

SANTA FE COUNTY
RESOLUTION 2010 - 174

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

Whereas, the Board of County Commissioners meeting in regular session on Sept. 28, 2010, did request the following budget adjustment:

Department / Division: Sheriff's Office Fund Name: Law Enforcement Operating Fund

Budget Adjustment Type: Budget Increase Fiscal Year: 2011 (July 1, 2010 - June 30, 2011)

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
246	1201	372	09.01	Grant / Dept of Justice – Edward Byrne Memorial Justice Assistance Program Awarded jointly with the City of Santa Fe (Police)	76,640.00	
TOTAL (if SUBTOTAL, check here)					76,640.00	

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
246	1201	424	50.92	Contractual Serv (LEOF) / Pass-through Fund Awarded amount – City of Santa Fe (Police)	51,064.00	
246	1201	424	80.99	Non-Capital Purchase / Inventory Exempt	20,081.00	
246	1201	424	30.02	Travel / Out of State Meals & Lodging	5495.00	
TOTAL (if SUBTOTAL, check here)					76,640.00	

Requesting Department Approval: [Signature] Title: Major Date: 9-3-10

Finance Department Approval: [Signature] Date: 9/13/10 Entered by: _____ Date: _____

County Manager Approval: _____ Date: _____ Updated by: _____ Date: _____

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:Name: Greg Solano - Sheriff Dept/Div: Sheriff's Office Phone No.: (505) 986-2455**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 for budget increase is to budget Grant #2010-DJ-BX-0113 – FY 2010 Justice Assistance Grant Program. The funds from this grant will be used to purchase taser cameras and absorb the cost of Forensic Training – Cell phone information analysis and retrieval.

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
80.99	Taser Cameras for Taser X26 – records over 1.5 hours of blk/wht MPEG 4 audio and video data (48) @ \$411.95 plus (estimate of s/h) @ \$307.40	20,081.00
30.02	Travel – Training / Out of State Meals and Lodging	5495.00
	Total Purchase	25,576.00

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

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Page 3 of 4*ATTACH ADDITIONAL SHEETS IF NECESSARY.***DEPARTMENT CONTACT:**

Name: Greg Solano - Sheriff Dept/Div: Sheriff's Office Phone No.: (505) 986-2455

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 _____
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.

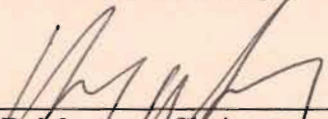
Title: FY 2010 Justice Assistance Grnat Program
Project no.: 2010-DJ-BX-0113
Award Period: Oct 01, 2009 to Sept 30, 2013
Award Amt: \$76,640.00
 - c) Is this request a result of Commission action? YES _____ NO X
If YES, please cite and attach a copy of supporting documentation (i.e. Minutes, Resolution, Ordinance, etc.).
 - d) Please identify other funding sources used to match this request.
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.

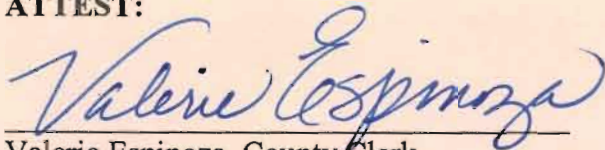
Approved, Adopted, and Passed This 28th Day of September, 2010.

Santa Fe Board of County Commissioners



Harry B. Montoya, Chairperson

ATTEST:



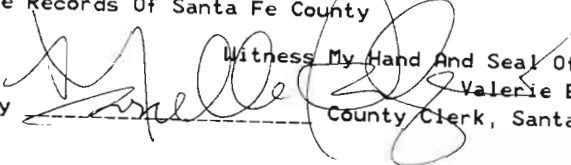
Valerie Espinoza, County Clerk



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 29TH Day Of September, 2010 at 12:16:19 PM And Was Duly Recorded as Instrument # **1612265** of The Records Of Santa Fe County

Witness My Hand And Seal Of Office

Deputy _____ Valerie Espinoza
County Clerk, Santa Fe, NM