

SANTA FE COUNTY

RESOLUTION 2013 - 29

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

Whereas, the Board of County Commissioners meeting in regular session on March 26, 2013, did request the following budget adjustment:

Department / Division: Fire Department/Administration Fund Name: La Puebla Impact Fee Fund (216)

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
216	0835	341	16-02	Revenue/Impact Fees	508	
216	0835	385	06-00	Budgeted Cash/Impact Fees	5,059	
TOTAL (if SUBTOTAL, check here)					5,567	

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
216	0835	422	80-09	Capital Purchases/Vehicles	5,567	
TOTAL (if SUBTOTAL, check here X)					5,567	

Requesting Department Approval: [Signature] Title: Chief Date: 2.27.13

Finance Department Approval: [Signature] Date: 3/13/13 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 4-1-13 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 La Puebla Impact Fee Fund (216) to budget FY-2013 impact fee revenue of \$508 and prior years budgeted cash in the amount of \$5,059 for a total of \$5,567 to be utilized for the purchase of a fire engine apparatus for the La Puebla Fire District. The use of impact fees will benefit the La Puebla Fire District and the communities in the Northern Region/Santa Fe County.

e

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
80-09	Vehicle	5,567

- 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 _____ 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.

Fire Fund Disbursement/Cash, NM Fire Protection Grant Award and NM State Forestry Revenue.

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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 26th Day of March, 2013.

Santa Fe Board of County Commissioners

Kathy Holian
Kathy Holian, Madam Chair

ATTEST:

Geraldine Salazar
Geraldine Salazar, County Clerk *4/1/2013*



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 2ND Day Of April, 2013 at 10:32:16 AM
And Was Duly Recorded as Instrument # 1701208
Of The Records Of Santa Fe County
Witness My Hand And Seal Of Office
Deputy *Marcelle Pollock* Geraldine Salazar
County Clerk, Santa Fe, NM