

**FINANCE & PERSONNEL COMMITTEE**  
**CONTINGENT FUND REQUEST INFORMATION FORM**

DEPT.: Employee Relations CONTACT PERSON & PHONE NO.: Edwin Reyes 286-2988

**A. REASON FOR REQUEST (Refer to File 921360 for definitions)**

CHECK ONE:

EMERGENCY CIRCUMSTANCES  
 OBLIGATORY CIRCUMSTANCES  
 FISCAL ADVANTAGE/COMPLIANCE WITH FISCAL MANAGEMENT PRINCIPALS

**B. SUPPORTING INFORMATION**

1. State the action requested, including the dollar amount and specific departmental accounts(s) to which the Contingent Fund appropriation would be made.

Transfer of \$31,411.00 from the 2001 Common Council Contingent Fund to the DER 2001 Tuition Benefit Special Purpose Account 006300-0001-1652-0420-S171.

2. State the purpose of the action requested which includes the program, service or activity to be supported by the funding, as well as the objective(s) to be accomplished.

This action is requested to complete the processing of tuition benefit reimbursements.

3. Describe the circumstances which prompt the request.

Reimbursement requests for Tuition Benefits exceeded the amount budgeted in the account of \$700,000 for 2001.

4. What are the consequences of not providing the program, service, or activity which is funded by this request?

The program is an employee benefit defined in labor contracts and by resolution, which does not provide us with this option.

5. Explain why funds authorized in the Budget are insufficient to provide for the program, service, or activity in question.

DER makes every effort to project the expense in this account based on prior year experience. In 2001, the amount employees requested for tuition benefit reimbursement exceeded the amount funded. It is difficult to anticipate the use of this benefit in any given year.

5a. Are there any unexpended funds in the departmental control account for which this appropriation is requested, that could be used to fund this request?

No other sources of funds are available.

5b. What are the consequences of using budgeted operating funds for this request?

There are no budgeted operating funds remaining to offset this expense.

6. State why funding was not included in the Budget.

The total amount funded in 2001 was \$700,000, a figure that was 95.5% accurate. The total amount claimed was \$729,711.00. The potential exposure in any one year is considerably greater than this amount if every employee eligible for the benefit were to make a claim.

7. Will the conditions prompting the request be limited to the current year, or will they continue into the following year?

The possibility that expenditures will exceed budgeted funding is always present since we cannot deny a legitimate tuition reimbursement claim.

8. Has your department made a similar Contingent Fund request in previous years?  YES  
 NO

\*If yes, what is the most recent year the request was made?

9. Will this funding be used to implement provisions of a collective bargaining agreement?  YES  NO

Only to the extent that this benefit is already defined in the labor contracts. It is not a new benefit.

10. Will the funding being requested provide a level of service authorized by the Budget?  YES  NO

\*If yes, why can't your department accomplish the authorized service level with the authorized funding level?

The service level authorized by the budget is solely a dollar amount level based on prior year's experience. The budget cannot set the number of employees that request tuition benefits as every employee is guaranteed a certain level of tuition benefits should they be inclined to use them.

11. Will the requested funding provide a level of service higher than that authorized by the Budget?  YES  
 NO

\*If yes, why is a higher service level necessary?

\*What is the estimated amount of additional service units to be provided if the entire Contingent Fund request is approved?

The budget is not set based on X number of employees requesting benefits, but rather on a more global anticipated dollar amount based on previous year's experience.

12. What performance measures and sub-measures are affected by this request, and what are the anticipated changes if the entire Contingent Fund request is approved?

The chartfield program measure used is 0420, Employee Development & Training. No anticipated changes are expected.

13. What reductions to performance measures are expected if the request is not approved?

None.

14. Is any grant funding associated with the program service, or activity pertaining to the request?  YES  
 NO

\*If yes, name the grant and current year amount.

15. Will the program, service, or activity affect any electronic data processing system?  YES  
 NO

**The following questions only apply to Contingent Fund requests which transfer appropriations into capital purpose accounts:**

16. Does this request transfer an appropriation into a capital purpose subaccount?  YES  
 NO

\*If yes, are similar projects planned and funding available in a capital purpose (parent) account for the current year?

17. Why is the project for which Contingent Funds are requested more important than other similar projects?

18. Does this request fund a project outside the normal order of planned projects of a kind which are funded through a capital purpose (parent) account for the current year?  YES  
 NO

\*If yes, what is the consequence of deferring the lowest priority planned project until next year?

19. Was this project included in the Department's Budget request?

NO

YES

\*If not, why not?

**If you have any questions about the completion of this form, you may call the  
Fiscal Research Supervisor at extension 2299.**

**C. THANK YOU FOR YOUR COOPERATION. PLEASE SEND COPIES OF YOUR RESPONSE TO:**

STAFF ASSISTANT, ROOM 205, CITY HALL (6 COPIES)  
SPECIAL ASSISTANT, FINANCE & PERSONNEL COMMITTEE, ROOM 205, CITY HALL (1 COPY)  
FISCAL RESEARCH SUPERVISOR, ROOM B-4, CITY HALL (2 COPIES)  
BUDGET & MANAGEMENT DIRECTOR, ROOM 307, CITY HALL (2 COPIES)