

# 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 O No							
	*Is the attached contract signed? • Yes						
SAP C	Contract Number:						
	Please choose from the list below:						
	Operating						
	Expenditure						
Category 1: Operating Expenses (Expenditures)							
This option we	ould be for routine purchases and other expenditures						
Are funds	budgeted for this expenditure?						
Is this a Purcha	sing Department annual Contract? Yes • No						
Comments:							
Staffing Budgeted?	5						
Positions Currently Authorized?	5						
Personnel Changes: N/A							



## City of San Antonio Fiscal Impact Form

Impact on Operation & Maintenance:	

#### Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.	
1,030,000	5201040	7509010003	75003000		
2,000	5201040	7509020002	75001000		

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

This completes your required information.

### **User Authentication**

Authorized Signature: Amy Cowley (Finance-Shared Date: 09/28/2016

Attach this completed form to your item.