

RESOLUTION 2011 - 126

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

Whereas, the Board of County Commissioners meeting in regular session on August 30, 2011, did request the following budget adjustment:Department / Division: Sheriff's Department / Region IIIFund Name: Equitable Sharing Account, Federal ForfeituresBudget Adjustment Type: Budget IncreaseFiscal Year: 2012 (July 1, 2011 - June 30, 2012)

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	Grants/Fines & Forfeitures	43,164.40	
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
225	1205	425	10-25	Overtime	5,000.00	
225	1205	425	60-07	Office Supplies	1,582.20	
225	1205	425	60-08	Field Supplies	1,582.20	
225	1205	425	70-03	Telephone	10,000.00	
225	1205	425	70-42	Sheriff's Expense	10,000.00	
225	1205	425	80-03	Equipment & Machinery (camera's)	10,000.00	
225	1205	425	80-99	Inventory Exempt	5,000.00	
TOTAL (if SUBTOTAL, check here)					43,164.40	

Requesting Department Approval: [Signature]Title: SheriffDate: 8-8-11Finance Department Approval: [Signature]Date: 8/25/2011

Entered by: _____ Date: _____

County Manager Approval: _____

Date: _____

Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Ralph Lopez, Program Manager Dept/Div: Sheriff / Region III Phone No.: 505-473-7021

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 is a request to increase the budget for Fund 225-Cost Center 1205 in the amount of \$43,164.40 which are funds Awarded to Region III through the Equitable Sharing Program; by Federal Law Enforcement Agencies, DEA and FBI. These funds are the result of joint operations where Assets are seized and the Forfeiture is processed through the US Attorney's Office.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
10-25 Overtime	Increased for Agent assigned from Sheriff's Dept.		

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
80-03	Camera's	10,000.00
80-99	Camera's less than \$3,000.00	5,000.00

- 2) Is the budget action for RECURRING expense XX or for NON-RECURRING (one-time only) expense _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Ralph Lopez, Program Manager Dept/Div: Sheriff's Dept. / Region III Phone No.: 505-473-7021

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

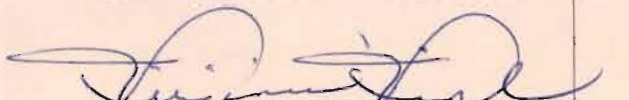
- 3) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:
 - a) If this is a state special appropriation, YES _____ NO XX
If YES, cite statute and attach a copy.
 - b) Does this include state or federal funds? YES XX NO _____
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. This request is to increase the budget in the Equitable Sharing Program from Federal Law Enforcement Agencies; DEA and FBI, as a result of joint investigations.
 - 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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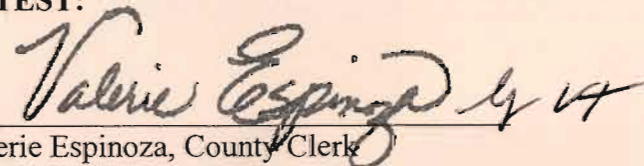
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 30th Day of August, 2011.

Santa Fe Board of County Commissioners


Virginia Vigil, Chairperson

ATTEST:


Valerie Espinoza, County Clerk

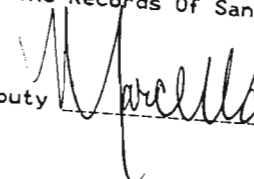


COUNTY OF SANTA FE
STATE OF NEW MEXICO

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BCC RESOLUTIONS
PAGES: 4

I Hereby Certify That This Instrument Was Filed for
Record On The 31ST Day Of August, 2011 at 02:48:14 PM
And Was Duly Recorded as Instrument # 1644089
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Deputy  Valerie Espinoza
County Clerk, Santa Fe, NM