



# City of Milwaukee Fiscal Impact Statement

|          |         |  |             |       |  |                                     |
|----------|---------|--|-------------|-------|--|-------------------------------------|
| <b>A</b> | Date    | <u>10/3/2016</u>   | File Number | _____ | <input checked="" type="checkbox"/> Original | <input type="checkbox"/> Substitute |
|          | Subject | <u>Resolution Authorizing Payment of the Uninsured Motorist Claim of Iqmet Sherifi</u> |             |       |  |                                     |

|          |                                      |   |
|----------|--------------------------------------|---|
| <b>B</b> | Submitted By (Name/Title/Dept./Ext.) | <u>Miriam R. Horwitz, Deputy City Attorney, X2601</u> |
|----------|--------------------------------------|---|

|          |           |   |
|----------|-----------|---|
| <b>C</b> | This File | <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> | Charge To | <input type="checkbox"/> Department Account    | <input type="checkbox"/> Contingent Fund                     |
|          |           | <input type="checkbox"/> Capital Projects Fund | <input checked="" type="checkbox"/> Special Purpose Accounts |
|          |           | <input type="checkbox"/> Debt Service          | <input 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         |
|          | 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              | Uninsured Motorist Settlement<br>Iqmet Sherifi | \$25,000.00        | \$0.00         |
|          |                    |  | \$0.00             | \$0.00         |
|          | <b>TOTALS</b>      |  | <b>\$25,000.00</b> | <b>\$ 0.00</b> |

