

SANTA FE COUNTY
RESOLUTION 2015 - 118

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

Whereas, the Board of County Commissioners meeting in regular session on August 25, 2015, did request the following budget adjustment:

Department / Division: County Manager / Finance Fund Name: General Fund (101)

Budget Adjustment Type: Budget Increase Fiscal Year: 2016 (July 1, 2015 - June 30, 2016)

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	0000	385	0100	Budgeted Cash	\$43,000	
TOTAL (if SUBTOTAL, check here)					\$43,000	

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	0412	431	5003	Services / Contractual/Professional	\$43,000	
TOTAL (if SUBTOTAL, check here)					\$43,000	

Requesting Department Approval: Adam Johnson / Finance Title: Budget Administrator Date: 8/10/2015
 Finance Department Approval: [Signature] Date: 8/10/15 Entered by: _____ Date: _____
 County Manager Approval: [Signature] Date: 8.25.15 Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Carole Jaramillo Dept/Div: CMO / Finance Phone No.: 986-6375

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.
 Request is for a budget increase to the General Fund (101) to budget cash carryover for the final payment for FY2015 for the Santa Fe County Extension Program in the amount of \$43,000. At the end of FY2015, the remaining balance of the purchase order for the Extension Service Program was liquidated in error resulting in the inability to pay the final invoice for FY2015.

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
5003	Santa Fe County Extension Program	\$43,000

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

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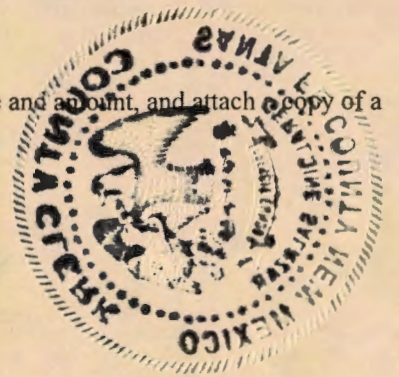
ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: Carole Jaramillo Dept/Div: CMO / Finance Phone No.: 986-6375

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.
There are no other funding sources to match this request.

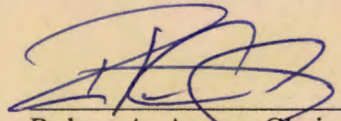


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NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

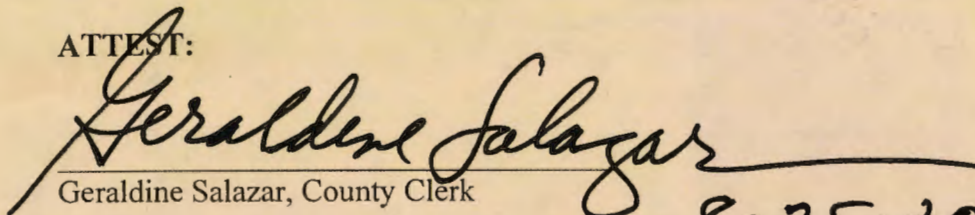
Approved, Adopted, and Passed This 25th Day of August, 2015.

Santa Fe Board of County Commissioners


Robert A. Anaya, Chairperson



ATTEST:

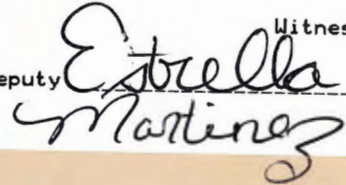

Geraldine Salazar, County Clerk
8-25-2015



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS
PAGES: 4

I Hereby Certify That This Instrument Was Filed for Record On The 26TH Day Of August, 2015 at 09:51:41 AM And Was Duly Recorded as Instrument # 1772950 Of The Records Of Santa Fe County

Deputy  Estrella Martinez
County Clerk, Santa Fe, NM

Witness My Hand And Seal Of Office
Geraldine Salazar