SFC CLERK RECORDED 11/29/2012

SANTA FE COUNTY

RESOLUTION 2012 - 156

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

Whereas, the Board of County Commissioners meeting in regular session on November 27, 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	0809	360	09-02	Revenue/State Forestry	6,893	
244	0841	360	09-02	Revenue/State Forestry	128	
244	0831	360	09-02	Revenue/State Forestry	339	
244	0838	360	09-02	Revenue/State Forestry	231	
TOTAL (if SUBTOTAL, check here X)					7,591	

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	10-26	Salaries & Wages/Term Employees	3,400	
244	0809	422	20-01	Employee Benefits/FICA Regular	427	
244	0809	422	20-02	Employee Benefits/FICA Medicare	100	
244	0809	422	20-03	Employee Benefits/PERA	2,023	
TOTAL (if SUBTOTAL, check here X)					5,950	

Requesting Department Approval: _____ **Title:** Chief **Date:** 11-6-12

Finance Department Approval: _____ **Date:** 11/14/12 **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	176	
244	0836	360	09-02	Revenue/State Forestry	210	
244	0835	360	09-02	Revenue/State Forestry	1,445	
244	0872	360	09-02	Revenue/State Forestry	2,353	
TOTAL (if SUBTOTAL, check here ____)					11,775	

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	800	
244	0809	422	20-06	Employee Benefits/Ret. HC	143	
244	0841	422	60-08	Supplies/Field Supplies	128	
244	0831	422	60-08	Supplies/Field Supplies	339	
244	0838	422	60-08	Supplies/Field Supplies	231	
244	0843	422	60-08	Supplies/Field Supplies	176	
244	0836	422	60-08	Supplies/Field Supplies	210	
244	0835	422	60-08	Supplies/Field Supplies	1,445	
244	0872	421	10-55	Salary & Wages/Volunteer Reimbursements	2,353	
TOTAL (if SUBTOTAL, check here ____)					11,775	

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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 $11,775 to reimburse the Wildland hand crew and various fire districts for fire personnel and/or fire apparatus utilized on the Arroyo Alamo and Waldo Fires. 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.

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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RESOLUTION 2012 - 156

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.

    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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SANTA FE COUNTY

RESOLUTION 2012 - 156

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 27th Day of November, 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

BCC RESOLUTIONS
PAGES: 5

I Hereby Certify That This Instrument Was Filed for Record On The 29TH Day Of November, 2012 at 04:19:35 PM And Was Duly Recorded as Instrument # 1689024 Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Valerie Espinoza

Deputy _____ County Clerk, Santa Fe, NM