

# SANTA FE COUNTY

## RESOLUTION 2012 - 104

### 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 28, 2012, did request the following budget adjustment:

Department / Division: SHERIFF / REGION III

Fund Name: LAW ENFORCEMENT OPERATIONS FUND (246)

Budget Adjustment Type: BUDGET INCREASE

Fiscal Year: 2013 (July 1, 2012 - June 30, 2013)

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	1211	372	0800	Federal Grant Award / Edward Byrne Memorial Justice Assistance Grant (JAG) through the Dept. of Public Safety Fiscal Year 2011.		45,968.00
246	1214	372	0800	Federal Grant Award / Edward Byrne Memorial Justice Assistance Grant (JAG) through the Dept. of Public Safety Fiscal Year 2012.		41,815.00
246	1204	372	0800	Federal Grant Award / Edward Byrne Memorial Justice Assistance Grant (JAG) through the Dept. of Public Safety Fiscal Year 2013.	202,500.00	
<b>TOTAL (if SUBTOTAL, check here )</b>					<b>202,500.00</b>	<b>87,783.00</b>

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	1211	425	10-26	TERM EMPLOYEE		35,061
246	1211	425	20-01	FICA-REGULR		2,174
246	1211	425	20-02	FICA-MEDICARE		508
246	1211	425	20-03	RETIREMENT CONTRIBUTIONS		6,665
246	1211	425	20-05	HEALTH CARE		860
246	1211	425	20-06	RETIREMENT HEALTH CARE		700
<b>TOTAL (if SUBTOTAL, check here XX)</b>						<b>45,968.00</b>

Requesting Department Approval: [Signature] Title: Sheriff Date: 7-24-12

Finance Department Approval: [Signature] Date: 8/16/12 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

# SANTA FE COUNTY

## RESOLUTION 2012 - 104

### 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
<b>TOTAL (if SUBTOTAL, check here )</b>						

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	1214	425	10-25	OVERTIME		4,726
246	1214	425	10-26	TERM EMPLOYEE		9,947
246	1214	425	20-01	FICA-REGULR		616
246	1214	425	20-02	FICA-MEDICARE		144
246	1214	425	20-03	RETIREMENT CONTRIBUTIONS		1,890
246	1214	425	20-05	HEALTH CARE		627
246	1214	425	20-06	RETIREMENT HEALTH CARE		199
246	1214	425	50-90	OTHER CONTRACTUAL SERVICE		10,649
246	1214	425	70-42	SHERIFFS EXPENSES		13,017
246	1204	425	10-25	OVERTIME	14,726.33	
246	1204	425	10-26	TERM EMPLOYEE	82,454.45	
246	1204	425	20-01	FICA-REGULAR	5,112.17	
246	1204	425	20-02	FICA-MEDICARE	1,195.59	
246	1204	425	20-03	RETIREMENT CONTRIBUTIONS	17,086.72	
246	1204	425	20-05	HEALTH CARE	2,212.40	
246	1204	425	20-06	RETIREMENT HEALTHCARE	1,071.90	
<b>TOTAL (if SUBTOTAL, check here <u>XX</u> )</b>					<b>123,859.56</b>	<b>41,815.00</b>

# SANTA FE COUNTY

## RESOLUTION 2012 - 104

### 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
<b>TOTAL (if SUBTOTAL, check here )</b>						

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	1204	425	20-08	WORKERS COMP	18.40	
246	1204	425	50-90	OTHER CONTRACTUAL SERVICES	30,649.25	
246	1204	425	60-08	FIELD SUPPLIES	3,000.00	
246	1204	425	70-08	LIABILITY	3,100.00	
246	1204	425	70-42	SHERIFF'S EXPENSE	41,872.79	
<b>TOTAL (if SUBTOTAL, check here )</b>					<b>202,500.00</b>	<b>87,783.00</b>

**SANTA FE COUNTY**  
**RESOLUTION 2012 - 104**

**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**DEPARTMENT CONTACT:**      Name: Ralph Lopez – Region III                      Dept/Div: Sheriff / Region III                      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. This request is to budget the awarded amount of \$202, 500.00 for this Fiscal Year from the Grants Management Bureau, through the Department of Public Safety into an operational budget for the Region III Task Force. Grant Agreement # 12-JAG-REGIII-SFY13-1. An estimated budget of \$87,783 was included in the FY2013 Operating Budget for the Region III Program. This request is for a budget increase of \$114,717 to align the FY2013 budget with the actual awarded amount of \$202,500.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
10-25	Overtime Included for this Budget Request	Permanent	Agent
10-26	Salaries Included in this Budget Request	Term	Program Mgr. / Administrative Sec.
20-01	Benefits	Term	Program Mgr. / Administrative Sec.

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

**SANTA FE COUNTY**  
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*ATTACH ADDITIONAL SHEETS IF NECESSARY.*

**DEPARTMENT CONTACT:**

Name: Ralph Lopez – Region III Dept/Div: Sheriff / Region III 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 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 budget the awarded amount through the Department of Public Safety from the Edward Byrne Memorial, Justice Assistance Grant for the current fiscal year. Awarded amount \$202,500.00, Grant Agreement 12-JAG-REGIII-SFY13-1.**
  - 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.

RESOLUTION 2012 - 104

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 August, 2012.

Santa Fe Board of County Commissioners

Liz Stefaniacs, Chairperson

ATTEST:

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE )
STATE OF NEW MEXICO ) ss
BCC RESOLUTIONS
PAGES: 6
I Hereby Certify That This Instrument Was Filed for
Record On The 31ST Day Of August, 2012 at 11:29:58 AM
And Was Duly Recorded as Instrument # 1680086
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy County Clerk, Santa Fe, NM