## SANTA FE COUNTY RECORDED 08/31/2011

# RESOLUTION 2011 - W

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|------------|-------|----|--------|----|
|------------|-------|----|--------|----|

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

| adjustme                     |                                         | unty Commiss                         | ioners meeting             | in regular s    | session on August 30, 2011                                             | , did request the follo               | owing budget       |
|------------------------------|-----------------------------------------|--------------------------------------|----------------------------|-----------------|------------------------------------------------------------------------|---------------------------------------|--------------------|
| Departme                     | ent / Division: Pu                      | blic Works/ Pro                      | pjects                     | Fund            | Name: State Special Appropriation                                      | ns Fund (318)                         |                    |
| Budget A                     | adjustment Type: _                      | Budget Increa                        | se                         |                 | Fiscal Year: 2012 (July                                                | 1, 2011 - June 30, 2012)              |                    |
| BUDGE                        | TED REVENUES                            | : (use continuation                  | on sheet, if necess        | ary)            |                                                                        |                                       |                    |
| FUND<br>CODE<br>XXX          | DEPARTMENT/<br>DIVISION<br>XXXX         | ACTIVITY<br>BASIC/SUB<br>XXX         | ELEMENT/<br>OBJECT<br>XXXX |                 | REVENUE<br>NAME                                                        | INCREASE<br>AMOUNT                    | DECREASE<br>AMOUNT |
| 318                          | 0739                                    | 371                                  | 9000                       | State / Othe    |                                                                        | 16,845.00                             |                    |
| TOTAL (                      | (if SUBTOTAL, cho                       | eck here)                            |                            |                 |                                                                        | 16,845.00                             |                    |
|                              |                                         |                                      |                            |                 |                                                                        |                                       |                    |
| BUDGE                        | TED EXPENDI                             | TURES: (use co                       | ontinuation sheet,         | , if necessary) |                                                                        |                                       |                    |
| BUDGE<br>FUND<br>CODE<br>XXX | DEPARTMENT/ DIVISION XXXX               | TURES: (use co                       | ELEMENT/ OBJECT XXXX       | , if necessary) | CATEGORY / LINE ITEM<br>NAME                                           | INCREASE<br>AMOUNT                    | DECREASE<br>AMOUNT |
| FUND<br>CODE                 | DEPARTMENT/<br>DIVISION                 | ACTIVITY<br>BASIC/SUB                | ELEMENT/<br>OBJECT         |                 |                                                                        |                                       |                    |
| FUND<br>CODE<br>XXX<br>318   | DEPARTMENT/<br>DIVISION<br>XXXX         | ACTIVITY<br>BASIC/SUB<br>XXX<br>481  | ELEMENT/<br>OBJECT<br>XXXX |                 | NAME                                                                   | AMOUNT                                |                    |
| FUND<br>CODE<br>XXX<br>318   | DEPARTMENT/<br>DIVISION<br>XXXX<br>0739 | ACTIVITY BASIC/SUB XXX 481           | ELEMENT/<br>OBJECT<br>XXXX |                 | NAME                                                                   | AMOUNT<br>16,845.00                   |                    |
| FUND<br>CODE<br>XXX<br>318   | DEPARTMENT/ DIVISION XXXX 0739          | ACTIVITY BASIC/SUB XXX 481  eck here | ELEMENT/<br>OBJECT<br>XXXX |                 | NAME chases /Buildings & Structures  Title:_Director of Projects & Fac | AMOUNT 16,845.00  16,845.00  cilities | AMOUNT             |

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| AILED JUSTIFICATION other laws, regulations,               | N FOR REQUESTING BUDGET etc.):                                                                                                                  | ADJUSTMENT (If appli         | icable, cite the following authority                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | y: State Statute, grant | name and aw          |
|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------|
| Please summarize the                                       | request and its purpose.                                                                                                                        |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                      |
| amount of \$17,62<br>of \$16,845.00 be<br>2008 GO Bond (BO | a grant from the State Library in 2009 7.95. The funds were budgeted in the budgeted in the FY2012 fiscal year for OKS & EQUIPMENT) \$16,845.00 | Fy2011 fiscal year howe      | ver not all the funding was spent. S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                         |                      |
| a) Employee Actions                                        | Action (Add/Delete Position,                                                                                                                    | P. L. O. C.                  | I Book of the Control | rm) Position Title      |                      |
| Line Itam                                                  |                                                                                                                                                 | Reciass, Overtime)           | Position Type (permanent, ter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | m) Position Title       |                      |
| Line Item                                                  | Action (Add Delete Fosition,                                                                                                                    |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                      |
| Line Item                                                  | Action (Add Delete Fosition,                                                                                                                    |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                      |
|                                                            | es (50-xx) and Capital Category (80-                                                                                                            | (x) detail:                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                         |                      |
|                                                            |                                                                                                                                                 |                              | eing added or deleted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         | Amou                 |
| b) Professional Service                                    | es (50-xx) and Capital Category (80-x                                                                                                           | ontracts, or services are be | eing added or deleted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |                      |
| b) Professional Service Line Item                          | es (50-xx) and Capital Category (80-x)  Detail (what specific things, c                                                                         | ontracts, or services are be | eing added or deleted)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         | Amour<br>\$16,845.00 |

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| ATTACH ADDITIONAL        | L SHEETS IF NECESSARY.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DEPARTMENT CONT          | ACT:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| DEPARTMENT CONT          | ACT: Name: Agnes Lopez Dept/Div: Public Works/ Projects & Facilities Phone No.: 995-6516                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| DETAILED JUSTIFICA       | ATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award tions, etc.):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| and library resources. I | te New Mexico State Library awarded the Vista Grande Library \$17,627.95 in 2008 GO Bond funds to acquire library books, equipment in FY2011 the library used a portion of the grant for labels for the library. Staff is requesting that the remaining funding of \$16,845.00 be fiscal year FY2012 for expenditures for the library.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| • a) If this is          | it impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following: State Funds is a state special appropriation, YES X NO, cite statute and attach a copy.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                          | apital Projects G.O. Bond Act – The 2008 GO Bond funds can be used for "library acquisitions at public libraries and tribal libraries statewide to books, equipment and library resources" Laws of New Mexico, 2008, Chapter 80, Sec. 10 B (1).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| If YES,                  | nis include state or federal funds? YES X NO PO |
| Grant A                  | Award Date: September 1, 2009 Amount: \$17,627.95                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                          | request is a result of Commission action? YESNOX, 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. NA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

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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 30th Day of August

Santa Fe Board of County Commissioners

Virginia Vigil, Chairperson

ATTEST:

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE STATE OF NEW MEXICO BCC RESOLUTIONS

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I Hereby Certify That This Instrument Was Filed for Record On The 31ST Day Of August, 2011 at 02:48:10 PM And Was Duly Recorded as Instrument # 1644085 Of The Records Of Santa Fe County

) ss

alerie Espinoza