

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 cor	ontract for City Council Consideration? Yes No	
14	*Fiscal Impact? • Yes C No	
	*Is the attached contract signed? (Yes (No	
SAF	AP Contract Number: Please choose from the list below: Operating	
	€ Expenditure	
Catego	pory 1: Operating Expenses (Expenditures)	
Are fund	n would be for routine purchases and other expenditures nds budgeted for this expenditure? Yes No rchasing Department annual Contract? Yes No	
Staffing Budgeted? (*)	Yes (No	
Positions Currently Authorized? (Yes (No	
Personnel Changes:		



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Impact on Opera	tion &	Mai	intenan	ice
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Funding for this agreement in the amount not to exceed \$300,000 is available from the Economic Development Incentive Fund (EDIF).

Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.
300,000	5201040	1604010001	29059000	
			23.4	

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

This completes your required information.

User Authentication

Authorized Signature:

Date: 5/23/2019

Attach this completed form to your item.