

SANTA FE COUNTY
RESOLUTION 2000 - 117

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

Whereas, the Board of County Commissioners meeting in regular session on September 12, 2000, did request the following budget adjustment:

1810367

Department / Division: Fire Department / Fire Administration Fund Name: General Fund

Budget Adjustment Type: Increase Fiscal Year: 2001 (July 1, 2000 - June 30, 2001)

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	0801	380	01-00	Intergovernmental / Joint Power Agree	25,900	
TOTAL (if SUBTOTAL, check here)					25,900	

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	0801	421	10-21	Salary & Wages / Exempt Employees	2,525	
101	0801	421	10-22	Salary & Wages / Permanent Employees	17,763	
101	0801	421	20-01	Employee Benefits / FICA - Regular	1,258	
101	0801	421	20-02	Employee Benefits / FICA - Medicare	294	
TOTAL (if SUBTOTAL, check here X)					21,840	

Requesting Department Approval: *Stan Holder* Title: Chief, Santa Fe County Fire Dept. Date: 8/30/00

Finance Department Approval: *Therese Miller* Date: 9/6/00 Entered by: _____ Date: _____

County Manager Approval: *A. Lopez* Date: 9/19/00

SANTA FE COUNTY

RESOLUTION 2000 - 017

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 _____)						

1810368

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	0801	421	20-03	Employee Benefits / Retirement Contributions	3,857	
101	0801	421	20-06	Employee Benefits / Retirement Health Care	203	
TOTAL (if SUBTOTAL, check here _____)					25,900	

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DEPARTMENT CONTACT:

Name: Carolyn Cooney Dept/Div: Fire Administration Phone No.: 992-3072

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 funds received from the Joint Powers Agreement for Fire and Rescue Services with the Town of Edgewood for salaries and benefits for Santa Fe County Fire Department personnel.
- 2) Why was this request not included in the Fiscal Year 2001 Operating Budget?
This information was unknown at the time the Fiscal Year 2001 Operating budget was being prepared.
- 3) Is the transfer recurring or non-recurring and what are the future funding impacts of this request?
This increase is anticipated to be non-recurring for FY01 and recurring costs, if any, will be covered with funds from the JPA.
- 4) Does this request impact a revenue source? If so, please identify (i.e. General Fund, state funds, federal funds, etc.), and address the following:
The revenue source for this request is Joint Powers Agreement funds.
 - a) If this is a state special appropriation, cite statute and attach a copy.
This request is not a state special appropriation.
 - b) If this is a state or federal grant, cite grant name, number, award date and amount.
This request is not a state or federal grant.
 - c) If this request is a result of Commission action, please cite and attach a copy of supporting documentation.
This request is the result of a Joint Powers Agreement dated 1/25/2000 with the Town of Edgewood for Fire and Rescue Services.
 - d) Please identify other funding sources that can be used to match this request.
There are no other funding sources available for this request.
- 5) If this request impacts the Capital Purchases category, please detail items to be purchased and what they will be used for.
This request has no impact on the Capital Purchase category.
- 6) Does this request have an FTE impact for the department/division? If request increases FTE, include number of positions, position type (term, permanent, etc.), and the future funding impact and revenue source.
This request has no FTE impact for the department.

1810369

SANTA FE COUNTY

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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 12th Day of September, 2000.

1810370

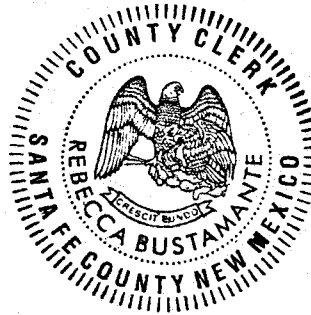
Santa Fe Board of County Commissioners

Richard D. Anaya
Richard D. Anaya, Chairperson



ATTEST:

Rebecca Bustamante
Rebecca Bustamante, County Clerk



Approved As To Form.

Steve Kopelman, County Attorney

COUNTY OF SANTA FE 11301 SS 766
STATE OF NEW MEXICO

I hereby certify that this instrument was filed for record on the 27 day of Sept A.D. 2000 at 4:06 o'clock a.m. and was duly recorded in book 1810 page 367

370 Witness my Hand and Seal of Office
Rebecca Bustamante
County Clerk, Santa Fe County, N.M.
Deputy