



**THE CITY OF
SANTA FE**

MEMORANDUM

DATE: September 15, 2025

TO: MS
Mark Scott, City Manager
Emily Oster, Finance Director EKO
Andy Hopkins, Budget AJH
Erika Lujan, Grants Administrator Erika Lujan

FROM: MS
Michael Suber, Chief Medical Officer

VIA: sj Sten Johnson, Assistant Fire Chief and BM Brian Moya, Fire Chief

SUBJECT: NM Department of Health: EMS Fund Act

ITEM AND ISSUE:

Request for Approval of a State of New Mexico Department of Finance and Administration, Local Government Division, and the EMS Fund Act Rules 7.27.4 NMAC. Reversion date of June 30, 2026. Request for Approval of a Budget Amendment Resolution (BAR) in the amount of \$100,000 from 2210186.490180 to 2210186. (as described below):

From Line Items:

- 2210186.490180 \$(40,400)
- 2210186.490180 \$(36,600)
- 2210186.490180 \$(23,000)

To Line Items:

- 2210186.561200 \$40,400
- 2210186.570500 \$36,600
- 2210186.530710 \$23,000

BACKGROUND AND SUMMARY:

The City received the attached award announcement for State of New Mexico Department of Finance and Administration, Local Government Division, and the EMS Fund Act Rules 7.27.4 NMAC in the amount of \$100,000. The total grant has increased this year. The annual grant last year was \$80,000. This is reflected in our current budget. This application period the amount has been raised from \$80,000 to \$100,000 this year and annually moving forward. The net increase to our budget is \$20,000. These funds are granted for the procurement of Emergency Medical Equipment, such as Point of Care ultra-sound units and software projects. Also, the

funds are utilized to pay for Paramedic school tuition for our employees.

ACTION REQUESTED:

The Fire Department respectfully requests your review and approval.

ATTACHMENTS:

State of New Mexico Department of Finance and Administration, Local Government Division,
and the EMS Fund Act Rules 7.27.4 NMAC award letter.

BAR

Project Ledger



Michelle Lujan Grisham
Governor

Gina DeBlassie
Cabinet Secretary

New Mexico Department of Health

September 4, 2025

City of Santa Fe
PO Box 909
Santa Fe, NM 87504

Dear Sir/Mam:

In accordance with the Terms of Rules Governing in Emergency Medical Services Fund Act, DOH 7.27.4 NMAC, a warrant in the amount of **\$100,000.00** is authorized for disbursement on behalf of the following local recipient (s) in accordance with their approved applications:

City of Santa Fe Fire Dept. - \$100,000.00

These funds from the Local Funding Program of the EMS Fund Act for FY 26 (July 1, 2025 – June 30, 2026) must be accounted for in accordance with the rules set forth by the New Mexico Department of Finance and Administration, Local Government Division, and the EMS Fund Act Rules 7.27.4 NMAC.

In order to keep our records in order, each Applicant (Fiscal Agent) MUST submit an itemized expenditures report for FY25 EMS Fund Act Local Funding Award (July 1, 2024 – June 30, 2025). If you administer funds for more than one (1) Local recipient, please submit a report for each.

If you have any questions, please contact me at (505) 476-8233 or by e-mail at rachel.marquez@doh.nm.gov

Sincerely,
Rachel Marquez
EMS Fund Act Coordinator



Previous Day Composite Report

Custom
As of 08/29/2025

Company: CITY OF SANTA FE
User: Randall Holmes

09/02/2025 10:34 AM ET

Commercial Electronic Office®

Treasury Information Reporting

Currency: USD
Bank: 121000248
Account: 4121218564(NM)

WELLS FARGO BANK, N.A.
WIRE DEPOSIT ACCOUNT

Balances

Closing Ledger Balance	.00
Closing Collected Balance	.00
Opening Available Balance	.00
One Day Float	.00
Two+ Day Float	.00
MTD Average Closing Ledger Balance	.00
MTD Average Closing Collected Balance	.00
Total Credits	1,259,350.46
Total Debits	1,259,350.46
Total Number Credits	12
Total Number Debits	1

Summaries

Type of Credit	Number of Items	Amount
Total ACH Credits	12	1,259,350.46
Credit Totals	12	1,259,350.46

Type of Debit	Number of Items	Amount
Total ZBA Debits	1	1,259,350.46
Debit Totals	1	1,259,350.46

Credit Transactions

8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091006065474629 State of New Mex VNDR PYMT NMAP0002370021 6122025 FY26 1st Distribution SFMO 6122025 FY26 1	Credit Amount: Bank Ref: IA000016886734	790,577.00
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091005969901772 PNM Utility EDI PYMNTS AP0000209699 91769\	Credit Amount: Bank Ref: IA000018339795	241,487.13
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091006062551716 UNITED AIRLINES UAL 250829 109515 1\	Credit Amount: Bank Ref: IA000029497004	118,360.12
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091006065473379 State of New Mex VNDR PYMT NMAP0002370010 INVOICE#20250731EMSFUNDACTSAINT INVOICE#20250731EM	Credit Amount: Bank Ref: IA000016886450	100,000.00
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091006077692957 HNB - ECHO HCCLAIMPMT 250829 XXXXX0168 TRN*1*1205435232*1341858379\	Credit Amount: Bank Ref: IA000025835459	4,644.95
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091005879197451 UnitedHealthcar HCCLAIMPMT XXXXX0168 TRN*1*25239B1000976678*1362739571*000004567\	Credit Amount: Bank Ref: IA000019295127	1,482.40
8/29/2025	169 / MISCELLANEOUS ACH CREDIT Cust Ref: 00000000000 Unique ID: 00000091005969649750 BCBS of NM HCclaimPmt 250828 85593385 TRN*1*C25240E02585890*1361236610*0E0258589\	Credit Amount: Bank Ref: IA000024779370	956.27
8/29/2025	169 / MISCELLANEOUS ACH CREDIT	Credit Amount:	548.00



Previous Day Composite Report

Custom

As of 08/29/2025

Company: CITY OF SANTA FE

User: Randall Holmes

09/02/2025 10:34 AM ET

Commercial Electronic Office®

Treasury Information Reporting

Cust Ref: 00000000000 **Bank Ref:** IA071759864874
Unique ID: 00000091006076302173
 JUSTICE SV9T 8001234568 250828 CitePayUSA CitePayUSA deposit from Vantiv for 08/28/2025

8/29/2025 169 / MISCELLANEOUS ACH CREDIT **Credit Amount:** 507.77
Cust Ref: 00000000000 **Bank Ref:** IA101128759149
Unique ID: 00000091005968394415
 CENTENE CORP HCCLAIMPMT 250827 TRN*1*0900181967*1455583511\

8/29/2025 169 / MISCELLANEOUS ACH CREDIT **Credit Amount:** 437.50
Cust Ref: 00000000000 **Bank Ref:** IA000024774505
Unique ID: 00000091005969649649
 BCBS of NM HCCLAIMPmt 250828 85598132 TRN*1*C25240E00537520*1361236610*0E0053752\

8/29/2025 169 / MISCELLANEOUS ACH CREDIT **Credit Amount:** 340.72
Cust Ref: 00000000000 **Bank Ref:** IA000053850802
Unique ID: 00000091005962308776
 HUMANA INS CO HCCLAIMPMT 250828 82961479 TRN*1*166219014250827*1391263473\

8/29/2025 169 / MISCELLANEOUS ACH CREDIT **Credit Amount:** 8.60
Cust Ref: 00000000000 **Bank Ref:** IA000019282005
Unique ID: 00000091005879195620
 UHIC NM HCCLAIMPMT XXXXX0168 TRN*1*25239B1000971646*1362739571*000004567\

MISCELLANEOUS ACH CREDIT Total **Credit Amount** **1,259,350.46**

Credit Total **Credit Amount** **1,259,350.46**

Debit Transactions

8/29/2025 575 / INDIVIDUAL ZBA DEBIT **Debit Amount:** 1,259,350.46
Cust Ref: 00000000000 **Bank Ref:** IA082900000001
 ZBA BALANCE ACCOUNT TRANSFER TO 7318735144

Account Net Amount **0.00**

Grand Total For Currency: USD

Balances

Closing Ledger Balance	.00
Closing Collected Balance	.00
Opening Available Balance	.00
One Day Float	.00
Two+ Day Float	.00
MTD Average Closing Ledger Balance	.00
MTD Average Closing Collected Balance	.00
Total Credits	1,259,350.46
Total Debits	1,259,350.46
Total Number Credits	12
Total Number Debits	1

--- END OF REPORT ---



STATE OF NEW MEXICO
 DEPARTMENT OF HEALTH
 1190 St Francis Dr.
 Santa Fe, NM 87502-6110

ACH Remittance Advice

State of New Mexico
 Department of Finance & Administration

CITY OF SANTA FE
 PO BOX 909
 SANTA FE, NM 87504-0000
 United States

Date	Payment Amount	Reference
Aug/29/2025	\$100,000.00	3001877550

DFI ID:121000248

Bank Account: *****8564

NON-NEGOTIABLE

If you would like to receive electronic ACH remittance advices via email, please contact DFA Vendor Relations at vendor.relations@dfa.nm.gov

Business Unit : 66500 Payment Date: 08/29/2025 Reference: 3001877550

Invoice Number	Invoice Date	Voucher ID	Gross Amount	Discounts	Late Charges	Paid Amount
INVOICE#20250731EMSFUNDACT SANT	Jul/31/2025	00759405	100,000.00	0.00	0.00	100,000.00
<i>INVOICE#20250731EMSFUNDACTSANTAFE</i>						

Supplier Number	Name	Bank Charge	Transfer Cost C		
0000054360	CITY OF SANTA FE	\$0.00			
Reference	Date	Total Gross Amt	Total Discounts	Total Late Charges	Total Paid Am
3001877550	Aug/29/2025	\$100,000.00	\$0.00	\$0.00	\$100,000.00

Account

Fund ... EMRGSVC
 Org ... EMS grant
 Object ... Trng/Tuitn
 Project ...

Acct
 Acct name
 Type Status
 Rollup ...
 Sub-Rollup ...

Account Notes

MultiYr Fund

4 Year Comparison

Current Year History 4 Year Graph History Graph

Yr/Per 2025/01	Fiscal Year 2025		Fiscal Year 2024		Fiscal Year 2023		Fiscal Year 2026	
Original Budget	<input type="text" value="20,000.00"/>		<input type="text" value="20,000.00"/>		<input type="text" value="20,000.00"/>		<input type="text" value="26,000.00"/>	
Transfers In	<input type="text" value="6,000.00"/>		<input type="text" value=".00"/>		<input type="text" value=".00"/>		<input type="text" value=".00"/>	
Transfers Out	<input type="text" value=".00"/>		<input type="text" value=".00"/>		<input type="text" value=".00"/>		<input type="text" value=".00"/>	
Revised Budget	<input type="text" value="26,000.00"/>		<input type="text" value="20,000.00"/>		<input type="text" value="20,000.00"/>		<input type="text" value="26,000.00"/>	
Actual (Memo)	<input type="text" value="25,999.50"/>		<input type="text" value="19,999.50"/>		<input type="text" value="20,000.00"/>		<input type="text" value=".00"/>	
Encumbrances	<input type="text" value=".00"/>		<input type="text" value=".00"/>		<input type="text" value=".00"/>		<input type="text" value="2,916.00"/>	
Requisitions	<input type="text" value=".00"/>						<input type="text" value=".00"/>	
Available	<input type="text" value=".50"/>		<input type="text" value=".50"/>		<input type="text" value=".00"/>		<input type="text" value="23,084.00"/>	
Percent used	<input type="text" value="100.00"/>		<input type="text" value="100.00"/>		<input type="text" value="100.00"/>		<input type="text" value="11.22"/>	

Account

Fund	<input type="text" value="221"/> ...	EMRGSVC	Acct	<input type="text" value="221-15-20-2100-186-00-000-570500-"/>		
Org	<input type="text" value="2210186"/> ...	EMS grant	Acct name	<input type="text" value="Equipment & Machinery >\$5K"/>		
Object	<input type="text" value="570500"/> ...	Eqp&MchnNE	Type	<input type="text" value="Expense"/> ▼	Status	<input type="text" value="Active"/> ▼
Project	<input type="text"/> ...	<input type="button" value="📄"/>	Rollup	<input type="text"/> ...	<input type="button" value="📄"/>	
			Sub-Rollup	<input type="text"/> ...	<input type="button" value="📄"/>	
			<input type="checkbox"/> MultiYr Fund			

4 Year Comparison

Current Year

History

4 Year Graph

History Graph


Yr/Per 2025/01	Fiscal Year 2025	Fiscal Year 2024	Fiscal Year 2023	Fiscal Year 2026
Original Budget	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value="54,000.00"/> <input type="button" value="📄"/>
Transfers In	<input type="text" value="54,000.00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>
Transfers Out	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>
Revised Budget	<input type="text" value="54,000.00"/>	<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="54,000.00"/>
Actual (Memo)	<input type="text" value="26,633.04"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>
Encumbrances	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>	<input type="text" value=".00"/> <input type="button" value="📄"/>
Requisitions	<input type="text" value=".00"/> <input type="button" value="📄"/>			<input type="text" value=".00"/> <input type="button" value="📄"/>
Available	<input type="text" value="27,366.96"/>	<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value="54,000.00"/>
Percent used	<input type="text" value="49.32"/>	<input type="text" value=".00"/>	<input type="text" value=".00"/>	<input type="text" value=".00"/>

Account


Fund

Org

Object


Project 

Acct

Acct name  Account Notes

Type Status


Rollup 

Sub-Rollup 

MultiYr Fund

4 Year Comparison

- Current Year
- History
- 4 Year Graph
- History Graph

Yr/Per 2025/01	Fiscal Year 2025	Fiscal Year 2024	Fiscal Year 2023	Fiscal Year 2026
Original Budget	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 
Transfers In	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 
Transfers Out	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 
Revised Budget	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>
Actual (Memo)	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 
Encumbrances	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 	<input type="text" value="..."/> 
Requisitions	<input type="text" value="..."/> 	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/> 
Available	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>
Percent used	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>	<input type="text" value="..."/>



City of Santa Fe New Mexico

Finance Department

Project Ledger Request Form



Date of Request: 09/16/2025

Project Title: Emergency Medical Services Fund Act FY26

Project Type: CIP Grant Internal Tracking

Department: 200 - Fire Project Manager: Toniette C. Martinez Ext: 3109

Project Date Range: 07/01/2025 to 06/30/2026 Create Fixed Asset

Project ID: FIR2622109

Grant ID: S2615

Approved By: ERIKALUJAN

CT (Finance Use Only) Sep 16, 2025

Multi-Funding (complete all funding sources, should equal 100%)

Funding Source: State of NM Dept. of Health % of Funding: 100

MUNIS ORG: 2210186 MUNIS OBJ: 490180 Awarded Amount: \$100,000.00

Funding Source: _____ % of Funding: _____

MUNIS ORG: _____ MUNIS OBJ: _____ Awarded Amount: _____

Expense String Phase:

A project must have at least one phase identified, this can be used as an additional level of tracking, for example, CIP - Design, Construction, etc. For Grants can be used as reimbursable types, such as transportation, salaries.

(You can create more than one phase and you can default MUNIS ORGs and OBJs, optional)

Phase: See attached MUNIS ORG: 2210186 MUNIS OBJ: See attached

Grants Only (list all grants if applicable):

Grantor Name: NM DEPT OF HEALTH EMS ACT FUND Awarded Amount: 100,000.00

AR Charge Code: 2210186.490180 Grant funds multiple projects
(Complete a form for each project)

Grantor Id: 700003 Federal CFDA (if applicable): N/A

Grantor Name: _____ Awarded Amount: _____

AR Charge Code: _____ Grant funds multiple projects
(Complete a form for each project)

Grantor Id: _____ Federal CFDA (if applicable): _____

(If grants please provide all grant award documents with form) Attached Grant Documentation

Signature: *Michael Suber*

Email: mjsuber@santafenm.gov

Signature: ERIKA LUJAN
ERIKA LUJAN (Sep 18, 2025 14:34:05 MDT)

Email: evlujan@santafenm.gov