

## **FISCAL IMPACT REPORT**

Item	Description	Rate / \$	Total Estimated Annual Impact	Note:	
1	Monthly Health Benefits	\$ 200.00	\$ 43,200		
Estima	Estimated Fiscal Impact \$ 43,200				

These estimates are subject to change and represent Management's best estimate and analysis of the fiscal impact and costs of the above proposal, given the information that is available at this time.