## FISCAL IMPACT STATEMENT

**DATE:** August 4, 2025

FROM (Dept.): Bureau of Purchases, Department of Finance

CONTACT: Malinda M. Figueroa, Purchasing Agent PHONE 203-946-8201

## SUBMISSION ITEM (Title of Legislation):

ORDER OF THE NEW HAVEN BOARD OF ALDERS APPROVING A 60 MONTH EQUIPMENT LEASE AND SERVICES AGREEMENT FOR PRINT MANAGEMENT PROGRAM SERVICES FOR THE CITY OF NEW HAVEN, INCLUDING ITS BOARD OF EDUCATION

**List Cost:** 

Describe in as much detail as possible both personnel and non-personnel costs; general, capital or special funds; and source of funds currently budgeted for this purpose.

T. T.	GENERAL FUND	SPECIAL FUNDS	BOND FUNDING	CAPITAL/LINE ITEM/DEPT/ACT/OBJ CODE
A. Personnel	\$0	\$0	\$0	
1. Initial start up	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
2. One-time	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
3. Annual	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
B. Non-personnel	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
1. Initial start up	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
2. One-time	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	
3. Annual	\$5-6M (spread over	\$0	\$0	

spread over five years)

List Revenues: Will this item result in any revenues for the City? If Yes, please list amount and

type.

NO X YES

- 1. One-time
- 2. Annual

**Other Comments:**