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### RESOLUTION 2008 - 4

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

Whereas, the Board of	County Commissioners meeting in regular se	ession on March 25, 2008, did request the following budget adjustment:
Department / Division: _	County Assessor, Growth Management,	Fund Name: General (101), Property Valuation (203), Road Maint. (204),
_	Community Services and Corrections	Fire Operations (244), Housing Enterprise (517), and
		and Jail Operations Fund (518)
Budget Adjustment Type	: Budget Transfer Between Funds	Fiscal Year: 2008 (July 1, 2007 - June 30, 2008)

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
203	1111	390	0100	Operating Transfer In / From General Fund	3,780	
204	0611	390	0100	Operating Transfer In / From General Fund	36,852	ļ
244	. 0801	390	0100	Operating Transfer In / From General Fund	533	
517	1930	390	0100	Operating Transfer In / From General Fund	103	
518	0000	390	0100	Operating Transfer In / From General Fund	59,573	
TOTAL (i	f SUBTOTAL, ch	eck here )			100,841	

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY / LINE TEEM SAME	INCREASE AMOUNT	DECREASE AMOUNT
County As	sessor	_				,
203	1111	413	1022	Salary & Wages / Permanent Employees	2,954	
203	1111	413	2001	Employee Benefits / FICA - Regular	183	
203	1111	413	2002	Employee Benefits / FICA - Medicare	43	
TOTAL (	if SUBTOTAL, ch	eck here X			3,180	

Requesting Department Approval: <u>Unmany</u>	Title:	nana Duckov	Date 3/10/18
Finance Department Approval:		Entered by:	Date:
County Manager Approval:	_ Date: <u>3/24/0</u> 6	Updated by:	_ Date:



### **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	INCR AMO	DECREASE AMOUNT
·						
TOTAL (i	l'SUBTOTAL, cl	ieck here )				

FUND CODE	DEPARTMENT/ DIVISION	ACTIVITY BASIC/SUB	ELEMENT/ OBJECT	CATEGORY/LINE ITEM	INCREASE	DECREASE
XXX	XXXX	XXX	XXXX	NAME	AMOUNT	AMOUNT
203	1111	413	2003	Employee Benefits / Retirement Contributions	561	· · · · · · · · · · · · · · · · · · ·
203	1111	413	2006	Employee Benefits / Retiree Healthcare	38	
Public Wo	rks				1	
204	0611	451	1022	Salary & Wages / Permanent Employees	28,800	•
204	0611	451	2001	Employee Benefits / FICA - Regular	1,786	
204	0611	451	2002	Employee Benefits / FICA - Medicare	418	
204	0611	451	2003	Employee Benefits / Retirement Contributions	5,475	
204	0611	451	2006	Employee Benefits / Retiree Healthcare	374	
Fire		,				
244	0801	421	1022	Salary & Wages / Permanent Employees	416	
244	0801	421	2001	Employee Benefits / FICA - Regular	26	
244	0801	421	2002	Employee Benefits / FICA - Medicare	6	
244	0801	421	2003	Employee Benefits / Retirement Contributions	79	•
244	0801	421	2006	Employee Benefits / Retiree Healthcare	5	
Housing					-	
517	1930	471	1026	Salary & Wages / Permanent Employees	81	
517	1930	471	2001	Employee Benefits / FICA - Regular	5	
- 517	1930	471	2002	Employee Benefits / FICA - Medicare	1 1	
517	. 1930	471	2003	Employee Benefits / Retirement Contributions	15	
517	1930	471	2006	Employee Benefits / Retiree Healthcare	. 1	
TOTAL (	fSUBTOTAL, ch	eck here X			38,087	

### **BUDGET ADJUSTMENT CONTINUATION SHEET**

BUDGETED REVENUES: (use continuation sheet, if necessary)

CODE DIV	TMENT/ ACTIVITY SIGN BASIC/SUB OX XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
TOTAL (if SUBTO	OTAL, check here	)			

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY/LINE FREM	INCREASE AMOUNT	DECREASE AMOUNT
Correction					72.000011	
518	1863	426	1022	Salary & Wages / Permanent Employees	2,928	
518	1863	426	2001	Employee Benefits / FICA - Regular	182	
518	1863	426	2002	Employee Benefits / FICA – Medicare	42	
518	1863	426	2003	Employee Benefits / Retirement Contributions	557	
518	1863	426	2006	Employee Benefits / Retiree Healthcare	38	
518	1801	426	1022	Salary & Wages / Permanent Employees	4,937	
518	1801	426	2001	Employee Benefits / FICA - Regular	306	
518	1801	426	2002	Employee Benefits / FICA – Medicare	72	
518	1801	426	2003	Employee Benefits / Retirement Contributions	939	
518	1801	426	2006	Employee Benefits / Retiree Healthcare	64	
518	1860	426	1022	Salary & Wages / Permanent Employees	26,685	
518	1860	426	2001	Employee Benefits / FICA - Regular	1,654	`
518	1860	426	2002	Employee Benefits / FICA – Medicare	387	
518	1860	426	2003	Employee Benefits / Retirement Contributions	5,073	
518	1860	426	2006	Employee Benefits / Retiree Healthcare	347	
518	1870	- 426	1022	Salary & Wages / Permanent Employees	982	
518	1870	426	2001	Employee Benefits / FICA - Regular	61	
518	1870	426	2002	Employee Benefits / FICA – Medicare	14	
518	1870	426	2003	Employee Benefits / Retirement Contributions	187	
518	1870	426	2006	Employee Benefits / Retiree Healthcare	13	
TOTAL (i	f SUBTOTAL, ch	eck here 🔀 )			45,468	

#### **BUDGET ADJUSTMENT CONTINUATION SHEET**

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASIC/SUB XXX	ELEMENTY OBJECT XXXX	REVENUE NAME	INCREAS AMOUN	DECREASE AMOUNT
,	_				*	
TOTAL (i	f SUBTOTAL, cl	neck here)				

FUND CODE	DEPARTMENT/ DIVISION	ACTIVITY BASIC/SUB	ELEMENT/ OBJECT	CATEGORY/LINE ITEM	INCREASE	DECREASE
XXX	XXXX	XXX	XXXX	NAME	AMOUNT	AMOUNT
518	1865	426	1022	Salary & Wages / Permanent Employees	10,024	<del></del>
518	1865	426	2001	Employee Benefits / FICA - Regular	622	
518	1865	426	2002	Employee Benefits / FICA – Medicare	145	
518	1865	426	2003	Employee Benefits / Retirement Contributions	1,906	•
518	1865	426	2006	Employee Benefits / Retiree Healthcare	130	
518	1872	426	1022	Salary & Wages / Permanent Employees	1,000	
518	1872	426	2001	Employee Benefits / FICA - Regular	62	
518	1872	426	2002	Employee Benefits / FICA – Medicare	14	
518	1872	426	2003	Employee Benefits / Retirement Contributions	190	
518	1872	426	2006	Employee Benefits / Retiree Healthcare	13	
101	0303	412	2090	Employee Benefits / Other Employee Benefits		100,841
101	0000	490	0100	Operating Transfer Out	100,841	·
					·	
			ĺ			
				·	·	
TOTAL (	if SUBTOTAL, ch	eck here )	<u>L</u>		201,682	100,841

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Рабе	-	1	of	7
- <b></b> 5			V#_	

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:	Name: Teresa Martinez	Dept/Div: ASD	) / Finance	Dhone No. 1 096 6275
JETARĮMENT CUNTACT:	rame: <u>leresa wiarunez</u>	DepuDiv:ASL	/ Finance	Phone No.: <u>986-6375</u>
DETAILED JUSTIFICATION Late, other laws, regulations, etc.	FOR REQUESTING BUDGET ADJUS :.):	STMENT (If applicable	e, cite the following authority: Sta	ate Statute, grant name and award
Housing Enterprise l	quest and its purpose.  r \$100,841 from the General Fund (101) to Fund (517) and the Jail Operations Fund (st-aside at the beginning of fiscal year 200	518) for salary adjustme	ents that were awarded as a result of	the Classification and Compensation
Line Item	Action (Add/Delete Position, Reclas	es Overtime)	Position Type (permanent, term)	Position Title
Enc tem	Action (Add Defect 1 ostilon, Rectas	is, Overtime)	rosition Type (permanent, term)	1 Osition 11tie
			<u> </u>	<u> </u>
b) Professional Services	(50-xx) and Capital Category (80-xx) deta	ail:		
Line Item	Detail (what specific things, contract	s, or services are being a	added or deleted)	Amount
		<u> </u>		
· · · · · · · · · · · · · · · · · · ·	<u> </u>		·	<u> </u>
<u> </u>			<u> </u>	
• 2) Is the budget action for I	RECURRING expense X or for	NON-RECURRING (or	ne-time only) expense	
			, in the second second	

# SFC CLERK RECORDED 03/26/2008 SANTA FE COUNTY

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# RESOLUTION 2008 - 41

ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:						
Name:_	Teres	a Martinez	Dept/Div:	ASD / Finance	Phone No.: 986-6375	
		STIFICATION FOR REQUESTI s, regulátions, etc.):	NG BUDGET	F ADJUSTMENT (If applicab	le, cite the following authority: State Statute, grant nar	ne and awar
• 3)		is request impact a revenue source?  If this is a state special appropriati  If YES, cite statute and attach a co	on, YES		e funds, federal funds, etc.), and address the following:	
	• b)	Does this include state or federal fif YES, please cite and attach a co award letter and proposed budget.			lude grant name, number, award date and amount, and attac	ch a copy of a
	• c)	Is this request is a result of Comm If YES, please cite and attach a co The Classification and Compensat	py of supporti	ng documentation (i.e. Minutes,		
	• d)	Please identify other funding source There are no other funding source		<u> </u>		

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 25th Day of March, 2008.

Santa Fe Board of County Commissioners

Sullivan Chairperson

Valerie Espinoza, County Clerk

Approved As To Form.

Stepken Ross, County Attorney

STATE OF NEW MEXICO

COUNTY OF SANTA FE

BCC RESOLUTIONS PAGES: 7

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 # 1519976 Of The Records Of Santa Fe County

> ithess My Hand And Seal Of Office Valerie Espinoza Clerk, Santa Fe, NM