



Legislation Text

File #: 23-2767, Version: 1

**Department:** Purchasing

**Department Head/Elected Official:** DeWight Dopslauf

**Regular or Supplemental RCA:** Regular RCA

**Type of Request:** Transmittal

**Project ID (if applicable):** 230016

**Vendor/Entity Legal Name (if applicable):** N/A

**MWDBE Contracted Goal (if applicable):** N/A

**MWDBE Current Participation (if applicable):** N/A

**Justification for 0% MWDBE Participation Goal:** N/A - Goal not applicable to request

**Request Summary (Agenda Caption):**

Transmittal by the Office of the Purchasing Agent of a project scheduled for advertisement for fitness instructors and related services for Harris County (230016).

**Background and Discussion:** N/A

**Expected Impact:** N/A

**Alternative Options:** N/A

**Alignment with Goal(s):** N/A

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment
- Governance and Customer Service

**Prior Court Action (if any):** N/A

Date	Agenda Item #	Action Taken

**Location:**

Address (if applicable): N/A

Precinct(s): Choose an item.

<b>Fiscal and Personnel Summary</b>			
Service Name			
	<b>FY 23</b>	<b>FY 24</b>	<b>Next 3 FYs</b>
<b>Incremental Expenditures (do NOT write values in thousands or millions)</b>			
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
<b>Total Incremental Expenditures</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Funding Sources (do NOT write values in thousands or millions)</b>			
<b>Existing Budget</b>			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
<b>Total Current Budget</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Additional Budget Requested</b>			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
<b>Total Additional Budget Requested</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Total Funding Sources</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>
<b>Personnel (Fill out section only if requesting new PCNs)</b>			
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
<b>Total Personnel</b>	<b>-</b>	<b>-</b>	<b>-</b>

**Anticipated Court Date:** N/A

**Anticipated Implementation Date (if different from Court date):** N/A

**Emergency/Disaster Recovery Note:** Choose an item.

**Contact(s) name, title, department:** N/A

**Attachments (if applicable):** Letter