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## FINANCIAL IMPACT STATEMENT **For Council Action Items**

	<del></del>	(D	eliver original to Financi	al Planning Divi	sion. Reta	in copy.)		
	i	ame of Initiator	í	Telephone No.		3. Bureau/O PBOT/TSI		
	L	Bower be filed (hearing date):		3-823-5667				_
	July 28		5b. Calendar (6 Regular Con	sent 4/5ths	and F	ubmitted to Co PD Budget Ai 16, 2010	ommissioner's office nalyst:	
*Autho	slation Title: rize an Intergo unities Putting	overnmental Agree Prevention to Wo	ment with Multnomark. (Ordinance)	ah County and	l accept	a grant in	the amount of \$17	5,000 for
		oposed Legislatio gn an IGA with M						
	ie and/or Exp							
IS ALL	the Revenue OST OBJEC'	and/or Expense :	part of the curren	t year's budg	get? Y	es		
If NO,	complete Ster	os 3 & 4. For mo	difications to budge	ets. identify/d	liscuss o	nly the ch	then g	o to Step #5.
The leg Multnord 1 Expe What a include include None, the Staffing 5) Will position position	is legislation are is generated islation will go man County the ense:  re the costs to costs in the cuthe local continuere is no mate Requirementary positions as are created is limited term.	please identify the enerate \$175,000 is arough an ARRA go the City as a resurrent fiscal year a ribution or match the requirement for the created, elimical please include when please indicate the enerate of the created of the please indicate the enerate of the created of the please indicate the enerate of the created of the please indicate the enerate of the created of the please indicate the enerate of the created of the	n new revenue for the grant from the Center ult of this legislation is well as costs in futtrequired) ("If there is the content of the conten	e City in fiscars for Disease  n? What is the current of the curre	al years 2 Control. the source the action timate, p rent year	ee of fundion is related idease iden	ing for the expensed to a grant or contify the level of contitude of this legislation of the permanent position.	se? (Please ntract please nfidence.") ion? (If new ons. If the
6) Will The pos Comple only be 7) Cha appropri	positions be of itions will like ete the following completed if age in Appropriated by this lener bureau bu	ereated or eliminately be funded from ing section if you you are adjusting priations (If the age is lation. If the add get adjustments in the adju	September 2010 thr are accepting and a g total appropriation accompanying ordinal appropriation include the table as well. ning. Use additional	as a result of ough March Inpropriating ans, which cure amends is an interage. Include the a	this leging 19, 2012 gagran grantly of the budgency agree ppropries	islation? , spanning t via ordinoly applicate, please seement with	2 fiscal years.  nance. This section is to grant ordinate the dollar of	on should ances. amount to be please includ
Fund	Fund Center	Commitment Item	Functional Area	Funded Pr	ogram	Grant	Sponsored Program	Amount

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J W I 7-13-2010	Auton	- Mr Lo	C1				
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