Department Budget Submission Checklist

To be completed by: All departments.

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

Department Name: WOM Status Of Women

Summary of Major Changes: Completed "Form 1A: Summary of Major Changes" explaining major changes submitted in department's budget proposal. (Generate from BFM Budget Submission

☑ Proposed GF target reductions

☑ **Department Budget Summary:** Completed "Form 1B: Department Budget Summary." (Generate from BFM Budget Submission Report)

☑ **Contingency:** Completed "Form 1C: Contingency."

I Revenue Report: Completed "Form 2A: Revenue Report." (Generate from BFM Budget Submission R

□ Fees & Fines: Completed "Form 2B: Fees & Fines."

Cost Recovery: Completed "Form 2C: Cost Recovery."

Expenditure Changes: Completed "Form 3A: Expenditure Changes." (Generate from BFM Budget Suk

□ **Deappropriations from prior years' budget:** Indicate if these are included in your submitted budget, and please explain in the expenditure changes form 3A

☑ Position Changes: Completed "Form 3B: Position Changes." (Generate from BFM Budget Submission
 □ Equipment & Fleet Requests: Completed "Form 4A: Equipment Request" and "Form 4B: Fleet
 Request." (Generate from BFM Budget Submission Report)

Image: Minimum Compensation Ordinance: By checking this box, the department confirms that 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 and new Prop Js ⊠ **Interdepartmental Services Balancing:** Included Excel download of Department - IDS Form Balancing Re

☑ 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

□ New Legislation:

 \Box 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 item:

□ COIT (through a separate form)

□ Capital - CPC funded capital requests are made through BFM by 1/19/24

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.

Signature:

— DocuSigned by: My Lan Do Nguyen

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	(enable content and
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BUDGET FORM 1A: Summary of Major Changes

FY 2024-25 and FY 2025-26

	Major Changes	Department Response to Major Changes
Summary	What major changes is the department proposing? Clearly	As part of the strategic shift from a general grant-making agency to a Watchdog, Advocacy, and Convening organization, beginning in
General Fund Target	describe aach chance including the fiscal impact of the proposal How did the department meet its target in each year? What are the high-level programmatic, operational, or staffing impacts of this proposed reduction? For non-GFS departments, please describe your strategy for absorbing cost increases or revenue reductions without adding new costs to the General Fund.	EV 2025-26 the Department on the Status of Women will not be reissuing its order hased violence grants notifolin REP as has In BY, DOSW decreased the City Grant Program account by \$1,613,551 to meet MBO's GF target reductions of \$1.25 million and to offset the proposed increases in personnel and non-personnel expenditure categories. In BY+1, DOSW reduced the City Grant Program account by \$10,117,454 to meet MBO's GF target reductions and to offset the same proposed increases. In addition to the reductions made to the City Grant Program budget, we are holding two positions vacant for salary attrition savings of \$223,419 in BV and \$232,262 in BY+1.
Positions	How are current year staffing levels and vacancies factored into your budget submission? What position changes is the department proposing to prioritize core service delivery while meeting the General Fund reduction target or NGF revenue reductions? Highlight any changes to FTE levels, budgeted attrition, temporary salaries, substitutions, and provide details in Form 3B.	DOSW currently has 10 budgeted GF-supported FTEs. During the Department budget phase, DOSW is in the process of recruiting one 1823 – Senior Administrative Analyst position, with plans to fill it by early May 2024. In response to MBO's request, the Department is keeping two positions vacant: one for 2998 - Representative, Commission on The Status of Women, and another for 1820 - Junior Administrative Analyst. The request to leave these positions vacant results in a 20% reduction in DOSW's workforce, leading to salary attrition savings of \$223,419 in BY and \$232,262 in the BY+1.
	What major spending changes is the department proposing? Please provide information especially for any grant changes, major contract changes, personnel changes, or other changes that affect core services and functions. Highlight any changes related to major changes/initiatives as noted in the Summary section and provide details in Form 3A.	Non-Personnel Services Changes: The base budget for BY and BY1, totaling \$71,779, is insufficient to meet the Department's Non- Personnel Services (NPS) needs, particularly in renewing the Envisio software license, which costs \$73,000. Therefore, the Department's Non- proposes an NPS budget of \$141,500 for each fiscal year, \$69,721 higher than the MBO budget. Key adjustments to the proposed I budget include allocating \$73,000 to renew the Envisio software licensing fee, \$4,000 for the City's membership in the Rainbow Citie Network, eliminating stipend expenses, reducing the Other Current Expenses budget to \$5,000 to match previous spending and reallocating printing funds to Repromail services. City Grant Program Changes: The BY City Grant Program Proposed budget of \$10,362,769 incorporates a \$1.25 million reduction a
Expenditures		several adjustments: 1. A decrease of \$284,493 is allocated to allow MOHCD to augment their budget by the same amount, finalizing the transfer of serv previously managed under the St. James Infirmary (SJI) contract, with a base of \$274,210 and a 3.75% Cost of Doing Business (Co of \$10,283. 2. A reduction of \$69,721 reflects the corresponding increase in the Non-Personnel Services (NPS) budget. 3. The budget is decreased by \$9,337 to accommodate the rise of \$9,337 in the Services of Other Departments budget. The BY1 City Grant Program Proposed budget of \$2,218,155 also includes a \$1.25 million reduction and similar adjustments: 1. A decrease of \$8,788,500 represents the current funding base for the Gender-Based Violence (GBV) portfolio, consisting of \$8,470,743 and a 3.75% CODB of \$317,653. 2. Similar to BY, a \$69,721 reduction mirrors the NPS budget increase. 3. A decrease of \$9,337 is made to balance the increase of \$9,337 in the Services of Other Departments budget.
		The 5% contingency requested by MBO, totaling \$675,000, will be reduced from the City Grant Program account if necessary. Services of Other Departments: The BY and BY1 proposed budgets is \$9,337 higher than the base budgets due to adjustments in the workorder accounts. Specifically, the budget for Account 581325 is increased by \$6,837 to accommodate the costs of using DocuSi as it is the only legally accepted electronic signature format in the City. Additionally, the budget for Account 581820 is increased by \$6,837 to account 581820 is increased by \$6,837 to accommodate the costs of using DocuSi as it is the only legally accepted electronic signature format in the City. Additionally, the budget for Account 581820 is increased by \$6,837 to account 581820 is increase
Revenues	What revenue changes did the department submit? Please differentiate between General Fund and non-General Fund. This should match an Audit Trail, as shown in Form 2A Revenue Report, as well as, the Expenditure Report in Form 3A.	The Department did not submit any revenue changes.
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?	The Department is not seeking to submit any legislation with the budget.
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.	The Department does not have any continuing Prop J Analyses and is not proposing any new one.
Transfer of Function	Is the department requesting any Transfer of Functions of positions between departments? If so, please explain.	The Department is not requesting any Transfer of Functions of positions.
Interim Exceptions	Is the department requesting any interim exceptions (new positions that are 1.0 FTE rather than 0.79 in BY and .78 in BY +1)? If so, for what reason are is the request being made?	The Department is not requesting any interim exceptions. However, position number 01140368-1, which is fully funded by a grant al off budget, was supposed to end in the third quarter of fiscal year 2023-2024. The Department received a no-cost extension from the grantor into fiscal year 2024-2025. Since the position was supposed to end in fiscal year 2023-2024, it is not included in our budget fiscal year 2024-2025. The position is being added to DOSW's budget submission as a new position, although it is not truly new, as nosition has been filled since November 2023.
Budget Equity	How has the department considered equity in its budget proposal?	The Department will continue to prioritize awarding City Grant funds to historically underfunded communities that have traditionally b neglected and/or disinvested in.

BUDGET FORM 1B: Department Budget Summary

FY 2024-25 and FY 2025-26

DEPARTMENT: WOM Status Of Women

GFS Details

Account Lvl 2	Account LvI 3	FY 2024-25 Base	FY 2024-25 Department	FY 2024-25 Dept - Base	FY 2025-26 Base	FY 2025-26 Department	FY 2025-26 Dept - Base
EXPENDITURE	SALARIES	1385322	1385322	0	1440257	1440257	0
	MAND_FRING_BEN	519235	519235	0	534934	534934	0
	NON_PERS_SVCS	71779	141500	69721	71779	141500	69721
	CITY_GR_PROG	11976319.45	10362768.45	-1613551	12335609.03	2218155.034	-10117454
	MTL_SUPP	28516	28516	0	28516	28516	0
	SVCS_OTHER_DEPTS	178606	178606	0	178606	178606	0
EXPENDITURE		14159777.45	12615947.45	-1543830	14589701.03	4541968.034	-10047733
GFS	General Fund Support	14159777.45	12615947.45	-1543830	14589701.03	4541968.034	-10047733

GFS Target Status							
FY 2024-25 Reduction Targets	FY 2024-25 Baseline Target	FY 2024-25 Dept Submission	FY 2024-25 Amt Over (Under) Target	FY 2025-26 Reduction Targets	FY 2025-26 Baseline Target	FY 2025-26 Dept Submission	FY 2025-26 Amt Over (Under) Target
(1,350,000)	12,809,777	12,615,947	(193,830)	(1,350,000)	13,239,701	4,541,968	(8,697,733)
			Target Met				Target Met

NGFS - Self Supporting

			FY 2024-25	FY 2024-25 Dept -		FY 2025-26	
Account Lvl 2	Category	FY 2024-25 Base	Department	Base	FY 2025-26 Base	Department	FY 2025-26 Dept - Base
EXPENDITURE	City Grant Program	200,000	200000	0	200,000	200000	0
EXPENDITURE		200,000	200000	0	200,000	200000	0
REVENUE	Licenses, Permits,& Franchises	200,000	200000	0	200,000	200000	0
REVENUE		200,000	200000	0	200,000	200000	0
Non-General Fund Support	Revenue Surplus(Deficit)	0	0	0	0	0	0

BUDGET FORM 1C: Contingency

FY 2024-25 and FY 2025-26

DEPARTMENT: WOM Status Of Women

DEPT NAME: Status of Women

General Fund departments must also propose additional ongoing contingency reductions. Departments are not expected to load the contingency target. Please describe the proposal(s) below.

Description	FY 2024-25 \$ Savings	FY 2025-26 \$Savings
The 5% contingency requested by MBO, totaling \$675,000, will be reduced from the Account 538000 - CBO Services - Budget if necessary.	675000	675000
Total	675,000.0	675,000.0

BUDGET FORM 2A: Revenue Report

DEPARTMENT:	WOM Status Of Women	No changes to report				
				Total BY Revenue Change	Total BY1 Revenue Change	Budget Justification
	vi					
GFS Type Dept Grp	o Division n Section Section Title	Project- Dept ID Dept ID Title Fund Fund Title Activity	Account LvI 5 Project Title Activity Title Authority Authority Title Title Account Account		Y 2024-25 FY 2025-26 FY 2025-26 FY 2025-26 ept - Base Base Department Dept - Base	Revenue Description and Explanation of Change

Budget Form 2B: Schedule of Licenses, Permits, Fines & Service Charges

DEPARTMENT: WOM Status Of Women NOT APPLICABLE TO WOM

Inflation Factor for FY 2024-25 Fee Auto Increase as per Code Section ** Inflation Factor for FY 2025-26 Fee Auto Increase as per Code Section **

CPI will be updated in January 2024. Call Controller's Budget Office to confirm CPI before submitting.

TABLE 1 - FEES TO BE CERTIFIED BY CON Please click here for the latest fee certification letter for reference

tem	Fee Status M/N	Description	Code Authorization	Auto CPI Adjust Yes/No	Account Code	Account Title	Fund Code	Fund Title	Authority Code	Authority Title	Department Code	Department Title	Project Code	Project Title	Activity Code	Activity Title	Unit Basis (e.g per sq. ft./)	FY 2023-24 Fee **	FY 2023-24 Units (Est.)	FY 2023-24 Revenue Proposed
1																		\$ -		\$ -
2																		\$ -		\$ -
3																		\$-		\$ -
4																		\$-		\$ -
5																		\$ -		\$ -
6																		\$ -		\$ -
7																		\$ -		\$ -
8																		\$ -		\$ -
9																		\$ -		\$ -
10																		\$ -		\$ -

TABLE 2 - MODIFIED AND NEW FEES

Item	Fee Status M/N	Description	Code Authorization	Auto CPI Adjust Yes/No	Account Code	Account Title	Fund Code	Fund Title	Authority Code	Authority Title	Department Code	Department Title	Project Code	Project Title	Activity Code	Activity Title	Unit Basis (e.g per sq. ft./)	FY 2023-24 Fee **	FY 2023-24 Revenue Proposed
1																		\$-	\$ -
2																		\$-	\$ -
3																		\$-	\$ -
4																		\$-	\$ -
5																		\$ -	ş -
6																		\$-	\$ -
7																		\$ -	ş -
8																		\$ -	\$ -
9																		\$ -	ş -
10																		\$ -	ş -
TAB	E 3 - C	ONTINUING FEES																	

	tem	Fee Status	Description	Code Authorization	Auto CPI Adjust Yes/No	Account Code	Account Title	Fund Code	Fund Title	Authority Code	Authority Title	Department Code	Department Title	Project Code	Project Title	Activity Code	Activity Title	Unit Basis (e.g per sq. ft./)	FY 2023-24 Fee **	FY 2023-24 Units (Est.)	FY 2023-24 Revenue Proposed
Г	11																		\$ -		\$ -
	12																		\$-		\$ -
	13																		\$-		\$ -
	14																		\$-		\$ -
	15																		\$-		\$ -
	16																		\$-		\$ -
	17																		\$-		\$ -
	18																		\$ -		\$ -
	19																		\$-		\$ -
L	20																		\$-		\$ -

- Fee Status:
- C Continuing M Modified

N New D Discontinued

Note:

Note: * If Auto CPI adjustment = Yes, FY 2024-25 and FY 2025-26 Fee will be automatically generated based on the inflation factor determined by the Controller. If Auto CPI adjustment = No, FY 2024-25 and FY 2025-26 Fee will remain the same as previous year or entered by dept according to Code Authorization.

PARTMENT:	WOM	N	OT APPLICABLE TO WO	M			
Name:	Fee XYZ			Department Providing Service:	0	artment ABC	
Name.	POC X12			Fee Administrator:		e Smart	
	Numeric Code	Title		Code Authorization/			
Department of Proposed Revenue:	XXXXXX			Proposed Fee Ordinance/File No:	Adr	in Code Section	XX
Fund of Proposed Revenue:	XXXXX			D		44.00	
Authority of Proposed Revenue: Project of Proposed Revenue:				Proposed Fee (FY 2025-26): Proposed Fee (FY 2024-25):	2	44.00	(1) (2)
Activity of Proposed Revenue:	XXXX			Current Fee (FY 2023-24):	s	40.00	(3)
Account of Proposed Revenue:	XXXXXXX				_		
Status (New/Modified): Status (New/Modified):	New						
ailed Service Description:							
se provide description of service							
Proposed Fee (FY 2025-26):		\$ 44.00		FY 2025-26 Proposed Fee Increase/Decrease:	s	2.00	1
Proposed Fee (FY 2024-25):		\$ 42.00		FY 2025-26 % Proposed Fee Change from FY 2023-24 Fee:		4.76%	
Current Fee (FY 2023-24):		\$ 40.00		FY 2024-25 Proposed Fee Increase/Decrease:	\$	2.00	
				FY 2024-25 % 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%	
			FY2024	-25			
ESTIMATED REVEN	UE DERIVED FROM SERVI	CE		ESTIMATED COSTS TO PROVIDE SERVICE - USE	WORKSHEI	T 24-25, BELO	W
Quantity Estimated				D Direct Costs		FY 2024-25 stimated Cost	% of Total
A Quantity Estimated (# of Units of Service Provided)		5.000		Productive Labor & Benefits (0.75 of 2024-25 Salary & MFB)	S	313.702	59.25%
(-,		Leave & Non-Productive Time (0.25 of FY 2024-25 Salary & M		104,567	19.75%
				Space Rental Equivalent	Ś	15,000	2.83%
				Materials & Supplies	\$	-	0.00%
Fee per Unit (Proposed)		\$ 42		Other (Please Describe on Worksheet) E Indirect Costs Ra	\$		0.00%
3 Fee per Unit (Proposed)		3 4Z		E Indirect Costs Ri Departmental Overhead 20.0		83.654	15.80%
				Central Services Overhead 3.0		12,548	2.37%
FY 2024-25 Revenue Budgeted (A x	B)	\$ 210,000		F FY 2024-25 Direct & Indirect Costs	\$	529,471	100.00%
FY 2024-25 Revenue Recovery Rate	(C/F):	39.66%					
H Required Fee For 100% Cost Recovery	ery (F/A)	\$ 105.89					
I Over (+) or Under (-) 100% Cost Rec	overy (B-H)	(\$63.89)					
FY 2024-25 Estimated Revenue [(2)						210 000 00	
J FY 2024-25 Estimated Revenue [(2) FY 2023-24 Estimated Revenue [(3)	x A]: x A]:				S S	210,000.00	
FY 2024-25 Estimated Revenue Incr		roposed Fee [J -K]			š	10,000.00	-
			FY2025	-26			
ESTIMATED REVEN	UE DERIVED FROM SERVI	CE		ESTIMATED COSTS TO PROVIDE SERVICE - USE	WORKSHE		W
Quantity Estimated				D Direct Costs		FY 2025-26 timated Cost	% of Total
(# of Units of Service Provided)		5.000		Productive Labor & Benefits (0.75 of 2025-26 Salary & MFB)	s	-	#DIV/0!
				Leave & Non-Productive Time (0.25 of FY 2025-26 Salary & M	FB) \$		#DIV/0!
				Space Rental Equivalent	\$		#DIV/0!
				Materials & Supplies	s	-	#DIV/0!
B Fee per Unit (Proposed)		\$ 44		Other (Please Describe on Worksheet) E Indirect Costs R:	\$	-	0.00%
				Departmental Overhead 0.0		-	#DIV/0!
				Central Services Overhead 3.0	0% \$		#DIV/0!
FY 2025-26 Revenue Budgeted (A x	8)	\$ 220,000	1	F FY 2025-26 Direct & Indirect Costs	\$		#DIV/0!
G FY 2025-26 Revenue Recovery Rate	(C/F):	#DIV/0!					
H Required Fee For 100% Cost Recovery	ery (F/A):	s -					
	overy (B-H):	\$44.00					
Over (+) or Under (-) 100% Cost Rec							
	- 4 %					220.000	
Over (+) or Under (-) 100% Cost Rec FY 2025-26 Estimated Revenue [(1) FY 2024-25 Estimated Revenue [(2)					\$ \$	220,000.00	

Estimated Costs Worksheet F	/ 2024-25
Direct Costs	
Labor and Benefits	
Please use the worksheet below to list all job classe	s necessary to support the services provided. Add rows if necessary.
Please also provide a description of the work and the	e estimated hours for each job class required to perform each unit of service
	I Hours
JobClas	per Unit of
s Job Class Title	Description of Work Service
1234 Test	Processes Payment 1.20
	↓
Please fill out the Salary and Benefits Amount per F	TE column
dot	Salary and Benefits Amount Salary and
Class Job Class Title	per FTE Hours Worked Hourly Rate Benefits Amount
1234 Test 0 0	\$145,000.00 6000.0 \$69.71 \$418,269.23 0.0 \$0.00 \$0.00
0 0	0.0 \$0.00 \$0.00
0	Total: \$448,528,23
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 inform
Cost 1 150	Description 0 Payment facility
2	
3	
Total: \$15,000.	8
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 inform
Cost 1	Description
2	
3	
Total: \$0.0	3
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 inform
Cost	Description
2	
3	
Total: \$0.0	0
Indirect Costs	
Rate Source 20.0% Please provide supporting documentation	cross-benzitiesetal overhead rate was derived
Action rease provide supporting documentation	
Worksheet 24-25	

Worksheet 24-25	
Estimated Costs Work	sheet FY 2025-26
Direct Costs	
Labor and Benefits	
	all job classes necessary to support the services provided. Add rows if necessary.
Please also provide a description of th	e work and the estimated hours for each job class required to perform each unit of service
JobClas s Job Class Title	Hook ser Uit of Description of Work Simile
Please fill out the Salary and Benefits	Amount per FTE column Salary and Benefits Amount Salary and
Class Job Class Title	per FTE Hours Worked Hourly Rate Benefits Amount
	0.03 \$0.00 0.03 \$0.00 0.04 \$0.00 0.04 \$0.00 0.05 \$0.00
	Total: \$0.00
Space Rental Equivalent Cost 1 2 3	Please list and decode the costs of spaceficitly (ential recessary to support the services provided. Add rows an nonessary, Ensure that the "Total" includes the sum of all rows with cost information. Description
Total:	\$0.00
Materials and Supplies	Please list and describe the costs of spacefacility 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 1 2 3	Description
Total:	\$0.00
Other Costs	Please list and describe the costs of spacefacility 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

Total: 50.00
Indirect Costs

22.24

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

BUDGET FORM 3A: Expenditure Change

													re -154383			
Dept Grp	Division Division Title	Section Section Title	Dept ID Dept ID Title	Fund Fund Title	Project-Activity Project Title	Activity Title	Authority Authority Ti	Account Lvi 8	Account Account Title	A Equipment # TRIO	gency FY 2024 Use Ba		25 FY 2024-2 nt Dept - Bas		FY 2025-26 Department	
WDM	232395 WOM Status Of Women	232395 WOM Status Of Women	232395 WOM Status Of Women	10000 GF Annual Account Ctrl	10025801-0001 WO Status of Women	WO Status of Women	10000 Operating	5210NPSvos	521000 Travel-Budget			0 9,0	00 900	0	9,000	Reduced the Air Travel - Employees budget because e fares are purchased through City suppliers and change 521020-Travel Costs Pairt To Venders. Instead of budg travel expension, it is before to create a travel budget an 9000 actuals to appropriate accounts.
юм					10025801-0001 WD Slatus of Women		10000 Operating				50	_	0 -500	5,000	0	Reduced the Air Travel - Employees budget because tares are particular through Chy supplem and drarp tares are particular through Chy supplem and drarp tares of approximate the control of the control of the subject of the control of the control of the control of the budget and worked arous the accounts (2010) or Air budgeting based on tareel costs, we are non versifing budgeting targeting the cost of the budgets in those a accounts. We have account of the budget and shows the cost status - to budget and shows the budget an
-Chai	232395 WOR Sales Of Worldh	232395 WOW Status Of Women	232395 WOM Status Of Women	10000 GP Annual Account Can	10028501-0001 WO Salas of Women	WO Status of Women	10000 Operating	52 TUNP OVES	521030 Air Travel - Employees		5,0	10	0 -300	5,000	U	
			232395 WOM Status Of Women		10026801-0001 WO Status of Women	WO Status of Women	10000 Operating		521050 Non-Air Travel - Employees		5,0		0 -500		0	-5000 appropriate accounts. Increased Training Budget to \$2,000. We have 8 G Grant-Funded FTEs. That is a budget of \$200 for pr
м	232395 WOM Status Of Women	232395 WOM Status Of Women	232395 WOM Status Of Women	10000 GF Annual Account Ctrl	10026801-0001 WO Status of Women	WO Status of Women	10000 Operating	5210NPSvcs	522000 Training - Budget		7	35 2,0	123	765	2,000	1235 development per person. This is the account we use to reimburse employee business expenses including parking, toil, bus fare porting project and the RFPs are public facing pro
MC	232395 WOM Status Of Women	232395 WOM Status Of Women	232395 WOM Status Of Women	10000 GF Annual Account Ctrl	10026801-0001 WO Status of Women	WO Status of Women	10000 Operating	5210NPSvcs	523020 Local Field Exp			0 1,0	00 100	0	1,000	1000 need to have a budget for staff to go out into the c
м			232395 WOM Status Of Women		10025801-0001 WO Status of Women	WO Status of Women	10000 Operating		524010 Membership Fees		20	0 4,0	0 400		4,000	4000 Budget for Rainbow Cities Network membership fe The original purpose of stipends is to pay gealters participation at department-hosted events. Howeve payment system does not allow us to pay individua supplers. WOM reduced our budget in this account -2000 have not been able to use it.
																Account 535000 - other current expenses budget items not explicitly earmarked in the fiscal year. V
м			232395 WOM Status Of Women		10026801-0001 WO Status of Women	WO Status of Women	10000 Operating		535000 Other Current Expenses - Bdgt		8,3				5,000	-3314 budget amount to \$5,000 to keep in line with previ
			232395 WOM Status Of Women		10025801-0001 WO Status of Women	WO Status of Women	10000 Operating		535510 Copy Machine		3,2					 -1200 Reduced the budget for the copy machine to refle Reduced the printing budget because we use Rep charges us through a workorder. Increase the bud
M			232395 WOM Status Of Women		10026801-0001 WO Status of Women	WO Status of Women	10000 Operating	5210NPSvos	535520 Printing		2,5	0 5	0 -250		0 500	-2500 581820 - IS - Purch- Reproduction by \$2,500. Increased the subscriptions budget to \$500 to pay 500 subscriptions.
			232395 WOM Status Of Women		10026801-0001 WO Status of Women	WO Status of Women	10000 Operating		535710 Subscriptions							Increased the budget to reflect the cost of renewir subscription, our data management and performa
м	232395 WOM Status Of Women	232395 WOM Status Of Women	232395 WOM Status Of Women	10000 GF Annual Account Ctrl	10025801-0001 WO Status of Women	WO Status of Women	10000 Operating	5210NPSvos	535960 Software Licensing Fees			0 73,0	00 7300	0	73,000	73000 system. Reductions made from FY 24-25 loaded budget:
																- \$1.25M MBO GF reductions - \$284,493 - \$3I base \$274,210 + 3.75% CODB -\$60,721 increased NP5 budget - \$9,337 increased workorder budget
																Reductions made from FY 25-26 loaded budget:
DM DM			232395 WOM Status Of Women		10026801-0001 WO Status of Women 10039872-0001 WOM FY22-24 BSCF Transition Gr	WO Status of Women WOM FY22-24 BSCF Transition Gr	10000 Operating 10001 Grants	5380CityGP 5010Salary	538000 CBO Services - Budget 501010 Perm Salaries-Misc-Regular		11,543,7		44 -161355		1,772,654	- \$1.25M MBO GF reductions - \$8,788,500: GBV portfolio base of \$8,470,743 + \$317,653 - \$69,721 increased NPS budget -10117454 - \$9,337 increased workorder budget 0 See Form 38

BUDG	ET FORM 3	B: Position	Change																		
DEPA	RTMENT:		WOM Status Of Womer	1																	
												Position Code	Total BY FT Chang	19 ⁰ 1	Total BY Am Cha	ount ange 6	Total BY1 I Cha	FTE I	Total BY1 Am 0 Ch	ange	•
GFS Type	Dept	Grp	Division Division Title	Section Section Title	Dept ID Dept ID Title	Fund Fund Title	Project- Activity Project Title	Activity Title	Authorit; Authority Tit	itle Account Ag	gency Job Class Job Title se	Status Action Position	FY 2024- FY 202 25 Base 25 Dep FTE FTE	pt 25 Dept - F Base	Y 2024-25 FY 2024 Base Dep		FY 2025- FY 20 26 Base 26 De	ept Base	- FY 2025- FY 2 26 Base 26 1	Dept Base	
												-		FTE	Amount Amou	unt Amount	FTE FT	E FTE	Amount Am	ount Amoun	
NGFS W	DM		232395 WOM Status Of Wom	en 232395 WOM Status Of W	men 232395 WOM Status Of Wome	n 13550 SR Public Protection-Grant	10039872-0001 WOM FY22-24 BSCF Transition Gr	WOM FY22-24 BSCF Transition Gr	10001 Granta	5010Salary	2998_C Representative, Commis	asior O N 01140388-1	0 1	1	0	0 0	0	0	0 0	0	Position forded by a Blue Sheld Foundation of California grant. The position was supposed to and in the third quarter of final year 2023-2024. The appartment resolver an excent domain from the grantor in ficial year 2024-2025. Since the position was supposed to ren in ficial year 2023-2024, it is not included in our budget for fiscal year 2024-2025. The position is being added to DOSW's budget submission as a new position, atthough it is on third year as in the position has been filed ations Normetre 2023.

BUDGET FORM 4A: New General Fund Equipment Request - No Vehicles

DEPARTMENT: WOM

Departments that are making General Fund equipment requests should complete this form.

Do not load General Fund equipment requests in the budget system - they will be loaded centrally in Mayor phase.

Equipment numbers will be finalized after the Mayor's Budget Office determines citywide equipment allocations.

Where applicable, include installation/outfitting costs in the same line item budget request in the tables below.

											Rollover	
					New/Replac	Number	Cost Per		New	Rollover	Cost Per	Rollover
Fiscal Year	Equipment Decription Justification of Need	Project ID	Project Title	Equipment #	е	of Units	Unit	Total Cost	Request	Units	Unit	Total Cost

BUDGET FORM 4B: Fleet

DEPARTINOM

All departments requesting to purchase new or replacement vehicles must fill out this form, whether requesting General F Requests will be reviewed by Fleet Management and MBO.

Term Contract Prices are provided by Fleet Management and will be updated in January for select vehicles. Please contact Camilla Taufi

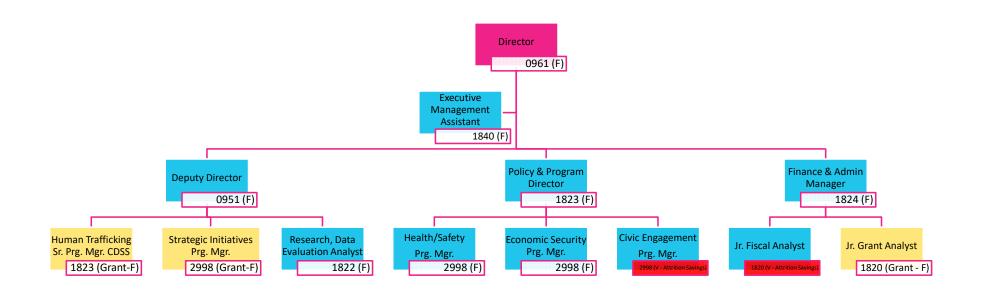
			New Vehicle Specification	ons		Те	rm Contract Informati	ion		Cost Information		R	eplacemer	nt Vehicle Informati	ion
Point of Contact Source of Funds Dept Fiscal Equipment# Vehicle Type	Brief description of Vehicle Type if "Other"	Fuel Type	Special Requirements Comments	If purchasing a sedan that is not battery electric, provide justification	# of Unit default to 1. Please create multiple equipment number entries if requesting multiple units.	from a Term Contract, which contra	If NOT purchasing from a Term Contract, provide a description of the ct required vehicle, including make and model	per Unit	Description of Supplemental Cost	Supplemental Cost per Unit (e.g. additional vehicle options, outfitting, charging infrastructure if purchasing EV, freight if not purchasing from term contracts, etc.)	(base cost, supplemental cost, # of units	be t replaced - Asset#	be replaced - Licence	De D	be be d - replaced - nd Current

Note:

			COIT and Capital FY 2024-25 a	Budget Submiss and FY 2025-26	ions	
COIT>	Please submit for more infor Technology project p	mation.	s at the link below, a		-	
	NGFS CPC Capital Red	quests: Please enter	n BFM form, Capital - Dept Re r in BFM form, Capital - Dept R in BFM form, Capital - Dept R e	equest - CPC NGFS+ (72	•	
CAPITAL>	SF BUDGET	Home	Budget Formulation	Capital Capital - Dept Request - Noi Capital - Dept Request - CPi Capital - Dept Request - CPi Capital Project-Activity	NGFS + (7200)	Chart of Accounts

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BUDGET FORM: Organizational Chart FY 2024-25 and FY 2025-26



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

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 Department:
 Insert name of Department and Division herr

 Contract:
 Insert name of the contract's main purpose herr

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 provided by the contractor;

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:

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);

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

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)

8 Changes in any elements of the Contractor and/or City side since the prior approved Prop

Name and job title of the person completing this questionnaire

Form will autopopulate

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PROP J ANALYSIS SUMMARY Insert name of Department and Division here Insert name of the contract's main purpose here

FISCAL YEAR 2024-25

City cost if services are not contracted out

		low range		high range	
Total Annual Salary	\$		-	\$	-
Total Other Pay	\$		-	\$	-
Total Fringe Benefits	\$		-	\$	-
Additional City Costs	\$		-	\$	-
	\$		-	\$	-
City cost if services are contracted o	ut				
Contract Cost	\$		-	\$	-
City Contract Monitoring	\$		-	\$	-
	\$		-	\$	-

City Savings from Contracting Out,				
Savings/(Cost)	\$	-	\$	-
	#DIV/0!		#DIV/0!	

Note: All departments should complete Prop J Analyses for FY 24/25

Fixed departments AIR, PRT, MTA, and PUC should also complete Prop J Analysis for FY 25-26.

Please Fill Out Blue Shaded Areas Only.

NOT APPLICABLE TO WOM

PPE FY25

26.0

[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 2024-25

ESTIMATED CITY COSTS:

		Rate per FTE		Ann	ual Cos	st		
Job Class Title	Class	# of Full Time Equivalent Positions	Low	High		Low		High
0	0.00		\$-	0	\$	-	\$	-
D	0.00		\$ -	0	\$	-		-
D	0.00		\$ - \$ - \$ -	0	\$	-	\$	-
D	0.00		\$ -	0	\$	-	\$	-
D	0.00				\$	-	\$	-
D	0.00				\$	-		-
D	0.00				\$	-	\$	-
D	0.00				\$	-	\$	-
0	0.00				\$	-		-
0	0.00				ŝ	-		-
Holiday Pay (if applicable)	n/a	n/a			Ť		Ÿ	
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						
Other Fay (II applicable)	Total FTE	n/a						
	TOTALL	L	Total Salar	ry Costs>	\$			
				,	ð — —			
		Total of C	ther Compe	ensation>	\$	- \$ - \$ - \$ - \$ - \$ - \$ - \$	-	
		FRINGE BENEF	те					
	Job Class	\$ Amount	113					
Benefits per FTEJob Class #:	000 01233	0	•					
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #: Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #: Benefits per FTEJob Class #:	0	0						
Benefits per FTEJob Class #: Benefits per FTEJob Class #:	0	0						
Denenits per 1 12-300 Class #.	0	0			Low		High	
Total Fringe Benefi					\$			
Total Fillige Belleli	.0				φ	-	φ	-
		DITIONAL CITY	COSTS					
Insert all additional costs, with a description				service	\$		\$	_
May include capital costs, with a description May include capital costs, materials & sup					Ŷ	-	φ	-
contract components.	piles, uniform	s, technology, as	na compara	ible to the	\$		¢	
contract components.					э \$	-		-
					» Տ	-		-
					\$ \$	-		-
Total Capital & Operatin								-

ESTIMATED TOTAL CITY COST LESS: ESTIMATED TOTAL CONTRACT COST	\$ \$	-	\$ \$:
ESTIMATED SAVINGS	\$	- IV/0!	\$	-
% of Savings to City Cost	#U	10/0!	#1	JIV/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, XXXX. 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>

Salary and Benefits for Each Job Class from BFM Reporting FTE Cost Report

Complete this with the cost of 1.0 FTE; the actual FTE needs will be calcuated in the Personnel and Fringe Benefit costs.

Year (BY, aka FY 24/25)	Job Class Number	Job Class Title	FTE	5010 Salary	5130 Benefits	Total	
24/20)	Number	JOD Class Tille	1.00	Salary	Denenits	\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-
			1.00			\$	-

FISCAL YEAR 2024-25

Contract Cost Details

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Contract Monitoring Costs:

 Low
 High

 Estimated Contract Cost
 \$ \$

 Estimated Monitoring Cost
 \$ \$

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

Salary:																		
		# of FTEs (can be partial; e.g.	Biweekly Rate		Annual Salary Expense			Benefits per FTE			Annual Benefit Expense			TOTAL EXPENSES				
Job Class	Job Class Title	a half time employee would be 0.5 FTE)	Low	High		_ow		High	Low	High		Low		High	L	.ow	н	igh
				¥	\$	-	\$	- ·	\$ -		\$	-	\$	-	\$	-	\$	- -
					\$	-	\$	-	\$ -		\$	-	\$	-	\$	-	\$	-
					\$	•	\$	-	\$ -		\$	-	\$	-	\$	-	\$	-
					\$	-	\$		\$ -		\$	-	\$	-	\$	-	\$	-
TOTAL CON	TRACT MONITORING COST				\$	-	\$	-	\$ -	\$ -	\$	-	\$	-	\$	-	\$	-

Components of contractor labor costs, including but not limited to: fringe benefits, premiums, shift differentials:

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	- low end	Total Cost - high end est
	_		-	
	_			
	_			
	-		1	
TOTAL CONTRACT COST			\$ -	\$ -