

SANTA FE COUNTY

RESOLUTION 2015 - 30

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

Whereas, the Board of County Commissioners meeting in regular session on February 24, 2015, did request the following budget adjustment:

Department / Division: Community Services Fund Name: Alcohol Programs Fund (241)

Budget Adjustment Type: Decrease in Budget Fiscal Year: 2015 (July 1, 2014 - June 30, 2015)

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE YEAR	DEPARTMENT DIVISION YEAR	ACTIVITY RANGE/SUB YEAR	ELEMENT/ OBJECT YEAR	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
241	0405	371	04-00			\$5,000
TOTAL (IF SUBTOTAL, check here )						
						\$5,000

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE YEAR	DEPARTMENT DIVISION YEAR	ACTIVITY RANGE/SUB YEAR	ELEMENT/ OBJECT YEAR	CATEGORY/ FUND ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
241	0405	464	50-03			\$5,000
TOTAL (IF SUBTOTAL, check here )						
						\$5,000

Requesting Department Approval: Nichol Clauer Title: Department Director Date: 2/7/15

Finance Department Approval: Gregory Marling Date: 2/11/15 Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: Patricia Spiller Date: 2/04/15 Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

**SANTA FE COUNTY  
RESOLUTION 2015 - 30**

**ATTACH ADDITIONAL SHEETS IF NECESSARY.**

**DEPARTMENT CONTACT:** Name: Joyce Varela Dept/Div: Community Services Phone No.: 992-9843

**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.

A decrease in budget is necessary in this account to arrive at the actual amount that was awarded from the CDWI Funding to the DWI Program. Originally, the amount was budgeted as an estimate of what was going to be received and now has to be revised accordingly, see copy of the grant agreement attached.

**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
50-03	A decrease in funding for the Law Enforcement agencies to utilized for DWI related efforts.	-5,000

- 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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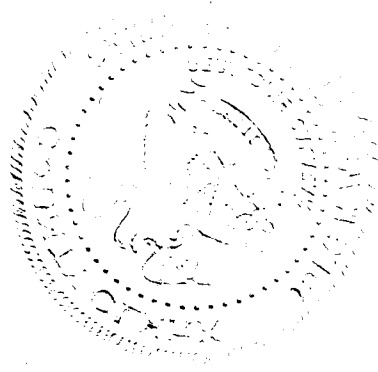
DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):

- 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      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.

Grant Name: Community DWI Funding  
Grant Amount: \$27,743.00

Grant Number: 15-CD-05-091  
Date Awarded: December 2, 2014

- 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 24th Day of February, 2015.

Santa Fe Board of County Commissioners

*[Signature]*  
Robert A. Araya, Chairperson

ATTEST:

*[Signature]*  
Geraldine Salazar, County Clerk

2-24-2015



COUNTY OF SANTA FE )  
STATE OF NEW MEXICO ) ss  
BCC RESOLUTIONS  
PAGES: 4

I Herby Certify That This Instrument Was Filed for Record On The 26TH Day Of February, 2015 at 10:28:35 AM And Was Duly Recorded as Instrument # 1758259 Of The Records Of Santa Fe County

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