

RESOLUTION 2012 - 99

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

Whereas, the Board of County Commissioners meeting in regular session on August 28, 2012, did request the following budget adjustment:

Department / Division: Finance for Public Works/Projects/Edgewood Fire Station Fund Name: GOB 2001 Series

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
353	0000	385	0400	2001 Series GOB – Budgeted Cash	4,996	
TOTAL (if SUBTOTAL, check here)					\$4,996	\$

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
353	8005	481	8001	2001 Series GOB – Town of Edgewood Fire Station – Capital Bldgs/Structures		
TOTAL (if SUBTOTAL, check here)					\$4,996	\$

Requesting Department Approval: Carole Jaramillo  Title: Budget Administrator Date: 8/28/12

Finance Department Approval:  Date: 8/16/12 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

SANTA FE COUNTY

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Carole Jaramillo Dept/Div: Finance for Public Works/PFOS Phone No.: 986-6321

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.
The Finance Division on behalf of the Public Works Department/Project Division seeks to increase the budget in the 2001 Series GOB to budget the cash balance which has accumulated from interest earnings in prior years. The cash will be utilized as part of the financing plan for the Town of Edgewood Fire Station project.

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
8001	Town of Edgewood Fire Station.	\$4,996

- 2) Is the budget action for RECURRING expense _____ or for NON-RECURRING (one-time only) expense X_____

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DEPARTMENT CONTACT:

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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 X NO
If YES, cite statute and attach a copy.
2001 Series General Obligation Bond Fund cash balance.
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.

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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 28th Day of August, 2012.

Santa Fe Board of County Commissioners

Liz Stefanics, Chairperson



ATTEST:

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss
BCC RESOLUTIONS
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I Hereby Certify That This Instrument Was Filed for Record On The 31ST Day Of August, 2012 at 10:12:37 AM And Was Duly Recorded as Instrument # 1680045 Of The Records Of Santa Fe County

Deputy [Signature] Witness My Hand And Seal Of Office Valerie Espinoza County Clerk, Santa Fe, NM