

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.

<u>Description:</u> Up to \$25,000 in funding for Dave's House Inc. to conduct a feasibility study and develop a business plan to ensure critical mental health services are in place during this time of great need during the COVID pandemic and well beyond. This study will focus on the Pathways Drop-In Center (PDIC) which is at risk for permanent closure without immediate intervention.

Expenses

Will the action be funded from the Department's current year budget? \boxtimes Yes \square No

If No, please identify how this action will be funded, including any proposed Budget Resolution Committee (BRC) action(s). (enter text here)

Estimated Annualized

	Cost Estimate	Cost Thereafter	
Personnel	\$ <u>0</u>	\$0	
Operating/Capital	\$25,000	\$0	
Total Amount	\$25,000	\$0	

Current Fiscal Voor

Comments (optional): (enter text here)

Revenues

What is the source of any revenue and the estimated amount? (enter text here) Amount \$0

Is this recurring revenue? ☐ Yes ☐ No

Comments (optional): (enter text here)

Funding

Expenses/Revenues will be recorded to:

	Source #1	Source #2	Source #3
Fund	<u>0005 F</u>	(enter text here)	(enter text here)
Department /Division	FIN/FIN	(enter text here)	(enter text here)
Cost Center/Project/Grant	FIN0001 P	(enter text here)	(enter text here)
Total Amount	\$25,000	\$ <u>0</u>	\$ <u>0</u>