#### SFC CLERK RECORDED06/30/2010

### **SANTA FE COUNTY**

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|---------------------------|------|---|----|---|

# RESOLUTION 2010 - <u>/07</u>

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

Whereas, the Board of County Commissioners meeting in regular session on June 29, 2010, did request the following budget adjustment:

| Department / Division: Manager / Finance | Fund Name: _General Obligation Bond Debt Service (401) |
|--|--|
| Budget Adjustment Type: Budget Increase  | Fiscal Year: 2010 (July 1, 2009 - June 30, 2010)       |

BUDGETED REVENUES: (use continuation sheet, if necessary)

| FUND<br>CODE<br>XXX | DEPARTMENT/<br>DIVISION<br>XXXX | ACTIVITY BASIC/SUB XXX | ELEMENT/ OBJECT XXXX | REVENUE<br>NAME | INCREASE<br>AMOUNT | DECREASE<br>AMOUNT |
|---------------------|---------------------------------|------------------------|----------------------|-----------------|--------------------|--------------------|
| 401                 | 0000                            | 385                    | 0700                 | Budgeted Cash   | 7,214.56           |                    |
|                     |                                 |                        |                      |                 |                    | ·.                 |
| TOTAL (i            | f SUBTOTAL, cl                  | eck here )             | 1,400,000            |                 | 7,214.56           |                    |

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

| 401 1610 419 9002 Debt Service / Interest Payment 7,214.56 | FUND<br>CODE<br>XXX | DEPARTMENT/<br>DIVISION<br>XXXX | ACTIVITY BASIC/SUB XXX | ELEMENT/<br>OBJECT<br>XXXX | CATEGORY/LINE ITEM<br>NAME      | INCREASE<br>AMOUNT | DECREASE<br>AMOUNT |
|--|---------------------|---------------------------------|------------------------|----------------------------|---------------------------------|--------------------|--------------------|
|  | 401                 | 1610                            | 419                    | 9002                       | Debt Service / Interest Payment | 7,214.56           |                    |
| TOTAL (if SUBTOTAL, check here ) 7,214.56                  | TOTAL (             | if SUBTOTAL, cl                 | eck here )             |                            |                                 | 7,214.56           |                    |

| Requesting Department Approval: | arting | Title: France Dr. Dudlo | Date: 6/14/11 |
|---------------------------------|--------|-------------------------|---------------|
| Finance Department Approval:    | Date:  | Entered by:             | Date:         |
| County Manager Approval:        | Date:  | Updated by:             | Date:         |

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| ATTACH ADDITIONAL SHEETS IF NECESSARY.   |  |        |                             |                              |                     |  |   |        |  |
|--|--|--------|-----------------------------|------------------------------|---------------------|--|---|--------|--|
| DEPARTMENT CONTACT: Name: <u>Teresa Martinez</u> Dept/Div: <u>Finance</u> Phone No.: <u>986-6375</u>   |  |        |                             |                              |                     |  |   | 5      |  |
| DETAILED JUSTIFICATION FOR REQUESTING BUDGET ADJUSTMENT (If applicable, cite the following authority: State Statute, grant named ate, other laws, regulations, etc.):  |  |        |                             |                              |                     |  |   |        |  |
| <ul> <li>Please summarize the request and its purpose.</li> <li>Request is to budget cash carryover for the General Obligation Bond Debt Service Fund (401) to cover the final debt service payment for Fiscal the General Obligation Bond 2001A Series.</li> </ul>  |  |        |                             |                              |                     |  |   |        |  |
| 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, cont | tracts, or services are beir | g added or deleted) |  |   | Amount |  |
|  |  |        |                             |                              |                     |  |   |        |  |
|  |  |        |                             | <del></del>                  |                     |  | _ |        |  |
|  |  |        |                             |                              |                     |  |   |        |  |
|  |  |        |                             |                              |                     |  |   |        |  |
| 4. (2) In the land action for DECUIDABLE and the Control of the Co |  |        |                             |                              |                     |  |   |        |  |
| • 2) Is the budget action for RECURRING expense X or for NON-RECURRING (one-time only) expense   |  |        |                             |                              |                     |  |   |        |  |
|  |  |        |                             |                              |                     |  |   |        |  |
|  |  |        |                             |                              |                     |  |   |        |  |

## SFC CLERK RECORDED 65/35/2616 SANTA FE COUNTY

There are no other funding sources to match this request.

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| ATTACI | I ADDI | TIONAL SHEETS IF NECESSAI   | RY.                 | •                 |                       |            |                    |                   |                |
|--------|--------|---|---------------------|-------------------|-----------------------|------------|--------------------|-------------------|----------------|
| DEPAR  | TMEN'  | Γ CONTACT:  |                     |                   |                       |            |                    |                   |                |
| Name:_ | Teres  | a Martinez  | Dept/Div: Fig       | nance             | Phor                  | ne No.:    | 986-6375           | _                 |                |
|        |        | STIFICATION FOR REQUESTI<br>, regulations, etc.):   | NG BUDGET AI        | OJUSTMENT (If app | licable, cite the fol | lowing au  | thority: State S   | Statute, grant na | me and awar    |
| • 3)   |        | is request impact a revenue source?  If this is a state special appropriati  If YES, cite statute and attach a co | on, YES             |                   | state funds, federal  | funds, etc | e.), and address t | he following:     |                |
|        | • b)   | Does this include state or federal f<br>If YES, please cite and attach a co<br>award letter and proposed budget.  |                     |                   | r include grant nam   | e, number  | , award date and   | amount, and attac | ch a copy of a |
|        | • c)   | Is this request is a result of Comm<br>If YES, please cite and attach a co  |                     |                   |                       | rdinance,  | etc.).             |                   |                |
|        | • d)   | Please identify other funding source  | ces used to match t | his request.      |                       |            |                    |                   |                |

## RESOLUTION 2010 - /07

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 29th Day of June, 2010.

Santa Fe Board of County Commissioners

ATTEST

lerie Espiroza, County Clerk

COUNTY OF SANTA FE STATE OF NEW MEXICO **BCC RESOLUTIONS** 

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I Hereby Certify That This Instrument Was Filed for Record On The 30TH Day Of June, 2010 at 02:45:17 PM And Was Duly Recorded as Instrument # 1603068

Of The Records Of Santa Fe Count

erk, Santa Fe, NM