



# City of Milwaukee Fiscal Impact Statement

|          |                                                                                                                                                                                                               |                                  |                                   |                                                |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------|------------------------------------------------|
| <b>A</b> | <b>Date</b> <u>6/24/2020</u>                                                                                                                                                                                  | <b>File Number</b> <u>200293</u> | <input type="checkbox"/> Original | <input checked="" type="checkbox"/> Substitute |
|          | <b>Subject</b> Resolution approving a memorandum of understanding between the City of Milwaukee and the Milwaukee Fire Fighters' Association of Firefighters Local 215, IAFF, AFL-CIO relating to hazard pay. |                                  |                                   |                                                |

|          |                                                                                           |
|----------|-------------------------------------------------------------------------------------------|
| <b>B</b> | <b>Submitted By (Name/Title/Dept./Ext.)</b> <u>Nicole Fleck/Labor Negotiator/DER/3371</u> |
|----------|-------------------------------------------------------------------------------------------|

|          |                  |                                                                                                                 |
|----------|------------------|-----------------------------------------------------------------------------------------------------------------|
| <b>C</b> | <b>This File</b> | <input checked="" type="checkbox"/> Increases or decreases previously authorized expenditures.                  |
|          |                  | <input type="checkbox"/> Suspends expenditure authority.                                                        |
|          |                  | <input type="checkbox"/> Increases or decreases city services.                                                  |
|          |                  | <input type="checkbox"/> Authorizes a department to administer a program affecting the city's fiscal liability. |
|          |                  | <input type="checkbox"/> Increases or decreases revenue.                                                        |
|          |                  | <input type="checkbox"/> Requests an amendment to the salary or positions ordinance.                            |
|          |                  | <input type="checkbox"/> Authorizes borrowing and related debt service.                                         |
|          |                  | <input type="checkbox"/> Authorizes contingent borrowing (authority only).                                      |
|          |                  | <input type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget.             |

|          |                  |                                                |                                                          |
|----------|------------------|------------------------------------------------|----------------------------------------------------------|
| <b>D</b> | <b>Charge To</b> | <input type="checkbox"/> Department Account    | <input type="checkbox"/> Contingent Fund                 |
|          |                  | <input type="checkbox"/> Capital Projects Fund | <input type="checkbox"/> Special Purpose Accounts        |
|          |                  | <input type="checkbox"/> Debt Service          | <input checked="" type="checkbox"/> Grant & Aid Accounts |
|          |                  | <input type="checkbox"/> Other (Specify) _____ |                                                          |

| <b>E</b> | Purpose            | Specify Type/Use | Expenditure           | Revenue        |
|----------|--------------------|------------------|-----------------------|----------------|
|          | Salaries/Wages     |                  | \$0.00                | \$0.00         |
|          |                    |                  | \$0.00                | \$0.00         |
|          | Supplies/Materials |                  | \$0.00                | \$0.00         |
|          |                    |                  | \$0.00                | \$0.00         |
|          | Equipment          |                  | \$0.00                | \$0.00         |
|          |                    |                  | \$0.00                | \$0.00         |
|          | Services           |                  | \$0.00                | \$0.00         |
|          |                    |                  | \$0.00                | \$0.00         |
|          | Other              | Hazard Pay       | \$2,138,500.00        | \$0.00         |
|          |                    |                  | \$0.00                | \$0.00         |
|          | <b>TOTALS</b>      |                  | <b>\$2,138,500.00</b> | <b>\$ 0.00</b> |

**F**

**Assumptions used in arriving at fiscal estimate.**

This assumes 658 individuals are eligible for the pay for 13 pay periods.

**G**

**For expenditures and revenues which will occur on an annual basis over several years check the appropriate box below and then list each item and dollar amount separately.**

1-3 Years     3-5 Years

1-3 Years     3-5 Years

1-3 Years     3-5 Years

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**H**

**List any costs not included in Sections D and E above.**

\_\_\_\_\_

**I**

**Additional information.**

\_\_\_\_\_

**J**

**This Note**     **Was requested by committee chair.**