FINANCIAL IMPACT STATEMENT For Council Action Items

(De	eliver original to Financial	Planning Di	vision. Retain co	opy.)	
1. Name of Initiator		2. Telephone No.		3. Bureau/Office/Dept.	
LaVonne Griffin-Valade		823-4808		Office of the City Auditor	
		'			
4a. To be filed (date)	4b. Calendar (Check	(One)	Date Sub	mitted to FPD Budget Analyst:	
09-30-09	Regular Consent	4/5ths □	09-24-09		

1) Legislation Title:	Amend contract with LNS Court Reporting and Captioning for closed captioning services for
	(Ordinance; amend Contract No. 35532)

<u>2) Purj</u>	oose o	f the	Prop	<u>osed</u>	Legislation:
hearing	impai	red c	itizen	S.	

To provide closed captioning services of the City Council sessions for the

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 revenue will be generated.

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)

The annual cost for these services is \$36,000. These funds are included in the Auditor's Office 09-10 budget.

Starting Requirements:	
5) Will any positions be created, eliminated or re-classified in the current year as a result of this legislation?	(If nev
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.)

There are no staffing requirements.

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

La Vonne Griffin-Valade L. Suffin - Volade by Diane Betely	& Betchy
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APPROPRIATION UNIT HEAD (Typed name and signature)