

SANTA FE COUNTY

SEC. CLERK RECORDED 10/28/2009

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RESOLUTION 2009 - 186

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

Whereas, the Board of County Commissioners meeting in regular session on Oct. 27, 2009, did request the following budget adjustment:

Department / Division: ASD/E911 Rural Addressing Fund Name: General Fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2010 (July 1, 2009 - June 30, 2010)

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	1514	380	0110	Village of Pecos MOU	\$8379.00	
TOTAL (if SUBTOTAL, check here)						

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	1514	442	3005	Gas & Oil	\$1650.00	
101	1514	442	1022	Permanent Employees	\$6729.00	
TOTAL (if SUBTOTAL, check here)						

Requesting Department Approval: Amanda Hargis Amanda Hargis Title: GIS Coordinator Date: 9-29-09

Finance Department Approval: Wendy Martinez Date: 10/20/09 Entered by: _____ Date: _____

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

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Amanda Hargis Dept/Div: ASD/GIS Phone No.: 986-6318

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. Revenues and expenditures per MOU with Pecos approved by BCC. See attached MOU

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclass, Overtime)	Position Type (permanent, term)	Position Title
101-1514-442-1022	Use of existing employees for Rural Addressing in Pecos	Permanent	GPS Tech's and GIS Tech

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: Amanda Hargis _____ Dept/Div: ASD/GIS _____ Phone No.: 986-6318 _____

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.
General Fund, SEE Attached MDU
 - 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 X NO _____
If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc.).
MOU Village of Pecos; MOU Agreement # 2010-0036-ASD/VO. Time Frame 30 working days
 - 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 27th Day of October, 2009.

Santa Fe Board of County Commissioners


Mike D. Anaya, Chairperson

ATTEST:


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 28TH Day Of October, 2009 at 12:51:30 PM
And Was Duly Recorded as Instrument # 1581388
Of The Records Of Santa Fe County

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