

SANTA FE COUNTY

RESOLUTION 2009 - 42

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: Sheriff's Office

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	09-04	Federal Grant/Other - NMDOT S.T.E.P. / PA# 09-PT-06-091	15,840.00	
TOTAL (if SUBTOTAL, check here)					15,840.00	

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	10-25	Salary & Wages / Overtime	14,714.35	
101	1201	424	20-01	Employee Benefits/FICA Regular	912.29	
101	1201	424	20-02	" " / FICA Medicare	213.36	
TOTAL (if SUBTOTAL, check here)					15,840.00	

Requesting Department Approval: [Signature]

Title: Deputy Sheriff

Date: 2-3-09

Finance Department Approval: [Signature]

Date: 2/10/09

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.

The increase request is to budget PA# 09-PT-06-09/Selective Traffic Enforcement Program (S.T.E.P.) to the Sheriff's General Fund (101-1201-424 / Salary & Wages). The purpose of this grant is to provide the funding for overtime needed to support all Selective Traffic Enforcement Program activities aimed at reducing traffic-related injuries and fatalities.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
101-1201-424.10-25	Salary and Wages / Overtime	Existing / permanent	Patrol

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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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.
 - Title : Selective Traffic Enforcement Program (S.T.E.P.)
 - Project no: 09-PT-06-091
 - Award Period : October 1, 2008 to September 30,2009
 - Amount : \$15,840.00
 - 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. 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 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



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 26TH Day Of February, 2009 at 10:05:26 AM And Was Duly Recorded as Instrument # 1553704 Of The Records Of Santa Fe County

Signature of Valerie Espinoza, Deputy County Clerk, Santa Fe, NM