



## **TORRANCE COUNTY**

**RESOLUTION # 2015- 09**

**Line Item Transfers**

**WHEREAS**, County Departments are requesting line item transfers within their budgeted funds in the FY 2014-15 Budget, and

**WHEREAS**, line item transfers within the same fund require authorization from the Torrance County Commission, and

**WHEREAS**, the attached line item transfers within the same fund are hereby authorized:

(See Schedule A)

**NOW THEREFORE BE IT RESOLVED** by the Torrance County Commission.

**DONE** at Estancia, New Mexico, Torrance County this 11<sup>th</sup> day of March 2015.

**TORRANCE COUNTY COMMISSION**



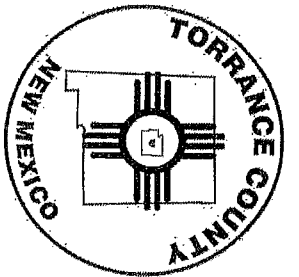
*James W. Frost*  
\_\_\_\_\_  
**James W. Frost, District 1**

*Julia DuCharme*  
\_\_\_\_\_  
**Julia DuCharme, District 2**

*[Signature]*  
\_\_\_\_\_  
**County Clerk**

*[Signature]*  
\_\_\_\_\_  
**LeRoy M. Candelaria, District 3**





**TORRANCE COUNTY**  
**Line Item Transfer Form**

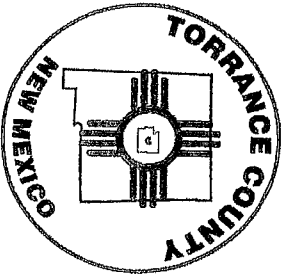
Requesting Department: \_\_\_\_\_

*Maintenance*

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
401-19-2209	Tajique Heating/gas	401-15-2215	Building maint/repair	\$ 2,680.38
401-19-2215	Building maint./repair	401-16-2215	Building maint/repair	\$ 3,368.34
<b>Reason for Transfer:</b> Not our building anymore				

Signature *Ron. Galt*



# TORRANCE COUNTY

## Line Item Transfer Form

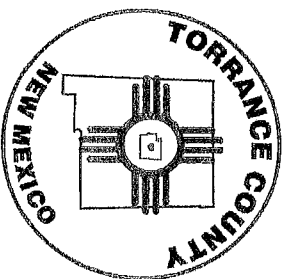
Requesting Department: \_\_\_\_\_

DISTRICT 3 & FIRE ADMIN

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
408-91-2248	SAFETY EQUIPMENT	408-91-2269	membership dues	\$ 1,000.00
413-91-2248	SAFETY EQUIPMENT	413-91-2269	Membership dues	\$ 1,000.00
<b>Reason for Transfer:</b>				
NEW LINE ITEM. FUNDS NEEDED FOR EMT RENEWALS				

Signature *Duval Portuné* \_\_\_\_\_ Date 2/5/15



# TORRANCE COUNTY Line Item Transfer Form

Requesting Department: \_\_\_\_\_

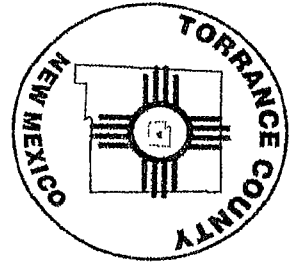
FIRE ADMIN

My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
413-91-2248	SAFETY EQUIPMENT	413-91-2219	OFFICE SUPPLIES	\$ 1,000.00
<b>Reason for Transfer:</b> FUNDS NEEDED TO PURCHASE OFFICE SUPPLIES.				

Signature *Marta Bostwick*

Date *2/24/18*



## TORRANCE COUNTY

### Line Item Transfer Form

Requesting Department:

DISPATCH

My department hereby requests that the following line item transfer(s) be made to the budget:

Line Item Number	Line Item Description	Transfer From:	Transfer To:	Amount of Transfer
211852805	Michigan Per Annu		911852816 Training (OTA)	4,000
Reason for Transfer: <i>To pay for extra Training Needed</i>				

Signature

*(Signature)*

3/2/15

Date