

SANTA FE COUNTY

RESOLUTION 2012 - 141

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

Whereas, the Board of County Commissioners meeting in regular session on October 30, 2012, did request the following budget adjustment:Department / Division: Fire Department/Various Fire Districts Fund Name: Fire District Revenue/Forestry 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	0801	360	09-02	Revenue/State Forestry	355	
244	0809	360	09-02	Revenue/State Forestry	25,515	
244	0833	360	09-02	Revenue/State Forestry	319	
244	0839	360	09-02	Revenue/State Forestry	47	
TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/>)					26,236	

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	0801	421	35-03	Vehicle Expenses/Vehicle Maintenance	355	
244	0809	422	10-26	Salaries & Wages/Term Employees	12,543	
244	0809	422	20-01	Employee Benefits/FICA Regular	1,582	
244	0809	422	20-02	Employee Benefits/FICA Medicare	370	
244	0809	422	20-03	Employee Benefits/PERA	7,489	
TOTAL (if SUBTOTAL, check here <input checked="" type="checkbox"/>)					22,339	

Requesting Department Approval: [Signature] Title: Chief Date: 10-3-12Finance Department Approval: [Signature] Date: 10/15/12 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
244	0843	360	09-02	Revenue/State Forestry	48	
244	0872	360	09-02	Revenue/State Forestry	367	
TOTAL (if SUBTOTAL, check here)					26,651	

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	0809	422	20-05	Employee Benefits/Group Insurance	3,000	
244	0809	422	20-06	Employee Benefits/Ret. HC	531	
244	0833	422	60-08	Supplies/Field Supplies	319	
244	0839	422	60-08	Supplies/Field Supplies	47	
244	0843	422	60-08	Supplies/Field Supplies	48	
244	0872	421	10-55	Salary & Wages Volunteer Reimbursements	367	
TOTAL (if SUBTOTAL, check here)					26,651	

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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 Forest Restoration and Various Fire Districts (244) Forestry Revenue Fund for a combined total of \$26,651 to reimburse the Wildland hand crew and various fire districts for fire personnel and/or fire apparatus utilized on the following fires: Utility, South Mountain, Borrego 2, and Bales. The various fire districts will utilize the reimbursements to purchase or replace necessary field supplies and reimburse personnel utilized on the fires, and Wildland will utilize the reimbursements to help fund the fire department staff of Wildland Urban Interface Specialists as well as supplies and vehicle maintenance expenses.

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

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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.

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 30th Day of October, 2012.

Santa Fe Board of County Commissioners

Liz Stefanics

Liz Stefanics, Madam Chair

ATTEST:

Valerie Espinoza
Valerie Espinoza, County Clerk



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) ss PAGES: 5
I Hereby Certify That This Instrument Was Filed for
Record On The 5TH Day Of November, 2012 at 12:40:01 PM
And Was Duly Recorded as Instrument # 1686684
Of The Records Of Santa Fe County
Deputy *Marcella Ortiz* Witness By Hand And Seal Of Office
Valerie Espinoza
County Clerk, Santa Fe, NM