

SANTA FE COUNTY

RESOLUTION 2013 - 51

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 28, 2013, did request the following budget adjustment:

Department / Division: Sheriff's Office Fund Name: Law Enforcement Operating Fund (LEOF)

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
246	1232	381	0300	Joint Law Enforcement Operations (JLEO)	\$6,000.00	
<b>TOTAL (if SUBTOTAL, check here _____)</b>					<b>\$6,000.00</b>	

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	1232	424	10.25	Salary & Wages / Overtime	\$5,913.00	
246	11232	424	20.02	Employee Benefits / FICA Medicare	\$87.00	
<b>TOTAL (if SUBTOTAL, check here _____)</b>					<b>\$6,000.00</b>	

Requesting Department Approval: [Signature] Title: Sheriff Date: 4-2-13

Finance Department Approval: [Signature] Date: 5/12/13 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: [Signature] Date: 5-28-13 Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Sheriff Robert Garcia Dept/Div: Sheriff's Office 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.

The United States Marshals has granted the Santa Fe Sheriff's Office \$6,000.00 to use for overtime reimbursement in support of the Joint Law Enforcement Operations (JLEO) program. JLEO funding is the source of overtime reimbursement made to Santa Fe County Sheriff's Office by United States Marshals Service (USMS) for operations in support of fugitive apprehension.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
10.25	Overtime	Full-Time / Permanent	Deputy / Patrol

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 \_\_\_\_\_

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Sheriff Robert Garcia Dept/Div: Sheriff's Office 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.
    - Title: **Joint Law Enforcement Operations (JLEO) Program**
    - Project #: **JLEO/TFS4 (Fund# AFF-B-OP-1)**
    - Award amt: **\$6,000.00**
    - Award period: **October 9, 2012 thru September 30, 2013**
  - 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.

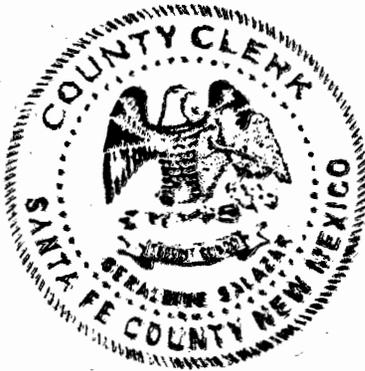
Approved, Adopted, and Passed This 28th Day of May, 2013.

Santa Fe Board of County Commissioners

Kathy Holian  
Kathy Holian, Chairperson

ATTEST:

Geraldine Salazar  
Geraldine Salazar, County Clerk



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss  
BCC RESOLUTIONS  
PAGES: 4  
I Hereby Certify That This Instrument Was Filed for  
Record On The 29TH Day Of May, 2013 at 04:17:16 PM  
And Was Duly Recorded as Instrument # 1707210  
Of The Records Of Santa Fe County  
Witness My Hand And Seal Of Office  
Deputy Marcello Salazar Geraldine Salazar  
County Clerk, Santa Fe, NM