

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? O Yes • No
	SAP Contract Number:
	Please choose from the list below:
	Operating
	Expenditure
Cat	egory 1: Operating Expenses (Expenditures)
Are Is this a F	tion would be for routine purchases and other expenditures funds budgeted for this expenditure? Yes No Purchasing Department annual Contract? Yes No
Comments:	This action will appropriate funds for use.
Staffing Budgeted?	○ Yes No.
Positions Currently Authorized?	○ Yes
Personnel Changes:	



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lmt	pact on Operati	on & Maintenance:		
	A service of			
		- 1 - 11		

Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.
\$239,000.00	5201040	4507010001	29067000	
\$125,000.00	5201040	4506010001	29009000	

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

This completes your required information.

User Authentication

Authorized Signature:

Date: 12/11/2018

Attach this completed form to your item.