

# FINANCE & PERSONNEL COMMITTEE CONTINGENT FUND REQUEST INFORMATION FORM

DEPT.: Comptroller CONTACT PERSON & PHONE NO.:- B. LaFlex, x2308

**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 account(s) to which the Contingent Fund appropriation would be made.

*Transfer appropriations from Contingent Fund to non-departmental Special Purpose Account – FIREMEN’S RELIEF FUND (S-133) in the amount of \$21,919.26*

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.

*The purpose of this action is to provide additional appropriations to meet Charter Obligations to pay 1/8 of the City’s portion of fire insurance premiums received from the State to the Firemen’s Relief Association.*

3. Describe the circumstances which prompt the request.

*Payment to Firemen’s Relief Association can not be processed due to insufficient appropriations.*

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

*City would be in non-compliance with Charter obligations.*

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

*Budget was based on an estimated revenue. Actual revenue received is greater than anticipated.*

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. This is a special purpose account (non-departmental)

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

Not Applicable.

6. State why funding was not included in the Budget

Funding was included in the amount of \$ 90,000.00

Payment obligation 111,919.26

Additional Funds Required \$ 21,919.26

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

Current year only

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? 2003

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9. Will this funding be used to implement provisions of a collective bargaining agreement?

YES

NO

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?

Not Applicable. This is a non-departmental special purpose account.

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?

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

*Not Applicable – Special Purpose Account*

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

*Not Applicable – Special Purpose Account*

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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.

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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?

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

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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?

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

YES

NO

\*If not, why not?

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**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  
FISCAL RESEARCH SUPERVISOR, ROOM B-4, CITY HALL (2 COPIES)  
BUDGET & MANAGEMENT DIRECTOR, ROOM 307, CITY HALL (2 COPIES)

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