

SANTA FE COUNTY

RESOLUTION 2011 - 131

Page 1 of 4**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: CSD / RECCFund Name: Emergency Communications Operations Fund (245)Budget 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
245	2101	385	0200	Budgeted Cash	\$36,000	
TOTAL (if SUBTOTAL, check here)					\$36,000	

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
245	2101	461	8009	Capital / Vehicles	\$36,000	
TOTAL (if SUBTOTAL, check here)					\$36,000	

Requesting Department Approval: Ken Martinez Title: RECC Director Date: 8/15/11Finance Department Approval: [Signature] Date: 8/22/11 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Ken Martinez Dept/Div: CSD / RECC Phone No.: 992-3096

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.
Requesting an increase to the Regional Emergency Communications Center Fund (245) to budget available cash balance for the purchase of 42 GPS location devices for law enforcement and emergency medical vehicles as part of the RECC CAD and Mapping upgrade with costs being shared between the City, the County and the Town of Edgewood. Money was allocated during the last fiscal year, but the statewide price agreement was not finalized before the end of the budget cycle, so the money fell to cash. Purchase is from Grants and Technology Veterans, LLC in the amount of \$36,000.00.

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 _____ or for NON-RECURRING (one-time only) expense X

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Ken Martinez Dept/Div: CSD / RECC Phone No.: 992-3096

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 _____ NO X
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.
There are no other funding sources to match this request.

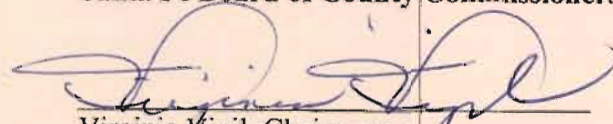
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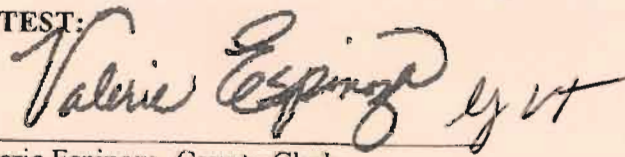
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

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) ss

BCC RESOLUTIONS
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I Hereby Certify That This Instrument Was Filed for
 Record On The 31ST Day Of August, 2011 at 02:48:19 PM
 And Was Duly Recorded as Instrument # **1644094**
 Of The Records Of Santa Fe County

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