

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 December 9th, 2008 did request the following budget adjustment:Department / Division: Community Services/ProjectsFund Name: State Spec App. (318) and General Fund (101)Budget 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	0747	390	0100	Operating Transfer In	19,162	
TOTAL (if SUBTOTAL, check here _____)					19,162	

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	0747	481	8001	Homeless Housing Teen Complex/Capital Purchases/Buildings & Structures	19,162	
101	0302	490	0100	Operating Transfer Out	19,162	
101	0302	412	8090	Capital Purchases/Other Capital Purchases		19,162
TOTAL (if SUBTOTAL, check here _____)					38,324	19,162

Requesting Department Approval: Joseph Gutierrez,  Title: Director, Community Services DepartmentDate: November 18, 2008Finance Department Approval:  Date: 12/1/08

Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____

Updated by: _____ Date: _____

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RESOLUTION 2008 - 215Page 2 of 3**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 move funds from the Capital Package "Stucco Exterior of Law Complex" account #101-0302-412-8090 in the amount of \$19,162 into the Homeless Housing Teen Complex (Youth Shelter & Family Services) account #318-0747-481-8001 in order to fund the Lockwood Construction Change Order #4 for the construction of the Youth Shelter Phase II in the amount of \$15,151.92 and to correct a shortfall of \$4,010.08 in that account.

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
318-0747-481-8001	Lockwood Construction Change Order #4	15,151.92
318-0747-481-8001	Shortfall Correction	4,040.08

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

SANTA FE COUNTY

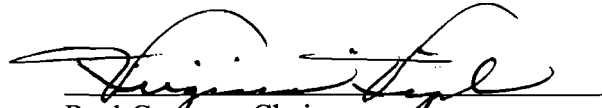
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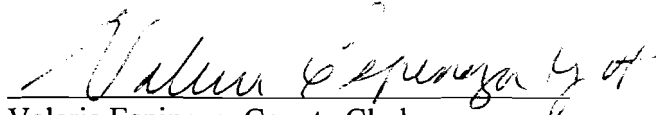
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

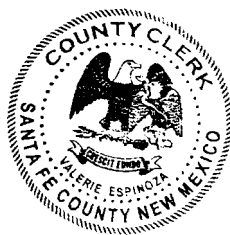
Approved, Adopted, and Passed This 9 Day of December, 2008.

Santa Fe Board of County Commissioners


Paul Campos, Chairperson

ATTEST:

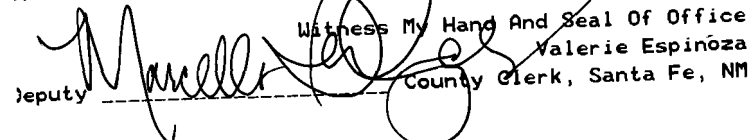

Valerie Espinoza, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

[Hereby Certify That This Instrument Was Filed for
Record On The 18TH Day Of December, 2008 at 08:34:38 AM
And Was Duly Recorded as Instrument # 1546899
Of The Records Of Santa Fe County


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