

**CITY OF WARRENVILLE
FISCAL YEAR 2027
CITY COUNCIL
BUDGET CONSIDERATION REQUEST**

Subject of Request: _____

Submitted by: _____

Check One: Cost Reduction New Project Service Changes Other

DETAILS

1. **Provide SPECIFIC Details on the Basics of this Budget Request Action:**

2. **Describe the ANTICIPATED GOAL of this Budget Request Action:**

3. **Identify the Relationship to the Strategic Plan and/or other Adopted City Council Plans:**

4. **Describe the First Year (FY 2027) On-Going Annual Costs Associated with this Budget Request Including staff time:**
Please Contact Staff for Assistance with Cost Estimates

5. **Have You Conducted Any Research on this Issue?** (Circle One) **Yes** **No**

If Yes, Please provide staff with any documentation you may have.

**PLEASE SUBMIT THIS FORM TO THE FINANCE DIRECTOR NO LATER THAN
OCTOBER 20, 2025**