

RESOLUTION 2011 - 143

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

Whereas, the Board of County Commissioners meeting in regular session on September 27, 2011, did request the following budget adjustment:Department / Division: Fire Department/Various Fire Districts Fund Name: Fire District Revenue Fund (244)Budget Adjustment Type: Budget Increase Fiscal Year: 2012 (July 1, 2010 - 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
244	0831	385	02-00	Budgeted Cash/State Funds	96	
244	0832	385	02-00	Budgeted Cash / State Funds	632	
244	0834	385	02-00	Budgeted Cash/State Funds	48,890	
244	0835	385	02-00	Budgeted Cash / State Funds	660	
TOTAL (if SUBTOTAL, check here <u>X</u> )					50,278	

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
244	0831	422	60-08	Supplies/Field Supplies	96	
244	0832	422	60-08	Supplies/Field Supplies	632	
244	0834	422	60-08	Supplies/Field Supplies	48,890	
244	0835	422	60-08	Supplies/Field Supplies	660	
TOTAL (if SUBTOTAL, check here <u>X</u> )					50,278	

Requesting Department Approval: [Signature] Title: Interim ChiefDate: 9-2-11Finance Department Approval: [Signature] Date: 9/12/11

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

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## 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	INCREASE AMOUNT	DECREASE AMOUNT
244	0836	385	02-00	Budgeted Cash/State Funds	51	
244	0837	385	02-00	Budgeted Cash / State Funds	3,501	
244	0838	385	02-00	Budgeted Cash/State Funds	466	
244	0839	385	02-00	Budgeted Cash / State Funds	5,691	
244	0840	385	02-00	Budgeted Cash/State Funds	27	
244	0842	385	02-00	Budgeted Cash / State Funds	936	
244	0843	385	02-00	Budgeted Cash/State Funds	10,527	
244	0844	385	02-00	Budgeted Cash / State Funds	11,154	
TOTAL (if SUBTOTAL, check here )					82,631	

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
244	0836	422	60-08	Supplies/Field Supplies	51	
244	0837	422	60-08	Supplies/Field Supplies	3,501	
244	0838	422	60-08	Supplies/Field Supplies	466	
244	0839	422	60-08	Supplies/Field Supplies	5,691	
244	0840	422	60-08	Supplies/Field Supplies	27	
244	0842	422	60-08	Supplies/Field Supplies	936	
244	0843	422	60-08	Supplies/Field Supplies	10,527	
244	0844	422	60-08	Supplies/Field Supplies	11,154	
TOTAL (if SUBTOTAL, check here )					82,631	



# SANTA FE COUNTY

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Page 3 of 5*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

DEPARTMENT CONTACT:    Name: Donna Morris    Dept/Div: Fire Department/Administration    Phone No.: 992-3082

**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 request is to budget FY-11 available cash balances from the Fire Districts Revenue Fund (244) for expenditure in FY-12. Each fire district was requested to prioritize their needs to budget funds in appropriate expenditure categories.

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

SANTA FE COUNTY  
RESOLUTION 2011 - 143Page 4 of 5*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

## DEPARTMENT CONTACT:

Name: Donna Morris Dept/Div: Fire Department Administration Phone No.: 992-3082

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 X 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.  
  
NM State Forestry Reimbursements.
  - c) Is this request 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.  
  
Not Applicable.

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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 27th Day of September, 2011.

Santa Fe Board of County Commissioners

*Virginia Vigil*

Virginia Vigil, Madam Chair

ATTEST:

*Valerie Espinoza*  
Valerie Espinoza, County Clerk



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss  
BCC RESOLUTIONS  
PAGES: 5  
I Hereby Certify That This Instrument Was Filed for  
Record On The 28TH Day Of September, 2011 at 03:43:04 PM  
And Was Duly Recorded as Instrument # **1646500**  
Of The Records Of Santa Fe County  
Witness My Hand And Seal Of Office  
Deputy *Marcella* Valerie Espinoza  
County Clerk, Santa Fe, NM