



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 (Expenditures)

This option would be for routine purchases and other expenditures

Are funds budgeted for this expenditure? ☒ Yes ☐ No

Is this a Purchasing Department annual Contract? ☐ Yes ☒ No

Comments:

Staffing Budgeted? ☐ Yes ☐ No

Positions Currently Authorized? ☐ Yes ☐ No

Personnel Changes:



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Impact on Operation & Maintenance: None

Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.	
\$241,000	5201040	703290001	29086007	N/A	

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

User Authentication

Authorized Signature: Gloria T. Alvarado (NHSD)

Date: 09/09/2020

Attach this completed form to your item.