

SANTA FE COUNTY

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RESOLUTION 2008 - 132

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

Whereas, the Board of County Commissioners meeting in regular session on August 26, 2008 did request the following budget adjustment:Department / Division: Community Services/AdministrationFund Name: State Special AppropriationsBudget Adjustment Type: Budget IncreaseFiscal Year: 2009 (July 1, 2008 - June 30, 2009)

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASE/SUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
250	0764	371	9000	Arroyo Seco Teen Center/State Special Approp	43,739	
TOTAL (if SUBTOTAL, check here)					43,739	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASE/SUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY/LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
250	0764	481	8001	Arroyo Seco Teen Center/Buildings & Structures	43,739	
TOTAL (if SUBTOTAL, check here)					43,739	

Requesting Department Approval: Joseph Gutierrez, John P. Gutierrez Title: Director, Community Service DepartmentDate: August 12, 2008Finance Department Approval: Wanda C. Martinez Date: 8/18/08

Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

Updated by: _____ Date: _____

SANTA FE COUNTY

RESOLUTION 2008 - 132**ATTACH ADDITIONAL SHEETS IF NECESSARY.****DEPARTMENT CONTACT:** Name: Pamela LindstamDept/Div: Community Services/AdministrationPhone No.: 992-9860**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 purpose of this request is to carry forward the balance on account #250-0764-481 for the Arroyo Seco (Marcos Trujillo) Teen Center in the amount of \$43,739 from fiscal year 2008 to this current fiscal year 2009.

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: Pamela Lindstam

Dept/Div: Community Services/Administration

Phone No.: 992-9860

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 X NO _____
If YES, cite statute and attach a copy.
Laws of 2005-Chapter 45/494
 - 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.
Marcus P. Trujillo Teen Center – 05-L-G-1792 - \$50,000
 - 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.
NA

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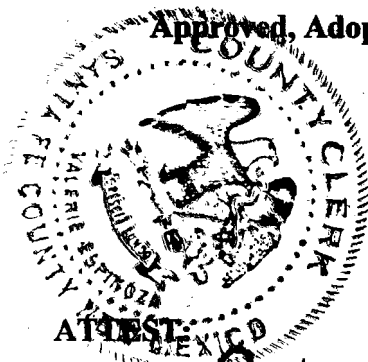
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NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 26th Day of August, 2008.

Santa Fe Board of County Commissioners


Paul Campos, Chairperson



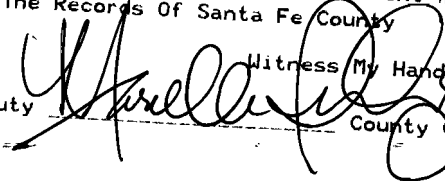

Valerie Espinoza, County Clerk



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 27TH Day Of August, A.D., 2008 at 11:24
And Was Duly Recorded as Instrument # 1536384
Of The Records Of Santa Fe County


Deputy _____ Witness My Hand And Seal Of Office
Valerie Espinoza
County Clerk, Santa Fe, NM