

SANTA FE COUNTY

RESOLUTION 2013 - 92

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

Whereas, the Board of County Commissioners meeting in regular session on September 24, 2013, did request the following budget adjustment:

Department / Division: Fire Department/Various Fire Districts Fund Name: Fire District Revenue Fund (244)

Budget Adjustment Type: Budget Increase Fiscal Year: 2014 (July 1, 2013 - June 30, 2014)

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	0831	385	02-00	Budgeted Cash/State Funds	26,438	
244	0832	385	02-00	Budgeted Cash / State Funds	13,982	
244	0833	385	02-00	Budgeted Cash / State Funds	894	
244	0834	385	02-00	Budgeted Cash/State Funds	37,728	
TOTAL (if SUBTOTAL, check here X)					79,042	

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	0831	422	80-09	Capital Purchases/Vehicles	26,438	
244	0832	422	60-07	Supplies/Operational Supplies	13,982	
244	0833	422	60-07	Supplies / Operational Supplies	894	
244	0834	422	60-07	Supplies/Operational Supplies	37,728	
TOTAL (if SUBTOTAL, check here X)					79,042	

Requesting Department Approval: [Signature] Title: Chief Date: 9.10.13

Finance Department Approval: [Signature] Date: 9/24/13 Entered by: _____ Date: _____

County Manager Approval: [Signature] Date: 9.24.13 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	0836	385	02-00	Budgeted Cash/State Funds	1,364	
244	0837	385	02-00	Budgeted Cash / State Funds	12,443	
244	0837	360	13-00	Revenue/Movie Lot	495	
244	0838	385	02-00	Budgeted Cash/State Funds	1,417	
244	0839	385	02-00	Budgeted Cash / State Funds	3,433	
244	0840	385	02-00	Budgeted Cash/State Funds	1,827	
244	0841	385	02-00	Budgeted Cash / State Funds	405	
244	0842	385	02-00	Budgeted Cash/State Funds	402	
244	0842	360	13-00	Revenue/Movie Lot	495	
244	0843	385	02-00	Budgeted Cash / State Funds	1,933	
244	0844	385	02-00	Budgeted Cash / State Funds	22,455	
244	0844	360	13-00	Revenue/Movie Lot	770	
244	0871	360	13-00	Revenue Movie Lot/Volunteer Payments	2,677	
TOTAL (if SUBTOTAL, check here)					129,158	

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	0836	422	60-07	Supplies/Operational Supplies	1,364	
244	0837	422	60-07	Supplies/Operational Supplies	12,938	
244	0838	422	60-07	Supplies/Operational Supplies	1,417	
244	0839	422	60-07	Supplies/Operational Supplies	3,433	
244	0840	422	60-07	Supplies/Operational Supplies	1,827	
244	0841	422	60-07	Supplies/Operational Supplies	405	
244	0842	422	60-07	Supplies/Operational Supplies	897	
244	0843	422	60-07	Supplies/Operational Supplies	1,933	
244	0844	422	60-07	Supplies/Operational Supplies	23,225	
TOTAL (if SUBTOTAL, check here <u>X</u>)					126,481	

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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
TOTAL (if SUBTOTAL, check here)						

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	0871	421	10-55	Salaries & Wages/Volunteer Reimbursements	2,472	
244	0871	421	20-01	Employee Benefits/FICA Regular	166	
244	0871	421	20-02	Employee Benefits/FICA Medicare	39	
TOTAL (if SUBTOTAL, check here)					129,158	

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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.

This request is to budget FY-13 available cash balances from the Fire Districts Revenue Fund (244) for expenditure in FY-14 in the amount of \$124,721 and to budget new revenue for the Stanley, Glorieta and Galisteo Fire Districts in the amount of \$4,437 to compensate these three fire districts for the time and equipment utilized on the movie set of Jane Got A Gun. The total of this request is for a budget increase in the amount of \$129,158. Each fire district was requested to prioritize their needs to budget funds in appropriate expenditure categories.

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	Apparatus	26,438

- 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: 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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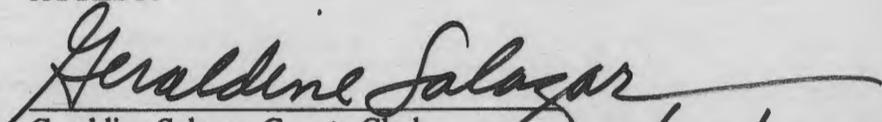
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 24th Day of September, 2013.

Santa Fe Board of County Commissioners


Kathy Holian, Madam Chair

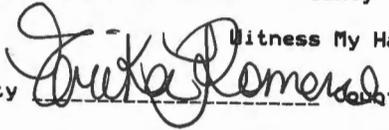
ATTEST:


Geraldine Salazar, County Clerk
9/24/2013



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) ss PAGES: 7

I Hereby Certify That This Instrument Was Filed for
Record On The 25TH Day Of September, 2013 at 02:51:12 PM
And Was Duly Recorded as Instrument # 1718992
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Geraldine Salazar
Deputy  County Clerk, Santa Fe, NM