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
SAP Contract Number:
Please choose from the list below:
Operating
Expenditure
Category 1: Operating Expenses (Expenditures)
This option would be for routine purchases and other expenditures
Are funds budgeted for this expenditure?
Is this a Purchasing Department annual Contract? O Yes 💿 No
Comments: A contract is needed ensure the continuation of medical screening to arrestees brought into the City's Arrestee Processing Center when Bexar County Justice Intake and Assessment Center begins operations.
Staffing Budgeted? 🔿 Yes 💿 No
Positions Currently Authorized? 🔿 Yes 💿 No
Personnel Changes: n/a



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Impact on Ope

ration & Maintenance:	

Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.	
\$3,088,485.76	5201040	030206001	11001000	N/A	

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

User Authentication

Authorized Signature:

Kris Ryan

Date: 05/11/2018

Attach this completed form to your item.