

City of San Antonio Fiscal Impact Form

Category Selection

Tip: Once you have selected a category, you must reset the form to change the category.

Resetting the form clears all your entries.

*Is this a contract for City Council Consideration?

Yes

No

	*Fiscal Impact? Yes No
	*Is the attached contract signed? Yes No
9	SAP Contract Number:
	Please choose from the list below:
	Operating
	Expenditure
Cate	egory 1: Operating Expenses (Expenditures)
This opti	on would be for routine purchases and other expenditures
Are f	unds budgeted for this expenditure? Yes No
Is this a Po	urchasing Department annual Contract? Yes No
Comments:	
L	
Staffing Budgeted? (Yes • No
Positions Currently Authorized? (Yes No
Personnel Changes:	
L	



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Impact on O	peration &	Maintenance:
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Funding for this item will be from the FY2017 General Fund budget in an amount not to exceed \$200,000.

Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.
200,000	5202025	1601010001	11001000	

When submitting your information be sure to attach all related fiscal information.

This completes your required information.

User Authentication

Authorized Signature: Viengsai Vongchampa (Finav Date: 09/07/2016

Attach this completed form to your item.