



**II. FISCAL IMPACT ANALYSIS**

**1. FIVE YEAR SUMMARY OF FISCAL IMPACT: No cash match required**

Fiscal years	2017	2018	2019	2020	2021
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-kind Match (County)	_____	_____	_____	_____	_____
<b>NET FISCAL IMPACT</b>	_____	_____	_____	_____	_____
No. additional FTE Positions (Cumulative)	_____	_____	_____	_____	_____

Is item included in current Budget? Yes \_\_\_\_\_ No \_\_\_\_\_

Budget Account No.: Fund \_\_\_\_\_ Agency \_\_\_\_\_ Org. \_\_\_\_\_ Object \_\_\_\_\_

Reporting Category \_\_\_\_\_

**2. RECOMMENDED SOURCES OF FUNDS/SUMMARY OF FISCAL IMPACT:**

**3. DEPARTMENTAL FISCAL REVIEW:** \_\_\_\_\_

**III. REVIEW COMMENTS**

**1. OFMB FISCAL AND/OR CONTRACT DEV. AND CONTROL COMMENTS:**

\_\_\_\_\_  
OFMB

\_\_\_\_\_  
Contract Dev. and Control

**2. LEGAL SUFFICIENCY:**

\_\_\_\_\_  
Assistant County Attorney

**3. OTHER DEPARTMENT REVIEW:**

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