## **CITY OF MILWAUKEE FISCAL NOTE**

DATE: Februa:	ry 6, 200	2		FILE NUMBER: 011378 Original Fiscal Note Substitute				
BJECT: Blue	Cross Blu	eShield United	of Wisconsin Co	ntract Exten	sion			
SUBMITTED BY (r	name/title/dep	l./ext.):Michael_	Brady/Employee	Renefits Man	ager/DEP/23	17		
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C) CHECK ONE:	☑ ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES.  ☐ ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW.							
	□ NOT APP	LICABLE/NO FISCAL IM	ACT.					
D) CHARGE TO:	☐ DEPARTMENTAL ACCOUNT (DA) ☐ CONTINGENT FUND (CF) ☐ CAPITAL PROJECTS FUND (CPF) ☐ SPECIAL PURPOSE ACCOUNTS (SPA)							
	☐ PERM. IMPROVEMENT FUNDS (PIF) ☐ GRANT & AID ACCOUNTS (G & AA)							
	OTHER (S	SPECIFY)						
E) PURPO	SE	SPECIF	Y TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS	
SALARIES/WAGE	S:							
SUPPLIES:								
JOFF LIEG.								
MATERIALS:								
NEW EQUIPMENT	:			·				
						****		
EQUIPMENT REPA	AIR:							
OTHER:		613001	0001 1654 1613	S SI 15 2001				
TOTALS	<del></del>					<del>-</del>		
IOTALO								
			CUR ON AN <b>ANNUAL</b> BA	SIS OVER SEVERAL	YEARS CHECK TH	E APPROPRIAT	E BOX	
BELOW AND TH	IEN LIST EACH	ITEM AND DOLLAR AM	OUNT SEPARATELY.					
1-3 YEARS		☐ 3-5 YEARS						
1-3 YEARS		3-5 YEARS						
1-3 YEARS		3-5 YEARS			<del> </del>			
G) LIST ANY ANTI	CIPATED FUT	URE COSTS THIS PRO	ECT WILL REQUIRE FO	R COMPLETION:				
			-					
H) COMPUTATION	NS USED IN AF	RIVING AT FISCAL ES	TIMATE:					

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE