

SANTA FE COUNTY
RESOLUTION 2016 - 9

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

Whereas, the Board of County Commissioners meeting in regular session on January 26, 2016, 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: 2016 (July 1, 2015 - June 30, 2016)

BUDGETED REVENUES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASICSUB XXX	ELEMENT/ OBJECT XXXX	REVENUE NAME	INCREASE AMOUNT	DECREASE AMOUNT
244	0815	360	09-02	Revenue / State Forestry	112,408	
TOTAL (if SUBTOTAL, check here)					112,408	

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

FUND CODE XXX	DEPARTMENT/ DIVISION XXXX	ACTIVITY BASICSUB XXX	ELEMENT/ OBJECT XXXX	CATEGORY / LINE ITEM NAME	INCREASE AMOUNT	DECREASE AMOUNT
244	0815	422	10-24	Salary & Wages / Temp Employees	13,000	
244	0815	422	10-25	Salary & Wages / Overtime	49,835	
244	0815	422	10-26	Salary & Wages / Term Employees	6,000	
244	0815	422	20-01	Employee Benefits / FICA Regular	372	
244	0815	422	20-02	Employee Benefits / FICA Medicare	87	
244	0815	422	20-03	Employee Benefits / Retirement Cont.	1,761	
244	0815	422	20-05	Employee Benefits / Health Care	55	
244	0815	422	20-06	Employee Benefits / Retirement HC	125	
TOTAL (if SUBTOTAL, check here X)					71,235	

Requesting Department Approval: [Signature] Title: Fire Chief Date: 1-26-16
Finance Department Approval: [Signature] Date: 1/26/16 Entered by: _____ Date: _____
County Manager Approval: [Signature] Date: 1-26-16 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	30-04	Travel / Out of State Travel	5,000	
244	0815	422	35-03	Vehicle Expenses / Vehicle Maintenance	2,500	
244	0815	422	60-02	Supplies / Safety Equipment	11,973	
244	0815	422	60-07	Supplies / Operational Supplies	8,500	
244	0815	422	70-33	Other Operational Costs / Seminars & Workshops	1,700	
244	0815	422	80-09	Capital Expenses / Vehicles	8,500	
244	0815	422	80-99	Capital Expenses / Inventory Exempt	3,000	
TOTAL (if SUBTOTAL, check here)					112,408	

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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 to budget \$112,408 from State Forestry revenue for reimbursements from various deployments for personnel and equipment utilized on the fires. This revenue will be utilized to cover overtime and hazard pay that is incurred on future deployments and to supplement the Wildland Program budget to provide funding for training, vehicle maintenance, safety/operational supplies, and equipment as needed sustain the program.

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
80-09	Vehicle equipment and upgrades	8,500
80-99	Chain Saw supplies and equipment	3,000

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

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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 X
 - 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. State Forestry Fire Reimbursement for Trail Canyon, Navajo River, Commissary and Back 30 Fires.
 - c) Is this request is a result of Commission action? YES NO X 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.

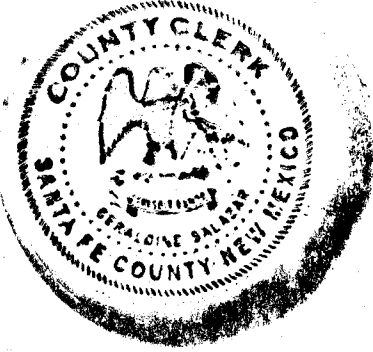
Approved, Adopted, and Passed This 26th Day of January, 2016.

Santa Fe Board of County Commissioners

Miguel M. Chavez
Board of County Commission Chair

ATTEST:

Geraldine Salazar
Geraldine Salazar, County Clerk



COUNTY OF SANTA FE) BCC RESOLUTIONS
STATE OF NEW MEXICO) PAGES: 9

I Hereby Certify That This Instrument Was Filed for Record On The 27TH Day Of January, 2016 at 11:20:52 AM And Was Duly Recorded as Instrument # 1785025 Of The Records Of Santa Fe County

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



Santa Fe County

Oper: MBACA Type: CT Drawer: 1
Date: 11/18/15 10 Receipt no: 34808

Description	Quantity	Amount
244BT	244-0815 FOREST FIRE REIM	\$6834.45
	1.00	

G/L account number:
24408153600902

SF COUNTY FIRE DEPT

—IRE DEPT
—TO: 65 New Mexico

Tender detail

CK CHECK 2000501561 \$6834.45

Total tendered

Total payment **\$6834.45**

Trans date: 11/18/15 Time: 12:44:43

PAYMENT CODE	AMOUNT	CHECK #	DEPT. / DISTRICT	TYPE
244BT	6,834.45	Ck.#B2000501561	Wildland Division	Back 30 Fire
Total			6,834.45	

DEPOSIT

SFC CLERK RECORDED 01/27/2016

[illegible]

DEPOSIT

			Payee	Amount
			of New Mexico-Navajo River Fire	32,388.94
			State of New Mexico-Commissary Fire	12,578.40
244BT	B2000512686	12/1/2015	State of New Mexico-Commissary Fire	24,625.76
244BT	B2000512685	12/1/2015	State of New Mexico-Commissary Fire	5,357.02
244BT	B2000512683	12/1/2015	State of New Mexico-Commissary Fire	10,200.42
Total				85,150.54

SFC CLERK RECORDED 01/27/2016

Description	Quantity	Amount
244BT	244-0015 FOREST FIRE REIM	
	1.00	\$6672.68

2 CKS 7098.38 24BT

Trans date: 12/10/15 Time: 10:29:10

DEPOSIT

Total				7,098.38

SFC CLERK RECORDED 01/27/2016