

SANTA FE COUNTY

RESOLUTION 2009 - 40

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

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

Department / Division: County Sheriff Fund Name: General Fund

Budget Adjustment Type: Budget Increase Fiscal 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
101	1201	372	0904	Federal Grant/Operation DWI PA# 09-AL-K8-091	34,344.00	
TOTAL (if SUBTOTAL, check here)					34,344.00	

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	1201	424	1025	Salary & Wages/Overtime	31,903.39	
101	1201	424	2001	Employee Benefits/FICA - Regular	1978.01	
101	1201	424	2002	Employee Benefits/FICA - Medicare	462.60	
TOTAL (if SUBTOTAL, check here)					34,344.00	

Requesting Department Approval: [Signature] Title: Under Sheriff Date: 2-3-09

Finance Department Approval: [Signature] Date: 2/3/09 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Greg Solano/Sheriff Dept/Div: Sheriff's Office Phone No: (505) 986-2455

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. This request is an increase to the General Fund (101) County Sheriff's Budget (FY 08-09), which is funding granted by NMDOT/Programs Division-Traffic Safety Bureau. The purpose for this grant is to provide funding to New Mexico Law Enforcement for Driving While Impaired (DWI) sobriety check points and saturation patrols aimed at reducing alcohol-related crashes, injures and deaths.

a) Employee Actions - N/A

Table with 4 columns: 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: - N/A

Table with 3 columns: Line Item, Detail (what specific things, contracts, or services are being added or deleted), Amount

- 2) Is the budget action for RECURRING expense X or for NON-RECURRING (one-time only) expense

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DEPARTMENT CONTACT: Name: Greg Solano/Sheriff Dept/Div: Sheriff's Office Phone No: (505) 986-2455

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.

 - 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.
 - **Title:** OPERATION DWI
 - **Project:** 09-AL-K8-091
 - **Award Period:** OCTOBER 01, 2008 – SEPTEMBER 30, 2009
 - **Amount:** \$34,344.00

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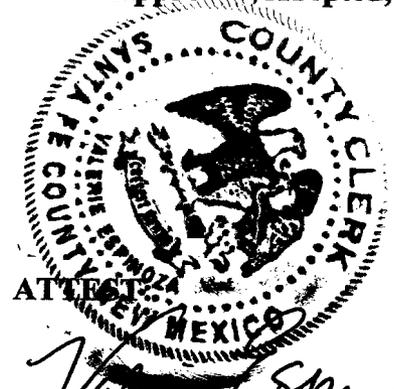
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 24 Day of February, 2009.

Santa Fe Board of County Commissioners

Signature of Mike D. Anaya, Chairperson

Mike D. Anaya, Chairperson



ATTEST

Signature of Valerie Espinoza, County Clerk

Valerie Espinoza, County Clerk



STATE OF NEW MEXICO) ss

BCC RESOLUTIONS PAGES: 4

I Hereby Certify That This Instrument Was Filed for Record On The 26TH Day Of February, 2009 at 10:05:24 AM And Was Duly Recorded as Instrument # 1553702 Of The Records Of Santa Fe County

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