FINANCIAL IMPACT STATEMENT For Council Action Items

184836

(De	liver original to Financial	Planning Di	vision. Retain o	copy.)
1. Name of Initiator		2. Telephone No.		3. Bureau/Office/Dept.
Amreet Sandhu, Public Safety & Peacekeeping Policy Adviser		(503) 823 - 4182		Mayor's Office
4a. To be filed (date) August 19, 2011	4b. Calendar (Check Regular Consent □ ■	One) 4/5ths	5, Date Su	bmitted to FPD Budget Analyst:

1) Legislation Title:

* Revise ordinance on illegal gun use and violent gang activity to correct East Hot Spot designation (Ordinance; amend Ordinance No. 184274)

2) Purpose of the Proposed Legislation:

To amend Ordinance No. 184274 to reflect the current boundary of the East Illegal Firearm Use Hotspot.

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)

N/A

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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.	<i>If the</i>
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	Sponsored Program	Amount
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Mayor	Sam	Adams

APPROPRIATION UNIT HEAD (Typed name and signature)