

RSANTA FE COUNTY

RESOLUTION 2019 - 63

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, 2019 did request the following budget adjustment:

Department / Division: GMD/Housing Fund Name: CFP Fund (301)

Budget Adjustment Type: Budget Increase Fiscal Year: 2019 (July 1, 2018 - June 30, 2019)

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
101	0000	385	01-00	General Fund/ Budgeted Cash	36,637	
301	0000	390	01-01	Housing Cap Improv/Transfer In/From General Fund	36,637	
301	0000	385	03-00	Housing Capl Improv/Budgeted Cash		36,637
TOTAL (if SUBTOTAL, check here)					\$73,274	\$36,637

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
101	0000	490	03-01	General Fund/Operating Transfer Out/CFP Funds	36,637	
TOTAL (if SUBTOTAL, check here x)					\$36,637	

Requesting Department Approval: J. Jordan Barela Title: Deputy Director of Housing Date: 05/6/2019
 Finance Department Approval: [Signature] Date: 05/06/19 Entered by: _____ Date: _____
 County Manager Approval: [Signature] Date: 5.28.19 Updated by: _____ Date: _____

SFC CLERK RECORDED 05/29/2019

Log # 1490

SANTA FE COUNTY

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Joseph Montoya Dept/Div: GMD/Housing Phone No.: 992-3058

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 Housing Capital Fund Program (CFP) was overspent in prior year grants, due to the County not reconciling the two separate accounting systems used to prepare the annual CAFR. Prior to fiscal year 2017, the County used the Central Square (AS400) and the program GOV Writer to prepare the CAFR. AS400 was kept on the cash basis reporting, while GOV Writer was used to record the year end accruals required for the CAFR. Beginning with fiscal year 2017, the County uses only the AS400 as its book of record recording year end accruals subsequent to closing period 12 for the fiscal year. After reconciling the prior years' grants, a 2018 audit adjustment resulted in the County restating fund balance for the fund. A transfer of resources will correct the deficiency. The additional resources will not be spent they will simply correct the error.

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

• 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: Joseph Montoya Dept/Div: GMD/Housing Phone No.: 986-3058

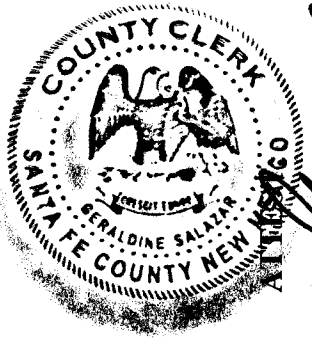
DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant name and award date, other laws, regulations, etc.):

- 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 NO X X
If YES, cite statute and attach a copy.
 - b) Does this include state or federal funds? YES NO X 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 X
 - 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, 2019.



Santa Fe Board of County Commissioners

Anna J. Hamilton
Anna Hamilton, Chairperson

Geraldine Salazar
Geraldine Salazar, 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 29TH Day Of May, 2019 at 10:28:02 AM And Was Duly Recorded as Instrument # 1887329 Of The Records Of Santa Fe County

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