

Fiscal Impact Statement

Indicate the **Total Fiscal Impact** of the action requested, including personnel, operating, and capital costs. Indicate costs for the current fiscal year and annualized costs. Include all related costs necessary to place the asset in service.

Description: MBE Division will be receiving a \$225,000 grant from Orange County through the CARES Act Funding. Funds will be subawarded to Central Florida Urban League. The City of Orlando will prepay \$225,000 to CFUL and will be reimbursed from Orange County when the work has been completed.

Expenses

Will the action be funded from the Department's current year budget? ☐ Yes ☒ No

If No, please identify how this action will be funded, including any proposed Budget Resolution Committee (BRC) action(s). The grant will be recognized in the budget at a future BRC meeting

	Current Fiscal Year Cost Estimate	Estimated Annualized Cost Thereafter
Personnel	\$0	\$0
Operating/Capital	\$225,000	\$0
Total Amount	\$225,000	\$0

Comments (optional): Funds must be expended by 12/30/20.

Revenues

What is the source of any revenue and the estimated amount? Orange County CARES ACT Funds Amount \$225,000

Is this recurring revenue? ☐ Yes ☒ No

Comments (optional):

Funding

Expenses/Revenues will be recorded to:

	Source #1	Source #2	Source #3
Fund	<u>1130 F Grant Fund</u>	<u>(enter text here)</u>	<u>(enter text here)</u>
Department /Division	<u>EXO/ MBE Division</u>	<u>(enter text here)</u>	<u>(enter text here)</u>
Cost Center/Project/Grant	<u>MBE0001 G</u>	<u>(enter text here)</u>	<u>(enter text here)</u>
Total Amount	225,000		\$0