



**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

| Fiscal Years                                   | <u>2006</u> | <u>2007</u>     | <u>2008</u>      | <u>2009</u> | <u>2010</u> |
|--|-------------|-----------------|------------------|-------------|-------------|
| Capital Expenditures                           | _____       | _____           | _____            | _____       | _____       |
| Operating Costs                                | _____       | <u>37,500</u>   | <u>112,500</u>   | _____       | _____       |
| External Revenue                               | _____       | <u>(37,500)</u> | <u>(112,500)</u> | _____       | _____       |
| Program Income (County)                        | _____       | _____           | _____            | _____       | _____       |
| In-Kind Match (County)                         | _____       | _____           | _____            | _____       | _____       |
| <b>NET FISCAL IMPACT</b>                       | <u>0</u>    | <u>0</u>        | <u>0</u>         | _____       | _____       |
| <b># ADDITIONAL FTS POSITIONS (Cumulative)</b> | _____       | _____           | _____            | _____       | _____       |

Is Item Included In Current Budget: Yes X No \_\_\_\_\_  
 Budget Account No.: Fund 0001 Dept. 148 Unit 1351 Obj. 3401  
 Program Code: HC11 Program Period: GY07

Revenue: 0001-148-1351-3469

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**  
*State Funds*

Departmental Fiscal Review: *sewitt*

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Dev. and Control Comments:**

*Elizabeth Blaise* 8/1/07  
 OFMB  
 7/27/07  
 7/31/07  
 7/25/07  
 7/24/07  
*John Webster for* 15 8/2/07  
 Contract Dev. and Control

**B. Legal Sufficiency:**

This item complies with current County policies.

*J. P. B.* 8/3/07  
 Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_  
 Department Director

This summary is not to be used as a basis for payment.