

Department Budget Submission Checklist

To be completed by: All departments.

Instructions: Submit this completed cover sheet with your budget submission and ensure all applicable forms below are included with your submission.

Department Name: _____

- Summary of Major Changes:** Completed "Form 1A: Summary of Major Changes" explaining major changes submitted in department's budget proposal.
 - Proposed Efficiency/Reduction Savings Loaded in BPMS via Target Reports:** Printed report from GFS Target, reports #15.40.001 & 15.40.002
 - Department Budget Summary:** Submission includes copy of report # 15.50.012.
- Revenue Report:** Completed "Form 2A: Revenue Report."
- Fees & Fines:** Completed "Form 2B: Fees & Fines."
- Cost Recovery:** Completed "Form 2C: Cost Recovery."
- Expenditure Changes:** Completed "Form 3A: Expenditure Changes."
- Position Changes:** Completed "Form 3B: Position Changes."
- Equipment & Fleet Requests:** Completed "Form 4A: All Equipment Funded in prior budget"; "Form 4B: New General Fund Equipment"; "Form 4C: Fleet".
- Minimum Compensation Ordinance:** The effects of the MCO in contracting have been considered as part of the budget submission.
- Proposition J Description, Summary, City Cost, Contract Cost:** Required for all existing or new Prop Js
- Interdepartmental Services Balancing:** Included Excel download of 15.20.012 3.b.2 IDS balancing report
- Organizational Charts:** Submission contains updated position-level organizational charts for your department, with indication if the position is filled (F) or vacant (V). Organizational charts also reflect any proposed position changes.
- New Legislation:**
 - Included draft legislation that department would like to submit with the budget; or,
 - Draft legislation in progress at this time. A description of the proposed changes is included in the "Summary of Major Changes" table. A draft will be provided to the Mayor's Office by
- Other Requests:** Submitted requests for the following items (through separate forms), if applicable:
 - COIT
 - Capital

For Chief Financial Officer/Budget Manager:

I have reviewed the attached budget submission and affirm that all applicable forms checked off above are either included in this submission or have been submitted through the proper online forums.

Full Name: _____

Signature: _____

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(enable content and macros)

BUDGET FORM 1A: Summary of Major Changes FY 2021-22 and FY 2022-23

DEPT NAME HERE

Major Changes	Department Response
<p>1. SUMMARY. What major changes is the department proposing? Clearly describe each change, including the fiscal impact of the proposal, and how the department proposes to fund each significant change (i.e. reprioritization of existing funds, grants, or other new revenues). Include detail related to position changes in Position section below.</p>	<p>The 2021-22 budget for the county's indigent defense program remains at the same levels as 2019-20. The Superior Court of California, San Francisco, which manages the program on behalf of the City and County of San Francisco anticipates that criminal hearings and trials will resume at the pre-pandemic levels in 2021-22. There is currently a backlog building in criminal trial requests and we expect court operations to be normalized beginning July 1, 2021. Criminal defense is as constitutionally mandated requirement so spending request is status quo.</p>
<p>2. EXPENDITURES. What expenditure changes did the department submit from the base budget? Please differentiate between General Fund and non-General Fund.</p> <p>(This should match an Audit Trail, as shown in form 3A Expenditure Changes).</p>	<p>No changes made to county program budgets.</p>
<p>3. REVENUE. What revenue changes did the department submit from the base budget? Please differentiate between General Fund and non-General Fund.</p> <p>(This should match an Audit Trail, as shown in form 2A Revenue Report).</p>	<p>Not Applicable. The Superior Court of California, San Francisco is a state funded agency.</p>
<p>4. TARGET. How did the department meet its target? What are the programmatic, operational, or staffing impacts of this proposed reduction?</p>	<p>Not Applicable</p>
<p>5. POSITIONS. Did the department include changes to positions or special classes? What is the overall General Fund impact? Highlight any changes related to major changes/initiatives as noted in the Summary section.</p> <p>(Reminder: No increases to General Fund supported FTE should be loaded in the system. Include reference numbers for all position changes).</p>	<p>Not Applicable</p>

**BUDGET FORM 1A: Summary of Major Changes
FY 2021-22 and FY 2022-23**

DEPT NAME HERE

<p>6. INTERDEPARTMENTAL SERVICES (IDS). Is the department proposing any discretionary changes to IDS workorders (excluding those that are centrally loaded by the Mayor's Office)? If so, describe the changes, including the change amount, the corresponding requesting/performing department, and whether those departments are in agreement with the change.</p> <p>(Reminder: A new IDS balancing report (15.20.012 3.b.2) is available in CFO Dashboards > Enterprise Planning in BI).</p>	<p>Not Applicable</p>
<p>7. LEGISLATION. Is the department seeking to submit any legislation with the budget? Does the department's budget assume any revenues/expenditures that require a legislative change?</p> <p>If so, please submit drafts of legislation along with the budget submission. Or provide a summary of desired legislation and an expected date of submission, if still in progress.</p>	<p>Not Applicable</p>
<p>8. PROP J: Identify existing Prop J Analyses that will continue, and if the department's budget proposes any NEW contracting out of work previously done by City workers.</p>	<p>Not Applicable</p>
<p>9. TRANSFER OF FUNCTION: Is the department requesting any Transfer of Functions of positions between departments? If so, please explain.</p>	<p>Not Applicable</p>
<p>10. INTERIM EXCEPTIONS: Is the department requesting any interim exceptions (new positions that are 1.0 FTE rather than 0.77)? If so, for what reason are the request being made?</p>	<p>Not Applicable</p>
<p>11. FELLOWSHIP PROGRAMS: Did the department apply to any citywide fellowship programs, including San Francisco Fellows, the Fish Fellowship, or the 1249 HR Analyst Trainee Program?</p>	<p>Not Applicable</p>

*Only applicable for departments with General Fund Targets

Please run Oracle Business Intelligence Reports 15.40.001 & 15.40.002 with budget submission to reflect Efficiency/Reduction Target proposals

[GFS Target](#) [Basic](#) [Positions](#) [FTE Cost Report](#) [Balancing](#) [Mayor's Budget Book](#)

- * Select a Report
- 15.40.001 GFS Ta
 - 15.40.002 GFS Ta

, aka "Target Reports" and include
al is loaded in the budget system.

[Annual Appropriation](#) [Labor Negotiation](#) [F](#)

[Target & Non GFS Balance - Dept Detail](#)
[Target & Non-GFS Balance - Dept Summary](#)

Please run Oracle Business Intelligence Report 15.50.012 Department Total Budget Historical Comparison and include with budget submission.

balancing **Mayor's Budget Book** Annual Appropriation Labor Negotiation Fixed 2nd Y

* Select a Report

- 15.50.001 Sources and Uses of Funds Excluding Fund Transfers
- 15.50.005 Uses by Service Area, Department and Division
- 15.50.007 Uses by Service Area and Department
- 15.50.008 Uses by Department
- 15.50.010 Authorized Positions, Grand Recap Detail
- 15.50.011 Funded Positions, Grand Recap by Major Service Area and Department Title
- 15.50.012 Department Total Budget Historical Comparison
- 15.50.014 Mayors Proposed Capital Projects and Facilities Maintenance
- 15.50.015 Major Fund Recap
- 15.50.016 Consolidated Schedule of Sources and Uses

Budget Historical Comparison

Budget Form 2B: Schedule of Licenses, Permits, Fines & DEPARTMENT: _____

Inflation Factor for FY 2020-21 Fee Auto Increase as per Code Section **
Inflation Factor for FY 2021-22 Fee Auto Increase as per Code Section **

CPI will be updated in January 2020. Call Controller's Budget Office to confirm C

TABLE 1 - MODIFIED AND NEW FEES

Item	Fee Status M/N	Description	Code Authorization	Auto CPI Adjust Yes/No	Account Code	Account Title
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

TABLE 2 - CONTINUING FEES

Item	Fee Status	Description	Code Authorization	Auto CPI Adjust Yes/No	Account Code	Account Title
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						

- Fee Status:**
- C Continuing
 - M Modified
 - N New
 - D Discontinued

Note:
 ** If Auto CPI adjustment = Yes, FY 2020-21 and FY 2021-22 Fee will be automatical

If Auto CPI adjustment = No, FY 2020-21 and FY 2021-22 Fee will remain the sam

Service Charges

PI before submitting.

Fund Code	Fund Title	Authority Code	Authority Title	Department Code	Department Title	Project Code

Fund Code	Fund Title	Authority Code	Authority Title	Department Code	Department Title	Project Code

Illy generated based on the inflation factor determined by the Controller.

Budget Form 2B: Fee Cost Recovery

PLEASE FILL OUT HIGHLIGHTED AREAS AND PROVIDE A DETAILED DESCRIPTION OF THE SERVICE

DEPARTMENT:

Fee Name:	Fee XYZ	Department Providing Service:	Department ABC
		Fee Administrator:	Jane Smart
		Code Authorization/ Proposed Fee Ordinance/File No:	Admin Code Section X.X
PS Department of Proposed Revenue:	XXXXXX	Proposed Fee (FY 2021-22):	\$ 44.00 (1)
PS Fund of Proposed Revenue:	XXXXX	Proposed Fee (FY 2020-21):	\$ 42.00 (2)
PS Authority of Proposed Revenue:	XXXXX	Current Fee (FY 2019-20):	\$ 40.00 (3)
PS Project of Proposed Revenue:	XXXXXXXXX		
PS Activity of Proposed Revenue:	XXXX		
PS Account of Proposed Revenue:	XXXXXX		
Fee Status (New/Modified):	New		
Fee Status (New/Modified):	New		

Detailed Service Description:

Please provide description of service

Proposed Fee (FY 2021-22):	\$	44.00	FY 2021-22 Proposed Fee Increase/Decrease:	\$	2.00
Proposed Fee (FY 2020-21):	\$	42.00	FY 2021-22 % Proposed Fee Change from FY 2020-21 Fee:		4.76%
Current Fee (FY 2019-20):	\$	40.00	FY 2020-21 Proposed Fee Increase/Decrease:	\$	2.00
			FY 2020-21 % Proposed Fee Change from Current Fee:		5.00%

Fee Prior to Current:	\$	38.00	Fiscal Year of Prior Fee Change:	2010-11
Current Fee Increase/Decrease from Prior Fee:	\$	2.00	% Current Fee Change from Prior Fee:	5.26%

FY2020-21				
ESTIMATED REVENUE DERIVED FROM SERVICE		ESTIMATED COSTS TO PROVIDE SERVICE - USE WORKSHEET 20-21, BELOW		
A Quantity Estimated (# of Units of Service Provided)	5,000	D Direct Costs Productive Labor & Benefits (0.75 of 2020-21 Salary & MFB) Leave & Non-Productive Time (0.25 of FY 2020-21 Salary & MFB) Space Rental Equivalent Materials & Supplies Other (Please Describe on Worksheet)	FY 2020-21 Estimated Cost % of Total \$ 313,702 59.25% \$ 104,567 19.75% \$ 15,000 2.83% \$ - 0.00% \$ - 0.00%	
	B Fee per Unit (Proposed) \$ 42			E Indirect Costs Departmental Overhead 20.00% \$ 83,654 15.80% Central Services Overhead 3.00% \$ 12,548 2.37%
C FY 2020-21 Revenue Budgeted (A x B) \$ 210,000		F FY 2020-21 Direct & Indirect Costs \$ 529,471 100.00%		
G FY 2020-21 Revenue Recovery Rate (C/F) 39.66%			\$ 210,000.00	
H Required Fee For 100% Cost Recovery (F/A) \$ 105.89			\$ 200,000.00	
I Over (+) or Under (-) 100% Cost Recovery (B-H) (\$63.89)			\$ 10,000.00	
J FY 2020-21 Estimated Revenue [(2) x A]:				
K FY 2019-20 Estimated Revenue [(3) x A]:				
L FY 2010-21 Estimated Revenue Increase/Decrease Based on Proposed Fee [J - K]:				

FY2021-22				
ESTIMATED REVENUE DERIVED FROM SERVICE		ESTIMATED COSTS TO PROVIDE SERVICE - USE WORKSHEET 21-22, BELOW		
A Quantity Estimated (# of Units of Service Provided)	5,000	D Direct Costs Productive Labor & Benefits (0.75 of 2021-22 Salary & MFB) Leave & Non-Productive Time (0.25 of FY 2021-22 Salary & MFB) Space Rental Equivalent Materials & Supplies Other (Please Describe on Worksheet)	FY 2021-22 Estimated Cost % of Total \$ - #DIV/0! \$ - #DIV/0! \$ - #DIV/0! \$ - #DIV/0! \$ - 0.00%	
	B Fee per Unit (Proposed) \$ 44			E Indirect Costs Departmental Overhead 0.00% \$ - #DIV/0! Central Services Overhead 3.00% \$ - #DIV/0!
C FY 2021-22 Revenue Budgeted (A x B) \$ 220,000		F FY 2021-22 Direct & Indirect Costs \$ - #DIV/0!		
G FY 2021-22 Revenue Recovery Rate (C/F): #DIV/0!			\$ 220,000.00	
H Required Fee For 100% Cost Recovery (F/A): \$ -			\$ 210,000.00	
I Over (+) or Under (-) 100% Cost Recovery (B-H): \$44.00			\$ 10,000.00	
J FY 2021-22 Estimated Revenue [(1) x A]:				
K FY 2020-21 Estimated Revenue [(2) x A]:				
L FY 2021-22 Estimated Revenue Increase/Decrease Based on Proposed Fee [J - K]:				

Estimated Costs Worksheet FY 2020-21

Direct Costs

Labor and Benefits

Please use the worksheet below to list all job classes necessary to support the services provided. Add rows if necessary.
 Please also provide a description of the work and the estimated hours for each job class required to perform each unit of service

JobClasses	Job Class Title	Description of Work	Hours per Unit of Service
1234	Test	Processes Payment	1.20

Please fill out the Salary and Benefits Amount per FTE column

Job Class	Job Class Title	Salary and Benefits Amount per FTE	Hours Worked	Hourly Rate	Salary and Benefits Amount
1234	Test	\$145,000.00	6000.0	\$69.71	\$418,269.23
0	0		0.0	\$0.00	\$0.00
0	0		0.0	\$0.00	\$0.00
0	0		0.0	\$0.00	\$0.00
Total:					\$418,269.23

Space Rental Equivalent

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Cost	Description
1	15000 Payment facility
2	
3	
Total:	\$15,000.00

Materials and Supplies

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Cost	Description
1	
2	
3	
Total:	\$0.00

Other Costs

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Cost	Description
1	
2	
3	
Total:	\$0.00

Indirect Costs

Rate	Source
20.0%	Please provide supporting documentation for how Departmental overhead rate was derived.

Estimated Costs Worksheet FY 2021-22

Direct Costs

Labor and Benefits

Please use the worksheet below to list all job classes necessary to support the services provided. Add rows if necessary.

Please also provide a description of the work and the estimated hours for each job class required to perform each unit of service

JobClasses	Job Class Title	Description of Work	Hours per Unit of Service

Please fill out the Salary and Benefits Amount per FTE column

Job Class	Job Class Title	Salary and Benefits Amount per FTE	Hours Worked	Hourly Rate	Salary and Benefits Amount
0	0		0.0	\$0.00	\$0.00
0	0		0.0	\$0.00	\$0.00
0	0		0.0	\$0.00	\$0.00
0	0		0.0	\$0.00	\$0.00
Total:					\$0.00

Space Rental Equivalent

Cost

- 1
- 2
- 3

Total:

\$0.00

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Description

Materials and Supplies

Cost

- 1
- 2
- 3

Total:

\$0.00

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Description

Other Costs

Cost

- 1
- 2
- 3

Total:

\$0.00

Please list and describe the costs of space/facility rental necessary to support the services provided. Add rows as necessary. Ensure that the 'Total' includes the sum of all rows with cost information.

Description

Indirect Costs

Rate	Source

Please provide supporting documentation for how Departmental overhead rate was derived.

If replacement vehicle, information on

Dept Units	Dept Amount	Justification of Need	VEHICLE TO BE REPLACED - Asset # (number decaled on vehicle's doors)	VEHICLE TO BE REPLACED - License Plate #

are two-letter code for department, next
ast to are sequencing numbers (i.e. 01, 02)

Total Cost w/ Tax (formula)
\$ -
\$ -
\$ -
\$ -
\$ -
\$ -
\$ -
\$ -
\$ -

Please submit the following request at the given links, and refer to Budget Instructions document for more information.

Technology project proposals: <https://sfgov1.sharepoint.com/sites/ADM-COIT/Pages/ProjectRequests.aspx>
Capital budget requests: <http://www.onesfcprs.org/>

Please complete all shaded sections in this worksheet, as is required by San Francisco Administrative Code Section 2.15:

Department: Insert name of Department and Division here
Contract: Insert name of the contract's main purpose here

SEC. 2.15 SUPPLEMENTAL REPORTS REQUIRED

Any officer, department or agency seeking Board approval of a contract for personal services under Charter Section 10.104(15) shall submit a supplemental report to the Board of Supervisors in connection with the contract and the Controller's certification.

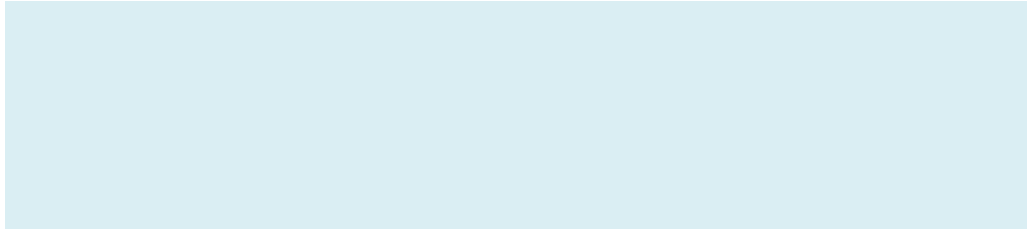
The report shall summarize the essential terms of the proposed contract and address the following subjects:

1. The department's basis for proposing the Prop J certification;

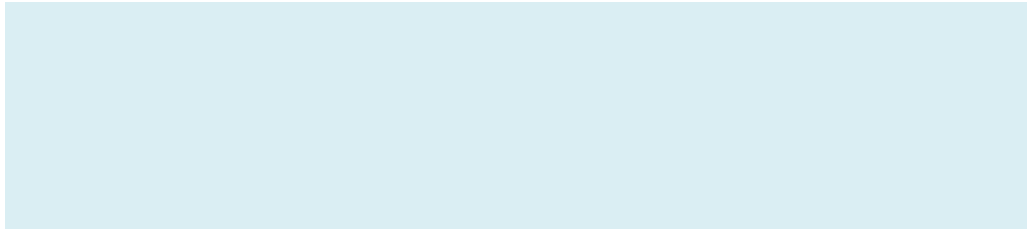
2. The impact, if any, the contract will have on the provision of services covered by the contract, including a comparison of specific levels of service, in measurable units where applicable, between the current level of service and those proposed under the contract. For contract renewals, a comparison shall be provided between the level of service in the most recent year the service was provided by City employees and the most recent year the service was provided by the contractor;

3. The department's proposed or, for contract renewals, current oversight and reporting requirements for the services covered by the contract:

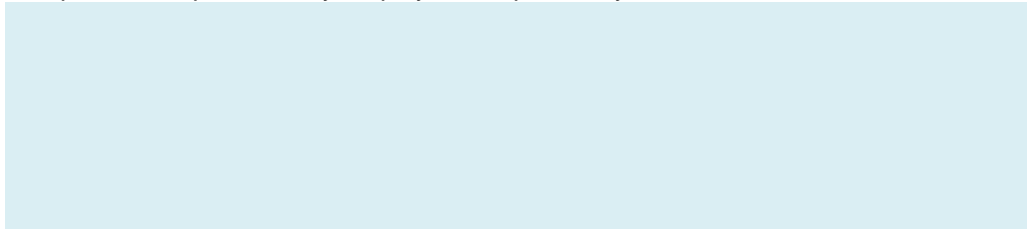
4. The contractor's proposed or, for contract renewals, current wages and benefits for employees covered under the contract, and the contractor's current labor agreements for employees providing the services covered by the contract:

A large rectangular area that has been redacted with a light blue background, covering the response to question 4.

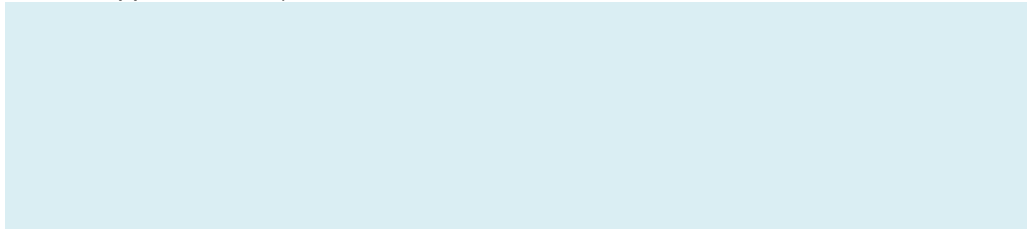
5. The department's proposed or, for contract renewals, current procedures for ensuring the contractor's ongoing compliance with all applicable contracting requirements, including Administrative Code Chapter 12P (the Minimum Compensation Ordinance), Chapter 12Q (the Health Care Accountability Ordinance); and Section 12B.1(b) (the Equal Benefits Ordinance);

A large rectangular area that has been redacted with a light blue background, covering the response to question 5.

6. The department's plan for City employees displaced by the contract; and,

A large rectangular area that has been redacted with a light blue background, covering the response to question 6.

7. A discussion, including timelines and cost estimates, of under what conditions the service could be provided in the future using City employees. (Added by Ord. 105-04, File No. 040594, App. 6/10/2004)

A large rectangular area that has been redacted with a light blue background, covering the response to question 7.

Name and job title of the person completing this questionnaire:

A horizontal rectangular area that has been redacted with a light blue background, covering the name and job title of the person completing the questionnaire.

PROP J ANALYSIS SUMMARY

Insert name of Department and Division here

Insert name of the contract's main purpose here

FISCAL YEAR 2020-21

City cost if services are not contracted out

		<i>low range</i>		<i>high range</i>	
Total Annual Salary	\$	-	\$	-	
Total Other Pay	\$	-	\$	-	
Total Fringe Benefits	\$	-	\$	-	
Additional City Costs	\$	-	\$	-	
	\$	-	\$	-	

City cost if services are contracted out

Contract Cost	\$	-	\$	-	
City Contract Monitoring	\$	-	\$	-	
	\$	-	\$	-	

City Savings from Contracting Out,

Savings/(Cost)	\$	-	\$	-	
----------------	----	---	----	---	--

#DIV/0!

#DIV/0!

[DEPARTMENT]

[PS DIVISION CODE + TITLE]

Insert name of the contract's main purpose here

COMPARATIVE COSTS OF CONTRACTING VS. IN-HOUSE SERVICES (1) (2)

FISCAL YEAR 2020-21

ESTIMATED CITY COSTS:

PROJECTED PERSONNEL COSTS

Job Class Title	Class	# of Full Time Equivalent Positions	Bi-Weekly Rate per FTE		Annual Cost	
			Low	High	Low	High
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
0	0.00				\$ -	\$ -
Holiday Pay (if applicable)	n/a	n/a				
Night / Shift Differential (if applicable)	n/a	n/a				
Overtime Pay (if applicable)	n/a	n/a				
Other Pay (if applicable)	n/a	n/a				
Total FTE			-			
			Total Salary Costs-->		\$ -	\$ -
			Total of Other Compensation-->		\$ -	\$ -

FRINGE BENEFITS

Job Class	\$ Amount		
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Benefits per FTE--Job Class #:	0	0	
Total Fringe Benefits			Low High
		\$ -	\$ -

ADDITIONAL CITY COSTS

Insert all additional costs, with a description, that the City would incur if providing the service. May include capital costs, materials & supplies, uniforms, technology, as is comparable to the contract components.	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
	\$ -	\$ -
Total Capital & Operating	\$ -	\$ -

COST COMPARISON SUMMARY

ESTIMATED TOTAL CITY COST	\$ -	\$ -
LESS: ESTIMATED TOTAL CONTRACT COST	\$ -	\$ -
ESTIMATED SAVINGS	\$ -	\$ -
% of Savings to City Cost	#DIV/0!	#DIV/0!

Comments/Assumptions:

1. FY XXXX would be/was the first year these services are/were contracted out.
 2. Salary levels reflect proposed salary rates effective July 1, 2018. Costs are represented as annual 12 month costs.
 3. Variable fringe benefits consist of Social Security, Medicare, employer retirement, employee retirement pick-up and long-term
 4. Fixed fringe benefits consist of health and dental rates plus an estimate of dependent coverage.
- <List any other comments or assumptions>

Contract Cost Details

	Low	High
Estimated Contract Cost	\$ -	\$ -
Estimated Monitoring Cost	\$ -	\$ -

Contract Cost Calculation:

Please show all calculations made to estimate contract cost. Describe assumptions and source of data above, and feel free to enter more rows as needed.

List of all contract components	Number of Units	Notes	Total Cost - low end est	Total Cost - high end est
TOTAL CONTRACT COST			\$ -	\$ -

1. List all assumptions made in calculating contract cost.

Include any private wage rates, population estimates, square footage estimates or other data used in calculating your contract cost. Please insert more lines as needed.

- 1)
- 2)
- 3)
- 4)

2. What is the source of data used to calculate the contract cost?

3. What year is your data from?

4. If contract cost is based on an RFP and before a contract has been approved, was the RFP for comparable services?

Contract Monitoring Costs:

Does/would contract require monitoring? If yes, fill out the details below. If not, explain why, as this would be unusual.

Salary:

Job Class	Job Class Title	# of FTEs <i>(can be partial; e.g. a half time employee would be 0.5 FTE)</i>	Biweekly Rate		Annual Salary Expense		Benefits p
			Low	High	Low	High	Low
					\$ -	\$ -	\$ -
					\$ -	\$ -	\$ -
					\$ -	\$ -	\$ -
					\$ -	\$ -	\$ -
TOTAL CONTRACT MONITORING COST					\$ -	\$ -	\$ -

Please Fill Out Blue Shaded Areas Only.

027-Airport Commission
 Safety and Security Services
 General Aviation Security Services
 COMPARATIVE COSTS OF CONTRACTING VS. IN-HOUSE SERVICES (1) (2)
 FISCAL YEAR 2020-21

ESTIMATED CITY COSTS:

Job Class Title		Class	# of Full Time Equivalent Positions	Bi-Weekly Rate per FTE		Annual Cost		
				Low	High	Low	High	
Security Guard	8202	26.00	\$ 1,846	\$ 2,243	\$ 1,257,331	\$ 1,528,162		
Building and Ground Patrol Officer	8207	5.00	2,243	2,727	293,878	357,295		
Airport Operations Supervisor	9220	0.05	3,706	4,504	4,855	5,900		
Manager III	0931	0.05	4,638	5,920	6,076	7,756		
0	0.00							
0	0.00							
0	0.00							
0	0.00							
0	0.00							
Holiday Pay (if applicable)	n/a	n/a						
Night / Shift Differential (if applicable)	n/a	n/a						
Overtime Pay (if applicable)	n/a	n/a						
Other Pay (if applicable)	n/a	n/a						
Total FTE			31.1					
						Total Salary Costs-->	\$ 1,562,139	\$ 1,899,113
						Total of Other Compensation-->	\$ -	\$ -

Salary and Benefits for Each Job Class from Enterprise Planning FTE Cost Report
 Complete this with the cost of 1.0 FTE; the actual FTE needs will be calculated in the Personnel and Fringe Benefit costs.

Year (BY, aka FY 20/21)	Job Class Number	Job Class Title	FTE	5010 Salary	5130 Benefits	Total Sal & Ben
FY 20/21	8202	Security Guard	26.00	\$ 58,775	\$ 33,587	\$ 2,401,419
FY 20/21	8207	Building and Ground Patrol Officer	5.00	\$ 71,459	\$ 35,055	\$ 532,572
FY 20/21	9220	Airport Operations Supervisor	0.05	\$ 118,010	\$ 47,672	\$ 8,284
FY 20/21	0931	Manager III	0.05	\$ 155,115	\$ 61,793	\$ 10,845
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -
						\$ -

Job Class		\$ Amount	Low	High
Benefits per FTE--Job Class #:	8202	33,587		
Benefits per FTE--Job Class #:	8207	35,055		
Benefits per FTE--Job Class #:	9220	47,672		
Benefits per FTE--Job Class #:	0931	61,793		
Benefits per FTE--Job Class #:	0	0		
Benefits per FTE--Job Class #:	0	0		
Benefits per FTE--Job Class #:	0	0		
Benefits per FTE--Job Class #:	0	0		
Benefits per FTE--Job Class #:	0	0		
Benefits per FTE--Job Class #:	0	0		
Total Fringe Benefits			\$ 955,894	\$ 1,054,007

ADDITIONAL CITY COSTS			
Insert all additional costs, with a description, that the City would incur if providing the service.		\$ -	\$ -
May include capital costs, materials & supplies, uniforms, technology, as is comparable to the contract components.		\$ -	\$ -
		\$ -	\$ -
Total Capital & Operating		\$ -	\$ -

COST COMPARISON SUMMARY			
ESTIMATED TOTAL CITY COST		\$ 2,518,033	\$ 2,953,120
LESS: ESTIMATED TOTAL CONTRACT COST		\$ 2,318,141	\$ 2,322,269
ESTIMATED SAVINGS		\$ 199,892	\$ 630,851
% of Savings to City Cost		8%	21%

Comments/Assumptions:
 1. FY 2007 was the first year these services were contracted out.
 2. Salary levels reflect proposed salary rates effective July 1, 2018. Costs are represented as annual 12 month costs.
 3. Variable fringe benefits consist of Social Security, Medicare, employer retirement, employee retirement pick-up and long-term disability, where applicable.
 4. Fixed fringe benefits consist of health and dental rates plus an estimate of dependent coverage.
 <List any other comments or assumptions>
 N/A

SF Financials - Chart of Accounts - New Request

		New Request	
Chart Fields		ID	Description
Fund			
Department			
Project			
Work Breakdown Structure (WBS)			
Activity			
Authority			
Agency Use			
Authority Roll Up			
Account			
Transfers In and Out (TRIO)			

Step	Review & Approval Routing
1	Requesting Department CFO
2	CON - Accounting Operations, for Policy Review & Reporting
3	CON - Budget & Analysis, for Budgetary Control & Planning
4	CON - Systems, for Technical Load and Mapping

SF People & Pay - Chart of Accounts - New Request

Combo Code (Fund+Department+Authority)		New Request	
ComboCode		ID	Description
Task Profile (for cost allocations)			
Task Profile			

Step	Review & Approval Routing
1	Requesting Department CFO
2	CON - Accounting Operations, for Policy Review & Reporting
3	CON - Budget & Analysis, for Budgetary Control & Planning
4	CON - Systems, for Technical Load and Mapping

Requests, Change Requests

Change Request

Current

ID	Description
----	-------------

Replace With

ID	Description
----	-------------

Date

Y/N
Y/N
Y/N
Y/N

Requests, Change Requests

Change Request

Current

ID	Description
----	-------------

Replace With

ID	Description
----	-------------

Date

Y/N
Y/N
Y/N
Y/N

Chartfield request forms

Please double click icon below to open form: ChartField Request Forms - Multiple Codes - v



10112019.xlsx

Subsetting request forms to the right

Date	Dept.	Dept. Contact	Fund	Fund Title
1/1/2018	MTA	XXX XXX	22260	MTA TS Op Annual Account Ctrl

FundGrp	FundGrp Title	FundTyp	Fund Title	GFSType
PROPRI_FUNDS	Proprietary Funds	ENT_FUND	Enterprise Funds	Self Supporting

Which applications?				new Elist?		
Position	Non-Position	Capital	Rev. Transfer	New Node?	Dept	Div
X	X			Yes	MTA	139648

Division Title	Section	Section Title	Fund
	208657		22260

Grant Related (Y/N)	Dept ID	Dept Title	AAO Level



Budget Definition	Done	By	Notes
10/20/2017 HM			

Date	Dept.	Dept. Contact	Dept	Dept Title	Position
1/1/2018	MTA	XXX XXX	138678	MTACC Capital And Constr-Cp	X

Which applications?			new Elist?			
Non-Position	Capital	Rev. Transfer	New Node?	Dept	Div	Division Title
X			Yes	MTA	103745	

Section	Section Title	Fund	Done	By
180644	180644	22260	10/20/2017	HM

Notes

Date	Dept	Contact	ProjAct
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ProjectTitle	ActivityTitle
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Grant Related? (Y/N)	StartDate (Optional)	EndDate (Optional)	Done	By
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Notes

Date	Dept.	Dept. Contact	Authority	Done
1/1/2018	MTA	XXX	16923-XXXX	10/20/2017

By	Notes
HM	

Date	Dept	Dept Contact	Account	Account Title
------	------	--------------	---------	---------------

AAO Category	AAO Title	Chart Category	Chart Title	MBB Category
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MBB Title	Done	BY
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Notes

Date	Dept.	Dept Contact	TRIO	TRIO Title
1/1/2018	GEN	XXX	100938	

Dept In/Out	UserCode XRef	Fund Xref	3 Digit Dept	Dept	Dept Title
			GEN	230018	

TRANSFER OUT+I1:Y4Q19I1:Y2I

Fund	Fund Title	Project-Activity	Project Title
10000	10000	10026734-0001	

1:AP4

Activity Title	Authority	Authority Title	Account
	1000		592020

Account Title		Agency Use	3 Digit Dept	Dept	Dept Title
592020			DSS	186644	

Transfer In			
Fund	Fund Title	Project-Activity	Project Title
11140	10000	10022908-0001	

Activity Title	Authority	Authority Title	Account
16923		492001	

Account Title	Agency Use	Done	By	Notes
592020		10/20/2017	HM	

Date	Class	Ret Ind	Title	Union
1/18/2018	8508	P	Sheriff's Sergeant (SFERS)	499

Min Hourly Rate	Max Hourly Rate	SETID	Job Cls Cate	Done	By	Notes
48.9250	62.475	COMMN	Uniform	2/12/2018	HM	Existing job class but no rates in BPM

45.

Budget System and Reporting Security Access Form

Please double click below to open and complete form

Section I: Request Type

New User
 Modify Existing User
 Inactivate Existing User

Section II: Employee Information

Department		
Name:		Employee ID
Job Title:		Job Code:
Email:		Phone:

Section III: Supervisor Information

Name:		Employee ID
Job Title:		Job Code:
Email:		Phone:

Section IV: BPMS & BI EP Access Request

A = Add access R = Remove access

Controller's Budget Office authorization required

A / R	Access	Description
Budget System (BPMS) – will include EIS basic access		
	Budget Author	Submits departmental budget entries
	Budget Manager	Reviews departmental budget submissions (<i>May</i>
	Budget Administrator	Administers the City's Budget system (<i>Controller</i>
Budget Report Access - BI Enterprise Planning (EP)		
Do you currently have Report & Analytical (BI) link in your Employee Portal's work link? [
	Departmental	Download departmental budget reports
	Citywide	Download Citywide Budget Reports (BAD and ME
	EP Snapshot Administration	Administers BI EP Snapshots (BAD only)
Controller's Budget Office Authorization*		
Name:		Signature:

Controller's Performance Measurement Group authorization required

A / R	Access	Description
Performance Measurement System Metrics (BPMS)		
	Perf. Meas. Author	Submits departmental metrics entries
	Perf. Meas. Administrator	Administers the City's Performance Measuremen
Controller's Performance Measurement Group Authorization*		
Name:		Signature:

*BAD and CSA teams, after signing off request form, please submit the request form to the support portal at <https://sfemployeeportalsupport.sfgov.org/support>

ing User

D:	

D:	

access

<i>or's Budget Office only)</i>
<i>'s Budget & Analysis Division only)</i>
<input type="checkbox"/> YES <input type="checkbox"/> NO
30 only)
Date:

rt system and users
Date:

via opening a ticket with SF User Support
[pport/home](#)

Dept. #	Code	Department Name	Mayor's Office	Controller's Budget & Analysis
62	AAM	Asian Art Museum	Sally Ma	Mark Chen
70	ADM	General Services Agency - Administrative Services	Lillian Patil	Risa Sandler
13	ADP	Adult Probation	Anna Duning	Nick Leo
27	AIR	Airport	Andrea Lynn	Nick Leo
28	ART	Arts Commission	Ashley Groffenberger	Mendy Ma
2	ASR	Assessor/Recorder	Morgan Owens	David Ly
1	BOS	Board of Supervisors	Ashley Groffenberger	Michael Mitton
3	CAT	City Attorney	Matthew Bangcaya	Ysabel Catapang
64	CFC	Children & Families Commission	Anna Duning	Mendy Ma
23	CHF	Children, Youth & Their Families	Lillian Patil	Mendy Ma
9	CON	Controller	Morgan Owens	Ysabel Catapang
29	CPC	City Planning	Morgan Owens	David Ly
10	CRT	Superior Court	Andrea Lynn	David Ly
30	CSC	Civil Service Commission	Ashley Groffenberger	Michael Mitton
17	CSS	Child Support Services	Andrea Lynn	Nick Leo
4	DAT	District Attorney	Andrea Lynn	Ysabel Catapang
19	DBI	Department of Building Inspection	Morgan Owens	David Ly
88	DPA	Department of Police Accountability	Ashley Groffenberger	Edward de Asis
81	DPH	Department of Public Health	Ashley Groffenberger	Risa Sandler
90	DPW	General Services Agency - Public Works	Anna Duning	Edward de Asis
45	HSA	Human Services Agency	Anna Duning	Mendy Ma
77	DEM	Emergency Communications	Matthew Bangcaya	Nick Leo
21	ECN	Economic & Workforce Development	Matthew Bangcaya	Mendy Ma
22	ENV	Environment	Sally Ma	Nick Leo
18	ETH	Ethics Commission	Lillian Patil	Michael Mitton
61	FAM	Fine Arts Museum	Sally Ma	Michael Mitton
31	FIR	Fire Department	Matthew Bangcaya	Mark Chen
97	GEN	General City Responsibility		Michelle Allersma/ Risa Sandler
4	HRC	Human Rights Commission	Lillian Patil	Ysabel Catapang
33	HRD	Human Resources	Ashley Groffenberger	Michael Mitton
84	HOM	Dept. of Homelessness and Supportive Housing	Lillian Patil	Edward de Asis
55	HSS	Health Service System	Ashley Groffenberger	Mark Chen
12	JUV	Juvenile Probation	Ashley Groffenberger	Edward de Asis
41	LIB	Public Library	Matthew Bangcaya	Michael Mitton
63	LLB	Law Library	Sally Ma	David Ly
35	MTA	Municipal Transportation Agency (MTA)	Ashley Groffenberger	Edward de Asis
25	MYR	Mayor	Anna Duning	Mendy Ma
37	BOA	Board of Appeals	Sally Ma	Nick Leo
5	PDR	Public Defender	Andrea Lynn	Nick Leo
38	POL	Police Department	Andrea Lynn	Nick Leo
39	PRT	Port	Lillian Patil	David Ly
40	PUC	Public Utilities Commission	Morgan Owens	Edward de Asis
42	REC	Recreation & Park	Matthew Bangcaya	Mark Chen
80	REG	Elections	Anna Duning	Ysabel Catapang
44	RET	Retirement System	Ashley Groffenberger	Michael Mitton
65	RNT	Rent Arbitration Board	Morgan Owens	Mendy Ma
60	SCI	Academy of Sciences	Sally Ma	Ysabel Catapang
6	SHF	Sheriff's Department	Anna Duning	Edward de Asis
75	TIS	General Services Agency - Technology	Anna Duning	Nick Leo
8	TTX	Treasurer / Tax Collector	Morgan Owens	Michael Mitton
99	UNA	General Fund Unallocated		Michelle Allersma/ Risa Sandler
7	USD	County Office of Education		David Ly
46	WAR	War Memorial	Sally Ma	Ysabel Catapang
48	WOM	Department on the Status of Women	Andrea Lynn	Ysabel Catapang
	OCII	Office of Community Investment and Infrastructure	Anna Duning	Risa Sandler

Mayor's Budget Office	
Matthew Bangcaya	(415) 554-6617
Ashley Groffenberger	(415) 554-6511
Anna Duning	(415) 554-6216
Kelly Kirkpatrick	(415) 554-6125
Andrea Lynn	(415) 554-6656
Sally Ma	(415) 554-5965
Morgan Owens	(415) 554-6639
Lillian Patil	(415) 554-5169

Controller's Budget Office	
Michelle Allersma	(415) 554-4792
Edward de Asis	(415) 554-7663
Ysabel Catapang	(415) 554-5253
Mark Chen	(415) 554-5159
Nick Leo	(415) 554-7575
Carol Lu	(415) 554-7647
David Ly	(415) 554-7837
Mendy Ma	(415) 554-5247
Michael Mitton	(415) 554-6626
Risa Sandler	(415) 554-5254