

GENERAL FACT SHEET

07-121

BILL NUMBER

BRIEF TITLE	APPROVAL DEADLINE	REASON
<p><u>Amending Lincoln</u> <u>Municipal Code</u></p>		

DETAILS

POSITIONS/RECOMMENDATIONS

<p>Request for an ordinance amending the following section of the Lincoln Municipal Code:</p> <p>Section 2.76.380 - Sick Leave with Pay.</p>	Sponsor	Personnel Department
	Program Departments, or Groups Affected	All City Departments
<p>Discussion (Including Relationship to other Council Actions)</p>	Applicants/ Proponents	<p>Applicant</p> <p>City Department</p> <p>Other</p>
	Opponents	<p>Groups or Individuals</p> <p>Basis of Opposition</p>
	Staff Recommendations	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	<p>BY</p> <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
<p>CITY COUNCIL ACTIONS (For Council Use Only)</p>	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass	

DETAILS

POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> 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		Average Assessment
<input type="checkbox"/> Front Foot		\$ _____
<input type="checkbox"/> Square Foot		\$ _____

APPLICABLE DATES: July 23, 2007

FACT SHEET PREPARED BY: Don Taute

REVIEW BY:

REFERENCE NUMBER