

SANTA FE COUNTY

RESOLUTION 2012 - 125

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: Hazmat Grant (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	0806	385	03-00	Budgeted Cash/Hazmat Grant	17,865	
244	0806	371	00-00	State/Hazmat Grant	5,000	
<b>TOTAL (if SUBTOTAL, check here )</b>					<b>22,865</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
244	0806	422	30-02	Travel/OS Mileage & Fares	2,500	
244	0806	422	30-04	Travel/OS Meals & Lodging	2,500	
244	0806	422	60-02	Supplies/Safety Supplies	770	
244	0806	422	60-08	Supplies/Field Supplies	1,648	
244	0806	422	60-09	Supplies/Educational /Supplies	4,206	
244	0806	422	70-33	Other Operating Costs/Seminars & Workshops	3,000	
<b>TOTAL (if SUBTOTAL, check here X )</b>					<b>14,624</b>	

Requesting Department Approval: [Signature] Title: Chief Date: 9-12-12

Finance Department Approval: [Signature] Date: 9/12/12 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
<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
244	0806	422	80-09	Capital Purchases/Vehicles Heavy Equipment	4,249	
244	0806	422	80-16	Capital Purchases/Computer Software	1,994	
244	0806	422	80-96	Capital Purchases/Inv.Exempt Computer Software	1,998	
<b>TOTAL (if SUBTOTAL, check here )</b>					22,865	

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**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 to the Hazmat Grant (244) to budget the FY-2012 available cash balance of \$17,865 and to adjust the budget for the current fiscal year allocations to the actual distribution amount by \$5,000 for a total fund increase of \$22,865 for expenditure in FY-12 in accordance with the WIPP JPA expenditure specifications.

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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
80-09	Satellite receiver for the CBRNE Truck & Emergency Lights for EM Truck	4,249
80-16	Computer Software	1,994
80-96	Inventory Exempt Computer Software	1,998

- 2) Is the budget action for RECURRING expense \_\_\_\_\_ or for NON-RECURRING (one-time only) expense X

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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.  
  
WIPP Isolation Pilot Project Joint Powers of Agreement.
  - 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

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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 25th Day of September, 2012.

Santa Fe Board of County Commissioners

Liz Stefanics, Madam Chair

ATTEST:

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss

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I Hereby Certify That This Instrument Was Filed for Record On The 27TH Day Of September, 2012 at 11:53:45 AM And Was Duly Recorded as Instrument # **1682775** Of The Records Of Santa Fe County

Deputy )  
Valerie Espinoza  
County Clerk, Santa Fe, NM