## FISCAL IMPACT STATEMENT

DATE:		Wednesday, March 01, 2022					
FROM (Dept.)	_	Mayors Office					
CONTACT:		Justin Elicker / Michael Gormany F			PHONE:	203-946-6413	
SUBMISSION	N ITEM (	Title of Legislati	ion):				
APPROPRIAT	ING OR	DINANCE #1 A	N ORDINAI	NCE MAKI	NG APPRO	PRIATIONS FOR	
<u>OPERATING</u>	CITY OF	NEW HAVEN D	DEPARTMEN	TS FOR TH	E FISCAL Y	EAR JULY 1, 2023	
<u>THROUGH JU</u>	UNE 30, 2	<u>2024</u>					
List Cost:		in as much detail capital or special fu	-	-	-		
		GENERAL	CDECIAI	BOND		AL/LINE DEPT/ACT/OBJ	
A. Personnel		GENERAL	SPECIAL	DUND	CODE		
1. Initial sta	art up						
2. One-tim	e						
3. Annual		259,155,205					
B. Non-person	nnel						
1. Initial sta	art up						
2. One-tim	e						
3. Annual		403,565,404					
List Revenues	will the type.	is item result in an	y revenues for	the City? If	Yes, please li	st amount and	
NO YE	-						
1. One-ti	me						
2. Annua	1	(FY 2023- 2024 Mayors Proposed Budget					