



# 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 (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, any services required to support this leased locations are already in place. Amount below represents the 12 month cost at the 9,030.81/mo rate.

### Available Funding Source(s)

Amount(\$)	General Ledger No.	Cost Center	Fund No.	Internal Order No.
108,369.72	5206010	1703100001	11001000	

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

## User Authentication

Authorized Signature: Scott Swindler (Finance-Shar)

Date: 04/26/2022

Attach this completed form to your item.