



City of Milwaukee Fiscal Impact Statement

A	Date	<u>7/12/2016</u>	File Number	<u>160396</u>	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Substitute
	Subject	<u>Communication from the Health Department relating to amending the 2016 Positions Ordinance relative to adding a position or Environmental & Disease Control Specialist in the Disease Control & Environmental Health Services Division</u>				

B	Submitted By (Name/Title/Dept./Ext.)	<u>David Piedt/Business Operations Manager-Health/Health Dept./3997</u>
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C	This File	<input checked="" type="checkbox"/> Increases or decreases previously authorized expenditures.
		<input type="checkbox"/> Suspends expenditure authority.
		<input checked="" 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 checked="" 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.	

D	Charge To	<input checked="" 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 type="checkbox"/> Grant & Aid Accounts
		<input type="checkbox"/> Other (Specify) _____	

Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages		\$21,961.68	\$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		\$0.00	\$0.00
		\$0.00	\$0.00
TOTALS		\$21,961.68	\$ 0.00

F Assumptions used in arriving at fiscal estimate. The starting bi-weekly salary for this position times the remaining 12 pay periods for 2016.

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.

<input type="checkbox"/> 1-3 Years	<input checked="" type="checkbox"/> 3-5 Years	\$47,584 per year	_____
<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years		_____
<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years		_____

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

I Additional information. This position will be funded by position vacancy savings in our O&M budget.

J This Note Was requested by committee chair.