

GENERAL FACT SHEET

BILL NUMBER

BRIEF TITLE

APPROVAL DEADLINE

REASON

DETAILS

POSITIONS/RECOMMENDATIONS

	Sponsor	
	Program Departments, or Groups Affected	Workforce Investment
	Applicants/ Proponents	Applicant City Department Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommendations	" For " Against Reason Against
	Board or Commission Recommendation	BY " For " Against " No Action Taken " For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	" Pass " Pass (As Amended) " Council Sub. " Without Recommendation " Hold " Do not Pass

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	" NO " YES _____ _____ _____
	OPERATIONAL IMPACT ASSESSMENT	_____ _____ _____
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ _____ COST of this Ordinance/Resolution \$ _____
		RELATED annual operating Costs \$ _____
		INCREASE REVENUE EXPECTED/YEAR \$ _____
SOURCE OF FUNDS	CITY [Approximately]	
	_____ \$ _____	_____ %
	_____ \$ _____	_____ %
	_____ \$ _____	_____ %
	NON CITY [Approximately]	
	_____ \$ _____	_____ %
	_____ \$ _____	_____ %
BENEFIT COST		
" Front Foot		Average Assessment
" Square Foot	\$ _____	\$ _____

APPLICABLE DATES:

FACT SHEET PREPARED BY:

REVIEW BY:

REFERENCE NUMBER