

SANTA FE COUNTY

RESOLUTION 2012 - 103

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

Whereas, the Board of County Commissioners meeting in regular session on May 29, 2012, did request the following budget adjustment:

Department / Division: Sheriff's Office / LEOF Fund Name: Law Enforcement Operations Fund

Budget Adjustment Type: Increase Fiscal Year: 2012 (July 1, 2011 - June 30, 2012)

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
246	1201	381	03.00	Subsidies / Department of Justice MOU/USMS Asset Forfeiture Funds SFCS# 2012-0223—SD/VO	4674.21	
<b>TOTAL (if SUBTOTAL, check here )</b>					4674.21	

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
246	1201	424	10.25	Salary & Wages / Overtime	4607.40	
246	1201	424	20.02	Employee Benefits / FICA - Medicate	66.81	
<b>TOTAL (if SUBTOTAL, check here )</b>					4674.21	

Requesting Department Approval: [Signature] Title: Under Sheriff Date: 5-15-12

Finance Department Approval: [Signature] Date: 5/16/12 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

## SANTA FE COUNTY

RESOLUTION 2012 - 63

ATTACH ADDITIONAL SHEETS IF NECESSARY.

## DEPARTMENT CONTACT:

Name: Robert Garcia / Sheriff's Dept/Div: Sheriff's Office/LEOF Phone No.: (505) 986-2455

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.  
Request for increase is to budget a portion of the MOU/USMS Asset Forfeiture Funds - between the US Marshals Service and the Sheriff's Office to be used within this fiscal year, in which the funding from this grant will assist in paying overtime to law enforcement officers within the Sheriff's Office who actively participate in fugitive apprehension investigations.

## a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
10.25	Salary & Wages - overtime	Permanent	Law Enforcement Officers

## 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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**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**DEPARTMENT CONTACT:**

Name: Robert Garcia / Sheriff Dept/Div: Sheriff's Office/LEOF Phone No.: (505) 986-2455

**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.

<b>TITLE:</b>	<b>USMS Asset Forfeiture Funds</b>
<b>SFCS PA#:</b>	<b>2012-0223-SD/VO</b>
<b>AWARD PERIOD:</b>	<b>October 4, 2011 to September 30, 2012</b>
<b>AWARD AMOUNT:</b>	<b>\$15,000.00</b>

- 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 29th Day of May, 2012.

Santa Fe Board of County Commissioners

Liz Stefanics, Chairperson

ATTEST:

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE ) BCC RESOLUTIONS
STATE OF NEW MEXICO ) ss PAGES: 4
I Hereby Certify That This Instrument Was Filed for
Record On The 30TH Day Of May, 2012 at 01:18:02 PM
And Was Duly Recorded as Instrument # 1670757
Of The Records Of Santa Fe County.
Witness My Hand And Seal Of Office
Valerie Espinoza
Deputy County Clerk, Santa Fe, NM