

SANTA FE COUNTY

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RESOLUTION 2017 - 109

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

Whereas, the Board of County Commissioners meeting in regular session on October 31, 2017, did request the following budget adjustment:Department / Division: Fire Department/Fire Administration Fund Name: Fire Operations Fund (244)Budget Adjustment Type: Budget Increase Fiscal Year: 2018 (July 1, 2017 - June 30, 2018)

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
244	0815	385	02-00	Budgeted Cash / State Funds	10,652	
244	0837	385	02-00	Budgeted Cash / State Funds	654	
TOTAL (if SUBTOTAL, check here)					11,306	

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
244	0815	422	10-25	Salary & Wages / Overtime	5,220	
244	0815	422	20-01	Employee Benefits / FICA Regular	350	
244	0815	422	20-02	Employee Benefits / FICA Medicare	82	
244	0815	422	30-04	Travel / Out of State Travel	5,000	
244	0837	422	60-07	Supplies / Operational Supplies	654	
TOTAL (if SUBTOTAL, check here)					11,306	

Requesting Department Approval: [Signature] Title: Chief Date: 10-4-17Finance Department Approval: [Signature] Date: 10-10-17 Entered by: _____ Date: _____County Manager Approval: [Signature] Date: 10-31-17 Updated by: _____ Date: _____

SFC RECORDED 11/01/2017

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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.

Requesting BCC approval for a budget increase to the Fire Operations Fund (244) to budget State Forestry revenue collected for fire assignments in the amount of \$11,306 to be utilized to sustain the Wildland Program as well as reimburse the Stanley Fire District for equipment and personnel that responded to the Rock Fire.

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

- 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: Donna Morris Dept/Div: Fire Department/Administration Phone No.: 992-3082

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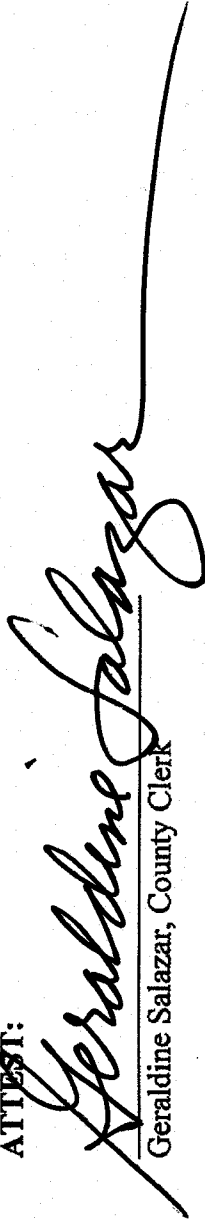
NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Santa Fe County that the Local Government Division of the Department of Finance and Administration is hereby requested to grant authority to adjust budgets as detailed above.

Approved, Adopted, and Passed This 31st Day of October, 2017.

Santa Fe Board of County Commissioners


Henry P. Roybal, Chair

ATTEST:


Geraldine Salazar, County Clerk



COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss:
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I Hereby Certify That This Instrument Was Filed for Record On The 1ST Day Of November, 2017 at 09:50:18 AM And Was Duly Recorded as Instrument # 1840347 Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Geraldine Salazar
Deputy County Clerk, Santa Fe, NM



SFC RECORDED 11/01/2017