

TORRANCE COUNTY RESOLUTION# 2019- 35

Line Item Transfers

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

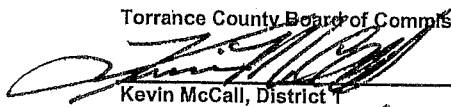
WHEREAS, the attached line item transfers within the same fund are hereby authorized:

(See Schedule A)

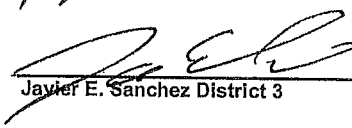
NOW THEREFORE BE IT RESOLVED by the Torrance County Commission

DONE at Estancia, New Mexico, Torrance County this 26th day of June 2019.

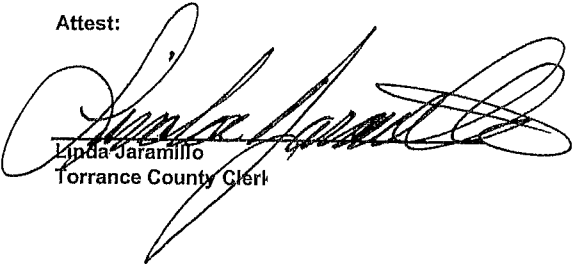
Torrance County Board of Commissioners


Kevin McCall, District 1


Ryan Schwebach, District 2

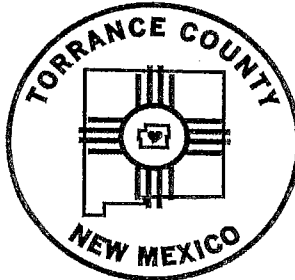

Javier E. Sanchez District 3

Attest:


Linda Jaramillo
Torrance County Clerk

Vote Record

Kevin McCall	yes	no	abstain	absent
Ryan Schwebach	yes	no	abstain	absent
Javier E. Sanchez	yes	no	abstain	absent





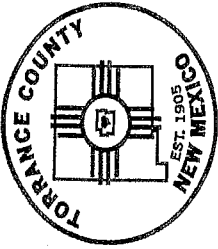
Torrance County

Resolution 2019-____

Line Item Transfer

Schedule A

Funding Source:		Transfer From:				Transfer To:				Total	
Department	Source	Line/Item		Description	Line/Item		Description		Amount		
Commision	General	401	05	2	201	401	05	2	101	Electd Salaries	\$1,639.00
Commision	General	401	05	2	209	401	05	2	101	Electd Salaries	\$ 1,250.00
Commision	General	401	05	2	201	401	05	2	102	Full Time Salaries	\$ 250.00
Animal Services	General	401	82	2	220	401	82	2	272	Profesional Services	\$ 380.00
Animal Services	General	401	82	2	103	401	82	2	065	Health Insurace Matching	\$ 500.00
Animal Services	General	401	82	2	104	401	82	2	065	Health Insurace Matching	\$ 700.00
Animal Services	General	401	82	2	105	401	82	2	065	Health Insurace Matching	\$ 300.00
Animal Services	General	401	82	2	205	401	82	2	065	Health Insurace Matching	\$ 500.00
Animal Services	General	401	82	2	221	401	82	2	065	Health Insurace Matching	\$ 500.00
Animal Services	General	401	82	2	222	401	82	2	065	Health Insurace Matching	\$ 500.00
Animal Services	General	401	82	2	166	401	82	2	065	Health Insurace Matching	\$ 500.00
Animal Services	General	401	82	2	223	401	82	2	216	Animal Food	\$ 450.00
Animal Services	General	401	82	2	202	401	82	2	115	Pharmacy Supplies	\$ 500.00
Commision	General	401	05	2	108	401	82	2	065	Health Insurace Matching	\$ 4,000.00
Operations	General	401	15	2	238	401	15	2	203	Maintenance Contracts	\$ 500.00
Operations	General	401	16	2	220	401	16	2	203	Maintenance Contracts	\$ 450.00
Treasurer	Treasurer's	609	30	2	266	609	30	2	205	Mileage Per/Diem	\$ 525.00
Treasurer	Treasurer's	609	30	2	219	609	30	2	221	Printing/Publishing	\$ 800.00
Treasurer	General	401	30	2	221	401	30	2	207	Telecommunications	\$ 450.00
Treasurer	General	401	30	2	221	401	30	2	269	Membership	
Clerk	General	401	20	2	102	401	20	2	63	Dues/Subscriptions	\$ 208.00
Clerk	General	401	20	2	102	401	20	2	65	PERA matching	\$ 400.00
Manager	infrastructu re	620	94	2	611	620	94	2	215	Health Insurace Matching	\$ 300.00
Manager	W/nd Pilt	641	09	2	611	641	09	2	266	Building Maintenance Repair	\$ 3,000.00
Manager	W/nd Pilt	641	09	2	611	641	09	2	410	training	\$ 5,000.00
I.T.	General	401	24	2	218	401	24	2	215	High Lonesome W/nd Equipment	\$ 21,000.00
Operations	General	401	16	2	210	401	16	2	215	Maintenance/Repair	\$ 200.00
Sheriff	General	401	50	2	102	401	50	2	207	Telecommunications	\$ 200.00
Sheriff	General	401	50	2	105	401	50	2	104	Overtime	\$ 10,000.00
Sheriff	General	401	50	2	205	401	50	2	104	Overtime	\$ 3,000.00
Sheriff	General	401	50	2	67	401	50	2	104	Overtime	\$ 2,000.00
Sheriff	General	401	50	2	203	401	50	2	104	Overtime	\$ 1,500.00
Sheriff	General	401	50	2	231	401	50	2	104	Overtime	\$ 2,000.00
Sheriff	General	401	50	2	231	401	50	2	104	Overtime	\$ 4,500.00
Sheriff	Jail Fund	420	74	2	102	420	74	2	207	Telecommunications	\$ 300.00
Sheriff	Jail Fund	420	74	2	102	420	74	2	64	FICA Matching	\$ 5,000.00
Sheriff	Jail Fund	420	74	2	102	420	74	2	104	Overtime	\$ 500.00
Assessor	Assessor	610	40	2	103	420	74	2	201	Vehicle Maintenance	\$ 600.00
Assessor	Assessor	610	40	2	103	610	40	2	65	Health Insurace Matching	\$ 24,000.00
Assessor	Assessor	610	40	2	103	610	40	2	102	Full Time Salaries	\$ 30,600.00
Assessor	Assessor	610	40	2	103	610	40	2	1104	Overtime	\$ 600.00
P&Z	General	401	08	2	272	610	40	2	203	Maintenance Contracts	\$ 75.00
Operations	General	401	15	2	104	401	08	2	207	Telecommunications	\$ 6.38
Manager	COL / GRT	621	96	2	611	401	15	2	207	Telecommunications	\$ 500.00
						621	96	2	612	CO/Land & Improvements	\$ 15,000.00
TOTAL										#####	



TORRANCE COUNTY Line Item Transfer Form

Requesting Department:

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

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
621-96-2611	Capital Outlay / Buildings	621-96-2612	Capital Outlay / Land	15,000.00

Reason for Transfer:

Selinda Korman
 Signature

6-18-19
 Date



**REQUEST TO BE PLACED ON THE TORRANCE COUNTY
COMMISSION AGENDA**
This form must be returned to the County Manager's Office **ONLY!**

Deadline for inclusion of an item is **WEDNESDAY, NOON** prior to the subsequent meeting.
All fields must be filled out for consideration.

Name: Jeremy Oliver
First Last
Finance / Torrance County
Department / Company / Organization Name

Today's Date: 6-13-19 Mailing Address: _____
(Departments/employees of Torrance County need not include their address)

Telephone number/Extension: 4720 Fax Number: _____
Would you like this Agenda Faxed to you? Yes No

Email Address: J.Oliver@TCNM.us

Is this request for the next Commission meeting? YES NO If no, date of Commission Meeting: _____

Brief explanation of business to be discussed:
Line Item transfer

Is this a Resolution, Contract, Agreement, Grant Application, Other? Resolution

Has this been reviewed by Grant Committee? YES NO If yes, corresponding paperwork must be attached.

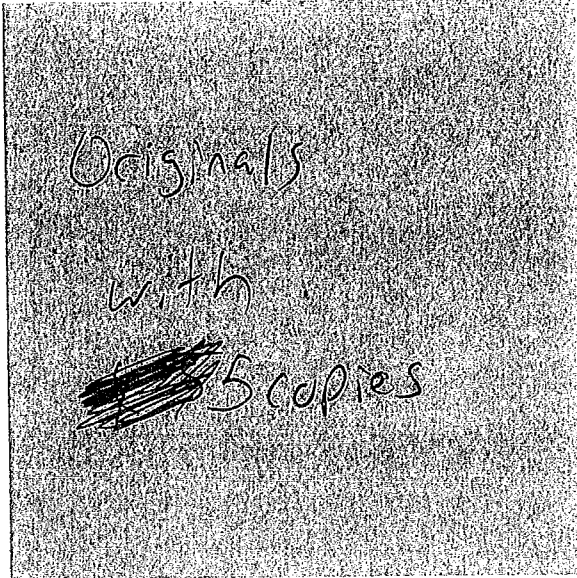
Has this been reviewed by the County Attorney? YES NO

If this is a contract, MOU, or Joint Powers Agreement there must be a signature line for the County Attorney on the original contract.

Has this been reviewed by the Finance Dept? YES NO Initials: JO

- No Impact
- Change in current fund
- Raise Budget (allow 45 days after Commission approval)
- Change in funds (allow 45 days after Commission approval)
- Reduction
- Transfer funds (allow 45 days after Commission approval)

Other: _____



Requesting Department:

Commision

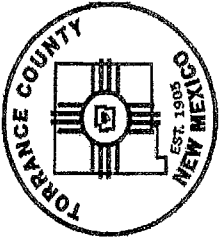
My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-05-2201	Vehicle maintenance	401-05-2101	Elected salaries	\$1,639
401-05-2209	Heating/Gas/propane	401-05-2101	Elected salaries	\$1,250
401-05-2201	Vehicle maintenance	401-05-2102	Full Time Salaries	\$250

Reason for Transfer:

Signature *Juan Archuleta*

Date 6/13/19



TORRANCE COUNTY

Line Item Transfer Form

Animal Services

Requesting Department:

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

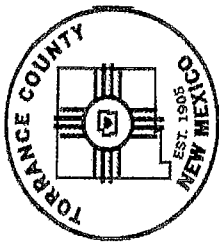
Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-82-2220	Cleaning Supplies	401-82-2272	Professional Services	\$380
401-82-2103	Part Time salaries	401-82-2065	Health Insurance matching	\$500
401-82-2104	Overtime	401-82-2065	Health Insurance matching	\$700
401-82-2105	Shift Differential	401-82-2065	Health Insurance matching	\$300
401-82-2205	Mileage/Per Dien	401-82-2065	Health Insurance matching	\$500
401-82-2221	Printing Publishing	401-82-2065	Health Insurance matching	\$500
401-82-2222	Field Supplies	401-82-2065	Health Insurance matching	\$500
401-82-2266	Training	401-82-2065	Health Insurance matching	\$1,000
401-05-2223	Kennel Supplies	401-82-2216	Animal Food	\$450
401-50-2202	Vehicle Fuel	401-82-2115	Pharmacy Supplies	\$500
401-05-2108	Unemployment Compensation	401-82-2065	Health Insurance matching	\$4,000
Reason for Transfer:				

Ama Sulema

Signature

6/13/19

Date



TORRANCE COUNTY

Line Item Transfer Form

Requesting Department: Operations

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		
401-15-2238	Grounds Maintenance	401-15-2203	Maintenance Contracts	\$500	
401-16-2220	Cleaning Supplies	401-16-2203	Maintenance Contracts	\$450	
401-16-2215	Building Maintenance	401-16-2207	Maintenance Contracts		
Reason for Transfer:					

Signature

Date

Enter

****WARNING** OVERSPENT**

401152203



16,000.00	Budget
15,612.42	Transactions
	Encumbrance Balance
1,222.01	New Encumbrance
<hr/>	
1,222.01	Budget Balance
834.43	Budget Over By
	Previous Encumbrance



\$ 1741.82 FOR LI#

401-16-2203

\$ 2444.02 FOR LI#

401-15-2203

Enter

***WARNING** OVERSPENT

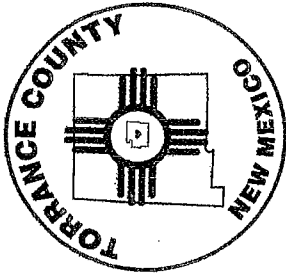
HVAC MAINTENANCE FOR ADMIN

401152203



16,000.00	Budget
15,612.42	Transactions
	Encumbrance Balance
1,222.01	New Encumbrance
1,222.01	Budget Balance
834.43	Budget Over By
	Previous Encumbrance





TORRANCE COUNTY

Line Item Transfer Form

Requesting Department: _____

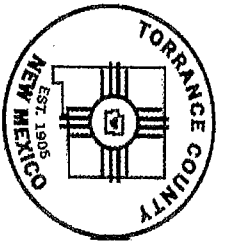
Treasurer _____

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

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
609-30-2266	Training	609-30-2205	Mileage/Per Diem	\$ 525.00
609-30-2219	Office Supplies	609-30-2221	Printing/Publishing	\$ 800.00
401-30-2221	Printing/Publishing	401-30-2207	Telecommunications	\$ 450.00
401-30-2221	Printing/Publishing	401-30-2269	Membership Dues/Sub	\$ 208.00
Reason for Transfer:				
Transferring money to cover operating costs				

Signature

6-6-19
Date



TORRANCE COUNTY
Line Item Transfer Form

Requesting Department: _____

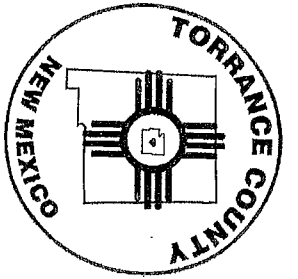
Wind Pilt

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	
641-09-2611	CO/Building & Improvements	641-09-2266	Training	\$5,000
641-09-2611	CO/Building & Improvements	641-09-2410	High Lonesome Wind	\$21,000
Reason for Transfer:				

Sylvester Starnand
Signature

6-13-19
Date



TORRANCE COUNTY

Line Item Transfer Form

2020 FINANCIAL DEPT
9 JUN 12 AM 9:02

Requesting Department:

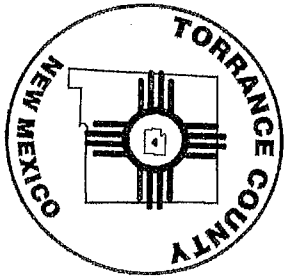
INFORMATION TECH

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

Transfer From:		Transfer To:		\$
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Amount of Transfer
401-65-2218	EQUIP. MAINT./REPAIR	401-24-2215	EQUIP. MAINT./REPAIR	\$ 200.00

Reason for Transfer:
COVER ADDITIONAL COSTS ASSOCIATED WITH BUILDING MAINTENANCE TO ALLOW FOR IT INFRASTRUCTURE

Signature Date 6-12-2019



TORRANCE COUNTY
Line Item Transfer Form

Requesting Department: _____

BUILDING MAINTENANCE AND REPAIR

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	
401-16-2210	WATER/SEWER/TRASH	401-16-2207	TELECOMMUNICATIONS	\$ 200.00
				\$ -

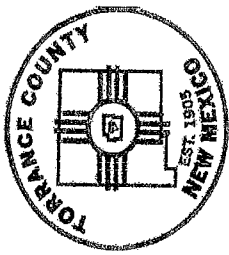
Reason for Transfer:
 CREATION OF NEW LINE ITEM WITHIN THIS BUDGET TO ALLOW FOR DEDICATED PHONE LINE FOR
 FIRE PANEL DIALER AT JUDICIAL COMPLEX

Signature: *[Handwritten Signature]*

Date: 6-11-2019

COPIED FROM THE ORIGINAL FILE

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19 JUN 15 AM 8:23



TORRANCE COUNTY Line Item Transfer Form

Requesting Department: Sheriff

Requesting Department:

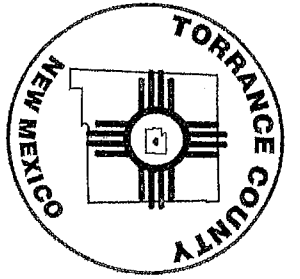
My department hereby requests that the following line item transfer(s) be made to the budget:

Transfer From:		Transfer To:		Amount of Transfer
Line Item Number	Line Item Description	Line Item Number	Line Item Description	
401-50-2102	Full Time Salaries	401-50-2104	Overtime	\$10,000
401-50-2105	Shift Differential	401-50-2104	Overtime	\$3,000
401-50-2205	Mileage/Per Diem	401-50-2104	Overtime	\$2,000
401-50-2067	Retiree Health Care	401-50-2104	Overtime	\$1,500
401-50-2203	Maintenance Contracts	401-50-2104	Overtime	\$2,000
401-50-2231	Weapons/Ammunition	401-50-2104	Overtime	\$4,500
401-50-2231	Weapons/Ammunition	401-50-2207	Telecommunications	\$300
420-74-2102	Full Time Salaries	420-74-2064	FICA Matching	\$5,000
420-74-2102	Full Time Salaries	420-74-2104	Overtime	\$500
420-74-2102	Full Time Salaries	420-74-2201	Vehicle Maintenance	\$600

Reason for Transfer:

Stephane [Signature]

6/13/19
Date



TORRANCE COUNTY

Line Item Transfer Form

Requesting Department: _____

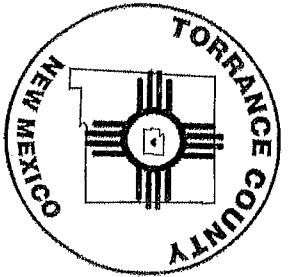
ADMIN. MAINT./OVERTIME

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

Transfer From:		Transfer To:		Amount of
Line Item Number	Line Item Description	Line Item Number	Line Item Description	Transfer
401-15-2104	OVERTIME	401-15-2207	TELEPHONE	\$ 500.00
				\$ -

Reason for Transfer:
COVER ADDITIONAL COSTS ASSOCIATED WITH TELECOMMUNICATIONS - CELL PHONES

Signature: _____ Date: 6-13-2019



TORRANCE COUNTY Line Item Transfer Form


Requesting Department: _____

Planning & Zoning

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	
401-08-2272	Professional Services	401-08-2207	telecommunications	\$6.38

Reason for Transfer:
Correct deficit in 401-08-2207 for increase in phone bill to cover May billing.


Signature _____ Date 6/13/2019