

**STATE SENATE MEMBER ITEM IMPACT FOR FY2010-11  
IF NO MEMBER ITEMS ARE FUNDED FOR THE COMING FISCAL YEAR**

Please email to Bobbie Sackman, [bsackman@cscs-ny.org](mailto:bsackman@cscs-ny.org) or fax to (212) 398-8398. Contact Bobbie at 12-398-6565 X226 with any questions.

Agency \_\_\_\_\_

Contact \_\_\_\_\_

Phone # \_\_\_\_\_ email \_\_\_\_\_

(total amount) - \$ \_\_\_\_\_

State Senator(s) - \_\_\_\_\_

Purpose of funds \_\_\_\_\_

Number of seniors impacted \_\_\_\_\_

What services would be lost: (check all that apply)

meals (meals-on-wheels and congregate)

senior center programs/fixed costs

transportation

social adult day care

NORCs

case management

staff layoffs \_\_\_\_\_ number (if know)

other (specify) \_\_\_\_\_

Other comments: (please print or write clearly)