

GENERAL FACT SHEET

11R-102

BILL NUMBER

BRIEF TITLE
Audit Services

APPROVAL DEADLINE

REASON
Required by City Charter

DETAILS

POSITIONS/RECOMMENDATIONS

<p>Resolution to provide audit services to the City of Lincoln for the fiscal years ending August 31, 2011, 2012, 2013, and 2014.</p> <p>We are exercising the option to renew our agreement with BKD for four more years per the contract approved by Resolution A-84467 dated on 8/1/07.</p> <p>The new fee schedule is attached.</p>	Sponsor	Don Herz, Finance Director
	Program Departments, or Groups Affected	Finance Department
	Applicants/ Proponents	Applicant: Don Herz, Finance Director City Department: Finance Department Other:
	Opponents	Groups or Individuals: No Known opposition. Basis of Opposition:
<p>Discussion (Including Relationship to other Council Actions)</p>	Staff Recommendations	<input checked="" type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <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)
	CITY COUNCIL ACTIONS (For Council Use Only)	<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 checked="" 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	
		INCREASED REVENUE EXPECTED:	
	SOURCE OF FUNDS	CITY [Approximately]	
_____ \$ _____ %			
_____ \$ _____ %			
_____ \$ _____ %			
NON CITY [Approximately]			
_____ \$ _____ %			
		_____ \$ _____ %	
BENEFIT COST			
<input type="checkbox"/> Front Foot			
<input type="checkbox"/> Square Foot			
		Average Assessment \$ _____ \$	

APPLICABLE DATES:

FACT SHEET PREPARED BY: Peggy Tharnish, City Controller

REVIEW BY: Don Herz, Finance Director

REFERENCE NUMBER: