

SANTA FE COUNTY

RESOLUTION 2010 - 167

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

Whereas, the Board of County Commissioners meeting in regular session on Sept. 28, 2010, did request the following budget adjustment:

Department / Division: Sheriff's Department / Region III - Program Income

Fund Name: Law Enforcement Operations Fund (246)

Budget Adjustment Type: Budget Increase

Fiscal Year: 2011 (July 1, 2010 - June 30, 2011)

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
246	1205	385	0100	Fines and Forfeitures / Court Settlements	185.00	
246	1205	350	0400	Fines and Forfeitures / Court Settlements	290.00	
TOTAL (if SUBTOTAL, check here )					475.00	

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
246	1205	425	4007	Maintenance Supplies	475.00	
TOTAL (if SUBTOTAL, check here )					475.00	

Requesting Department Approval: [Signature] Title: Sheriff Date: 8-30-10  
 Finance Department Approval: [Signature] Date: 9/13/10 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_  
 County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Ralph W. Lopez, Program Manager, 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. These monies are the result of Restitution Checks received by Region III. Where Defendants are mandated by the District Courts to reimburse the Region for expenses.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title

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 XX or for NON-RECURRING (one-time only) expense \_\_\_\_\_

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Page 3 of 4*ATTACH ADDITIONAL SHEETS IF NECESSARY.***DEPARTMENT CONTACT:**

Name: Ralph W. Lopez, Program Manager, Region III Dept/Div: Sheriff's Department 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.):**

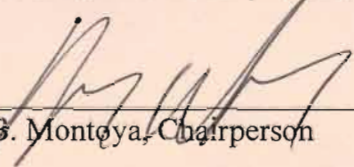
- 3) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:
  - a) If this is a state special appropriation, YES \_\_\_\_\_ NO XX  
If YES, cite statute and attach a copy.
  - b) Does this include state or federal funds? YES \_\_\_\_\_ NO XX  
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. These Restitution Deposits are in the form of money orders by the Defendants, as mandated through the District Courts.
  - c) Is this request is a result of Commission action? YES \_\_\_\_\_ NO XX  
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 28th Day of September, 2010.

Santa Fe Board of County Commissioners

  
\_\_\_\_\_  
Harry B. Montoya, Chairperson

ATTEST:

  
\_\_\_\_\_  
Valerie Espinoza, County Clerk



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 29TH Day Of September, 2010 at 12:16:12 PM  
And Was Duly Recorded as Instrument # 1612258  
Of The Records Of Santa Fe County  
\_\_\_\_\_  
Deputy \_\_\_\_\_ Witness My Hand And Seal Of Office  
Valerie Espinoza  
County Clerk, Santa Fe, NM