

**5% Base Budget Reduction Form**  
[17-7-111-3\(f\)](#)

**AGENCY CODE & NAME:**

		Minimum Requirement			
		General Fund	State Special Revenue Fund		
<b>TARGETED REDUCTION TO EQUAL 5% OF CURRENT BASE BUDGET</b>		\$ 117,494	\$ 8,100		
Priority	SERVICE(S) TO BE ELIMINATED OR REDUCED	General Fund Annual Savings	State Special Revenue Annual Savings	Matching Federal Funds	
1	Reduce Operating Costs in QAD	\$ 164,492	\$ 11,340		
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
	<b>TOTAL SAVINGS</b>	\$ 164,492	\$ 11,340	\$ -	
	<b>DIFFERENCE</b>	\$ (46,998.00)	\$ (3,240.00)	\$ -	

Form A

## 5% Base Budget Reduction Form

### AGENCY CODE & NAME:

**#1 BRIEF DESCRIPTION OF SERVICE TO BE CONSIDERED FOR ELIMINATION OR REDUCTION:**

Operating Costs in QAD.

**#2 THE SAVINGS THAT ARE EXPECTED:**

Savings in operating and personal services costs.

**#3 THE CONSEQUENCES OR IMPACTS OF THE PROPOSED ELIMINATION OR REDUCTION:**

Reducing operating expenses would require delays in staffing, reduced travel and standard office expenditures. Program workload would have to be shifted and reduced resources would affect the delivery of program priorities.

**#4 HOW THE IMPACT TO CONSTITUENTS AND STAFF MIGHT BE MITIGATED:**

There is no identified mitigation to this proposed reduction.

**#5 WHETHER THE SERVICE IS SPECIFICALLY REQUIRED BY STATE & /OR FEDERAL STATUTE - YES OR NO:**

No.

**Form B**