



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

☒ Revenue

Category 1: Operating Expenses (Revenue)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.
\$100,000	TBD		29097000	TBD
\$50,000	TBD		29097000	TBD
\$25,750	4202120		29097000	2290000000002
\$50,000	4406760		29097000	2290000000000

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

User Authentication



City of San Antonio Fiscal Impact Form

Authorized Signature:

[Handwritten Signature]

Date:

1/17/18

Attach this completed form to your item.