SFC CLERK RECORDED 09/27/2012

SANTA FE COUNTY

RESOLUTION 2012 - 123

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 25, 2012, did request the following budget adjustment:

Department / Division: Fire Department/Administration Fund Name: FEMA Grant Fund (244)

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
244	0814	385	03-00	Budgeted Cash/FEMA	5,442	
TOTAL (if SUBTOTAL, check here)					5,442	

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	0814	422	10-25	Salary & Wages/Overtime	2,149	
244	0814	422	20-01	Employee Benefits/FICA Regular		27
244	0814	422	20-02	Employee Benefits/FICA Medicare		6
244	0814	422	20-06	Employee Benefits/FICA Retirement Health Care		8
244	0814	422	60-09	Supplies/Educational Supplies	3,334	
TOTAL (if SUBTOTAL, check here X)					5,483	41

Requesting Department Approval: _____ **Title:** Chief **Date:** 9-12-12

Finance Department Approval: _____ **Date:** 9/13/12 **Entered by:** _____ **Date:** _____

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

SFC CLERK RECORDED 05/27/2012

SANTA FE COUNTY

RESOLUTION 2012 - 133

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.

Requesting BCC approval for a budget increase in the amount of $5,442 to the Fire Department FEMA Grant Fund (244) to reflect the actual FY-2012 end of year available cash balance.

e

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

SFC CLERK RECORDED 03/27/2012

SANTA FE COUNTY

RESOLUTION 2012 - 123

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.

    AFG Grant EMW-2009-FO-06361 and SAFER Grant EMW-2009-FF-00453.

  - 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.

    N/A

SFC CLERK RECORDED 09/27/2012

SANTA FE COUNTY

RESOLUTION 2012 - 123

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 25th Day of September, 2012.

Santa Fe Board of County Commissioners

Liz Stefanics, Madam Chair

ATTEST:

Valerie Espinoza, County Clerk

COUNTY CLERK SANTA FE COUNTY NEW MEXICO VALERIE ESPINOZA

COUNTY CLERK SANTA FE COUNTY NEW MEXICO VALERIE ESPINOZA

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

I Hereby Certify That This Instrument Was Filed for Record On The 27TH Day Of September, 2012 at 11:45:00 AM And Was Duly Recorded as Instrument # 1682772 Of The Records Of Santa Fe County

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