SANTA FE COUNTY

RESOLUTION 2010 - 217

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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 November 30, 2010, did request the following budget adjustment:

Department / Division: _County Sheriff / Region III _____

Fund Name: Law Enforcement Operations Fund (246)

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 | 1206 | 372 | 0600 | Federal Grants / Drug Enforcement | \$4.822.75 | |
| TOTAL (i | TOTAL (if SUBTOTAL, check here) | | | | \$4,822.75 | |

BUDGETED EXPENDITURES: (use continuation sheet, if necessary)

| FUND CODE XXX | DEPARTMENT/ DIVISION XXXX | ACTIVITY BASIC/SUB XXX | ELEMENT/ OBJECT XXXX | CATEGORY / L NAMI | the second se | INCREASE AMOUNT | DECREASE AMOUNT |
|---------------------|---------------------------------|------------------------------|----------------------------|----------------------|---|--------------------|--------------------|
| 246 | 1206 | 425 | 7042 | Sheriff's Expense | | \$4,822.75 | |
| TOTAL | f SUBTOTAL, cł | eck bere) | | A CONTRACTOR | | \$4,822.75 | |
| | | 2 | 21- | | Sheriff | | ate: /1-2-10 |
| - | g Department Ap | | 11 | Title: | 2 Heren | D | ate: // |
| Finance D | epartment Appro | oval: _2NM | Marily | Date: 11/15/19 | Entered by: _ | | Date: |
| County M | anager Approval | : | | Date: | Updated by: | | Date: |

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT: Name: <u>Ralph Lopez</u> Dept/Div: <u>Sheriff / Region III</u> Phone No.: <u>473-7021</u>

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 a baseline increase of the current HIDTA Grant Award for Fiscal Year 2010. Moneys are to be utilized for Sheriff's Expenses only.

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 X or for NON-RECURRING (one-time only) expense

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ATTACH ADDITIONAL SHEETS IF NECESSARY.

DEPARTMENT CONTACT:

Name: <u>Ralph Lopez</u>

Dept/Div: Sheriff / Region III

Phone No.: 473-7036

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. *HIDTA Federal Grant #G10SN0011A Amount:* \$4,822.75 *Award Period: July 1. 2010 – June 30, 2011*
 - 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.

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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 30th Day of November, 2010.

Santa Fe Board of County Commissioners

Harry B. Montoya, Chairperson

ATTEST:

Valerie Espinoza, County Clerk





COUNTY OF SANTA FE STATE OF NEW MEXICO) 55 BCC RESOLUTIONS PAGES: 4

I Hereby Certify That This Instrument Was Filed for Record On The 1ST Day Of December, 2010 at 09:16:31 AM And Was Duly Recorded as /Instrument # 1618518 Of The Records Of Santa Fe County

tness My Hand And Seal Of Office Nalerie Espinoza Deputy County Clerk, Santa Fe, NM