

SANTA FE COUNTY
RESOLUTION 2012 - 128

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/Fire Administration Fund Name: Eldorado Revenue 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 | 0832 | 360 | 01-01 | Eldorado Contribution | 27,074 | |
| | | | | | 27,074 | |

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 | 0832 | 422 | 80-17 | Capital Purchases/Medical Equipment | 27,074 | |
| | | | | | 27,074 | |

Requesting Department Approval: [Signature] Fire Chief

Date: 9-12-12

Finance Department Approval: [Signature] Date: 9/13/12

Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

Updated by: _____ Date: _____

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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 Eldorado Fire District Revenue Cost Center (244) to budget a contribution in the amount of \$27,074 made by the Eldorado Fire & Rescue Association to purchase a Lifepack 15 heart monitor for the Eldorado Fire District. This contribution was made so that the heart monitor can be purchased utilizing the SFC Procurement Guidelines and tagged as a SFC fixed asset.

| 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 |
|-----------|--|--------|
| 80-17 | Lifepack 15 Heart Monitor | 27,074 |
| | | |
| | | |

- 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
 - 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.

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 Stefaniacs
Liz Stefaniacs, Madame Chair

ATTEST:

Valerie Espinoza
Valerie Espinoza, County Clerk



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 12:07:22 PM
And Was Duly Recorded as Instrument # 1682779
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Deputy Marcella Calzavara Valerie Espinoza
County Clerk, Santa Fe, NM