



City of Milwaukee Fiscal Impact Statement

A **Date** 7/14/2016 **File Number** 160041 **Original** **Substitute**

Subject Resolution authorizing the Department of Employee Relations to enter into a contract with a Group Life Insurance vendor for a three year period, 2017-2019.

B **Submitted By (Name/Title/Dept./Ext.)** Renee Joos, Employee Benefits Director, DER, 2938

C **This File**

- Increases or decreases previously authorized expenditures.
- Suspends expenditure authority.
- Increases or decreases city services.
- Authorizes a department to administer a program affecting the city's fiscal liability.
- Increases or decreases revenue.
- Requests an amendment to the salary or positions ordinance.
- Authorizes borrowing and related debt service.
- Authorizes contingent borrowing (authority only).
- Authorizes the expenditure of funds not authorized in adopted City Budget.

D **Charge To**

- Department Account
- Capital Projects Fund
- Debt Service
- Other (Specify) _____
- Contingent Fund
- Special Purpose Accounts
- Grant & Aid Accounts

	Purpose	Specify Type/Use	Expenditure	Revenue
E	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	0001 4500 S139 006100	\$850,000.00	\$0.00
			\$0.00	\$0.00
	TOTALS		\$850,000.00	\$ 0.00

F

Assumptions used in arriving at fiscal estimate.

Net City annual cost increase based on projections from the 2016 Request for Proposal response.

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.