City of Portland, Oregon

FINANCIAL IMPACT STATEMENT For Council Action Items

184740

(Deliver original to Financial Planning Division. Retain copy.)								
1. Name of Initiator		2. Telephone No.		3. Bureau/Office/Dept.				
Carmen Merlo		823-4375		Office of Emergency				
		020 1070		Management				
4a. To be filed (date)	4b. Calendar (Che	ck One)	5. Date Sub	Date Submitted to FPD Budget Analyst:				
June 16, 2011	Regular Consen X 🗖	t 4/5ths □]]	June 16, 2011				

1) Legislation Title:

Amend Code to improve coordination of the City emergency management system. (Ordinance; replace Code Chapters 3.124, 3.125, 3.126, 15.04, and 15.08 and repeal 15.12)

2) Purpose of the Proposed Legislation:

The purpose is to improve coordination of the City's emergency management system.

3) Revenue:

Will this legislation generate or reduce current or future revenue coming to the City? If so, by how much? If new revenue is generated please identify the source. No

4) Expense:

What are the costs to the City as a result of this legislation? What is the source of funding for the expense? (Please include costs in the current fiscal year as well as costs in future years) (If the action is related to a grant or contract please include the local contribution or match required) None

Staffing Requirements:

Director Carmen Merlo

5) Will any positions be created, eliminated or re-classified in the current year as a result of this legislation? (If new positions are created please include whether they will be part-time, full-time, limited term or permanent positions. If the position is limited term please indicate the end of the term.)

No

6) Will positions be created or eliminated in *future years* as a result of this legislation? No

Complete the following section only if an amendment to the budget is proposed.

7) Change in Appropriations (If the accompanying ordinance amends the budget please reflect the dollar amount to be appropriated by this legislation. Include the appropriate cost elements that are to be loaded by accounting. Indicate "new" in Center Code column if new center needs to be created. Use additional space if needed.)

Fund	Fund Center	Commitment Item	Functional Area	Funded Program	Grant	Amount
	9					
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APPROPRIATION UNIT HEAD (Typed name and signature)