



## 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:

☐ Expenditure ☒ Revenue

### Category 1: Operating Expenses (Revenue)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.	
Est. \$20,000	4202410	N/A	7400100	209000000045	

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

### User Authentication

Authorized Signature: Michelle DelCarmen (ITSD)

Date: 05/24/2019

Attach this completed form to your item.