City of Dallas Fiscal Impact Form

A fiscal impact form is required for each item scheduled for City Council action regardless of the subject.

Agenda	Date:						
May 13	3, 2020						
Department:							
Conver (CCT)	ntion and	Event Serv	vices				
	File Numb	<u>per:</u>					
20-505							
<u>Cost Cor</u>	nsideratio	n Type:	□ No Cos	t Considerat	ion 🛛 Cost Con	sideration	
			🗆 Cost Co	onsideration	to Others 🛛 Fu	ture Cost Consi	deration
			🗆 Grant	🗆 Revenu	e 🛛 Revenue Fo	oregone	
						C	
General	Fund Con Summary	itingency?	□ Yes □	No 🛛 N/A	perating		egory)
					Add FY	Add FY	Future Year(s)
Fund	Dept	Unit	Project	Object /RSRC	This Item (Current Year)	Future Year	
0082	ССТ	W295	FHALL78 22	3210	593,000	0	0
				Total	\$593,000	\$0	\$0
		ract ID nu number o	mber or rec r N/A)	luisition	CCT-2020-00012	2189	

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Position Detail

Position(s) Authorized? \Box Yes \Box No \boxtimes N/A

Position Summary (Insert rows if necessary)

		Add FY	Add FY	Future Year(s)
Job Title (Position Adjustment	Salary/Benefits	Future	Future	
Form required)		Year	Year	

Capital Project Detail

Capital Summary (Insert rows if necessary)

Description	Fund Name or Fund	Add FY	Add FY	Future Year(s)
	Category			
Construction services for the repair of the two structural trusses above the F Exhibit Hall Roof at KBHCCD	0082 - Convention Center Construction	N/A	N/A	N/A

Operating and Maintenance Detail

Impact on Operating and Maintenance?
Yes No N/A

Future Operating and Maintenance Impact (Insert rows if necessary)

Description of Impact	Add FY	Add FY	Future Year(s)
N/A	Future Year	Future Year	

Other Detail

Other Summary (Insert rows if necessary)

Description (Use this section to describe fiscal	Add FY	Add FY	Future Year(s)
impacts not listed above)			
N/A	Future Year	Future Year	

Form Completed By:

· · · · · · · · · · · · · · · · · · ·			
Name	Phone Number		
La Toya Jemerson	939-2243		

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Revision Date: November 15, 2019