

SANTA FE COUNTY

RESOLUTION 2017 - /3

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

Whereas, the Board of County Commissioners meeting in regular session on February 14, 2017, did request the following budget adjustment:Department / Division: Fire Department/Wildland Fund Name: Wildland Program Fund (244)Budget Adjustment Type: Budget Increase Fiscal Year: 2017 (July 1, 2016 - June 30, 2017)

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	360	09-02	Revenue /State Forestry	205,478	
244	0832	360	09-02	Revenue/State Forestry	511	
244	0833	360	09-02	Revenue/State Forestry	4,928	
244	0839	360	09-02	Revenue/State Forestry	911	
244	0841	360	09-02	Revenue/State Forestry	524	
TOTAL (if SUBTOTAL, check here ☒)					212,352	

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	10-24	Salaries & Wages / Temporary Employees	30,000	
244	0815	422	10-25	Salaries & Wages / Overtime	16,895	
244	0815	422	10-26	Salaries & Wages / Term Employees	15,000	
244	0815	422	20-01	Employee Benefits / FICA-Regular	3,837	
244	0815	422	20-02	Employee Benefits / FICA-Medicare	897	
TOTAL (if SUBTOTAL, check here ☒)					66,629	

Requesting Department Approval: [Signature] Title: Fire Chief Date: 1/31/17Finance Department Approval: [Signature] Date: 2/7/17 Entered by: _____ Date: _____County Manager Approval: [Signature] Date: 2/14/17 Updated by: _____ Date: _____

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BUDGET ADJUSTMENT CONTINUATION SHEET

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
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
244	0815	422	20-03	Employee Benefits / Retirement Contributions	12,713	
244	0815	422	20-05	Employee Benefits / Health Care	9,370	
244	0815	422	20-06	Employee Benefits / Retirement Health Care	1,238	
244	0815	422	20-08	Employee Benefits / Workers Comp (Assessment)	50	
244	0815	422	30-04	Travel / Out of State	13,000	
244	0815	422	35-03	Vehicle Expenses / Vehicle Maintenance	8,000	
244	0815	422	40-02	Maintenance / Equipment	2,000	
244	0815	422	60-02	Supplies/Safety Supplies	44,409	
244	0815	422	60-07	Supplies/Operational Supplies	6,000	
244	0815	422	70-33	Other Operating Costs/Seminars & Workshops	2,069	
244	0815	422	70-37	Other Operating Costs/Printing & Publishing	5,000	
244	0815	422	80-09	Capital Purchases / Vehicles	25,000	
244	0815	422	80-99	Capital Purchases / Inventory Exempt	10,000	
244	0872	421	10-55	Volunteer State Fire Reimbursement/Vol. Reimb.	6,348	
244	0872	421	20-01	Employee Benefits / FICA Regular	426	
244	0872	421	20-02	Employee Benefits / FICA Medicare	100	
TOTAL (if SUBTOTAL, check here)					212,352	

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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.

This request is to budget State Forestry revenue collected from FY-2017 fire assignments in the amount of \$212,352 to be utilized to sustain and build the Wildland Program as well as reimburse volunteers who responded to various fire assignments.

a) Employee Actions

Line Item	Action (Add/Delete Position, Reclasse, 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
80-09	Wildland Vehicle	25,000
80-99	Wildland Equipment (Chainsaws, High Angle Rope Rescue Equipment, etc.)	10,000

- 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
If YES, cite statute and attach a copy.
 - b) Does this include state or federal funds? YES X NO 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 (attached).
 - c) Is this request 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.

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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.

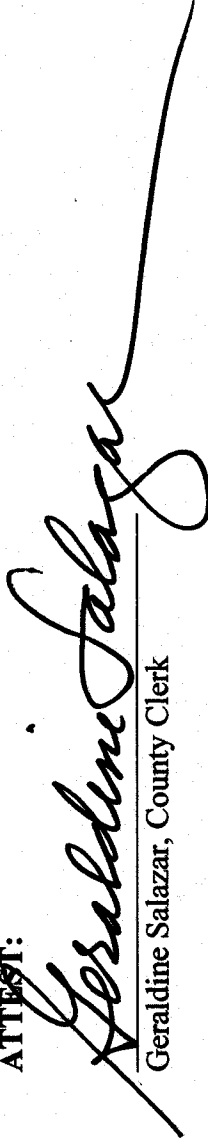
Approved, Adopted, and Passed This 14th Day of February, 2017.

Santa Fe Board of County Commissioners



Henry P. Roybal, Chairperson

ATTEST:


Geraldine Salazar, County Clerk

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

BCC RESOLUTIONS

PAGES: 7

I Hereby Certify That This Instrument Was Filed for
Record On The 15TH Day Of February, 2017 at 09:32:02 AM
And Was Duly Recorded as Instrument # 1817743
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office

Geraldine Salazar

Deputy  County Clerk, Santa Fe, NM



WILDLAND DIVISION FORESTRY REVENUE			
FIRE	COST CENTER	PAYMENT CODE	AMOUNT
ABC Fire	244-0815-360.09-02	244BT	\$ 37,512.00
Independence Fire	244-0815-360.09-02	244BT	\$ 7,203.13
Goldmine Fire	244-0815-360.09-02	244BT	\$ 18,246.54
Vallecitos Fire	244-0815-360.09-02	244BT	\$ 8,464.37
Cerro Pelon Fire	244-0815-360.09-02	244BT	\$ 5,626.00
El Valle Fire	244-0815-360.09-02	244BT	\$ 10,723.39
Ruiz Fire	244-0815-360.09-02	244BT	\$ 1,421.23
McGaffery Fire	244-0815-360.09-02	244BT	\$ 27,000.31
Twin Lake Fire	244-0815-360.09-02	244BT	\$ 32,138.30
RMA CR Support Fire	244-0815-360.09-02	244BT	\$ 8,892.72
NIFC Large Fire	244-0815-360.09-02	244BT	\$ 12,052.08
Juantura	244-0815-360.09-02	244BT	\$ 17,955.97
Barbero Fire	244-0815-360.09-02	244BT	\$ 18,242.70
TOTALS			\$ 205,478.74

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SFC Fire District Forestry Revenue			
FIRE	COST CENTER	PAYMENT CODE	AMOUNT
Cerro Pelon Fire - Eldorado	244-0832-360.09-02	JB	\$ 511.50
Lobo Ranch Fire - Edgewood	244-0833-360.09-02	KB	\$ 4,928.00
Goldmine Fire - T. Trail	244-0839-360.09-06	QB	\$ 911.00
Goldmine Fire - Madrid	244-0841-360.09-02	SB	\$ 524.00
TOTALS			\$ 6,874.50