



City of Milwaukee Fiscal Impact Statement

A

Date February 18, 2016 **File Number** 151590

Subject A substitute ordinance relating to overtime compensation for Milwaukee police department technical communications division civilian employees.

B

Submitted By (Name/Title/Dept./Ext.) Nicole Fleck/Labor Relations Officer/DER/x3371

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

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

E

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

F

Assumptions used in arriving at fiscal estimate.

The calculation takes into account the number of current employees, current number of hours worked on overtime for emergency purposes and calculates the cost of those hours now being paid at 1.5x. This number may increase or decrease based on number of hours worked and due to the proposed changes to certain pay ranges within the Technical Communications Division in file #150043.

G			
Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages	Emergency OT	\$63,877	
Supplies/Materials			
Equipment			
Services			
Other			
TOTALS		\$63,877	

H	
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 type="checkbox"/> 3-5 Years _____
<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years _____
<input type="checkbox"/> 1-3 Years	<input type="checkbox"/> 3-5 Years _____

I
List any costs not included in Sections E and F above.

J
Additional information.
