

## SANTA FE COUNTY

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

Whereas, the Board of County Commissioners meeting in regular session on November 18<sup>th</sup> 2008, did request the following budget adjustment:Department / Division: Community Services/AdministrationFund Name: State Special AppropriationBudget 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 BASIC/SUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
318	0790	371	9000	Nambe Headstate/State Special Appropriation	100,000	
TOTAL (if SUBTOTAL, check here _____)					100,000	

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
318	0790	481	8005	Capital Purchases/Land Acquisition	100,000	
TOTAL (if SUBTOTAL, check here _____)					100,000	

Requesting Department Approval: Joseph Gutierrez Title: Director, Community Services DepartmentDate: October 20, 2008Finance Department Approval: [Signature] Date: 11/18/08

Entered by: \_\_\_\_\_ Date: \_\_\_\_\_

County Manager Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Updated by: \_\_\_\_\_ Date: \_\_\_\_\_

SANTA FE COUNTY  
RESOLUTION 2008 - 195*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 budget funds received from the State Of N.M. Severance Tax Bond Projects Laws of 2008 for the Nambe Headstart account #318-0790 in the amount of \$100,000 for land acquisition.

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
318-0790-481-8005	Acquisition of land for the Nambe Headstart	100,000

- 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 \_\_\_\_\_ NO \_\_\_\_\_  
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.  
State Of N.M. Severance Tax Bond Project Laws of 2008 Grant Agreement #08-L-G-3265 - \$100,000
  - 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.

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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 18 Day of November, 2008.

Santa Fe Board of County Commissioners

  
Paul Campos, Chairperson

ATTEST:

  
Valerie Espinoza, County Clerk



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COUNTY OF SANTA FE                    )  
STATE OF NEW MEXICO                ) ss

I Hereby Certify That This Instrument Was Filed for  
Record On The 26TH Day Of November, 2008 at 03:31:39 PM  
and Was Duly Recorded as Instrument # 1545288  
of The Records Of Santa Fe County

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

Deputy 