Forfeitures will be budgeted as needed for the Region III program.



#### ATTACH ADDITIONAL SHEETS IF NECESSARY.

**DEPARTMENT CONTACT:** 

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Name: <u>Ralph Lopez</u>

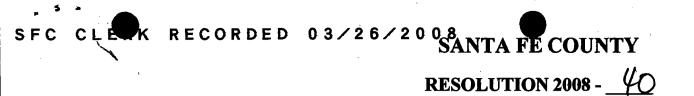
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Dept/Div: <u>Sheriff / Region III</u>

Phone No.: <u>473-7021</u>

DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):

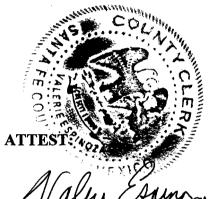
- 3) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:
  - a) If this is a state special appropriation, YES \_\_\_\_\_ NO \_\_X\_\_\_\_ If YES, cite statute and attach a copy.
  - b) Does this include state or federal funds? YES \_\_\_\_\_ NO \_\_X\_\_\_\_
    If YES, please cite and attach a copy of statute, if a special appropriation, or include grant name, number, award date and amount, and attach a copy of a award letter and proposed budget.
  - c) Is this request is a result of Commission action? YES <u>NO X</u> If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc.).
  - d) Please identify other funding sources used to match this request.



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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 25<sup>th</sup> Day of March, 2008.



Valerie Espinoza, County Clerk

Santa Fe Board of County Commissioners

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Jack Sullivan, Chairperson

Approved As To Form.

By

Stephen Ross, County Attorney

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COUNTY OF SANTA FE STATE OF NEW MEXICO BCC RESOLUTIONS I Hereby Certify That This Instrument Was Filed for Record On The 26TH Day Of March, A.D., 2008 at 15:36 And Was Duly Recorded as Instrument # 1519975 Of The Records Of Santa Fe County less My Hand And Seal Of Office Valerie Espinoza ounty Clerk, Santa Fe, NM