



# City of Milwaukee Fiscal Impact Statement

**A** **Date** 6/8/2021 **File Number** 1032-2020-629  **Original**  **Substitute**  
**Subject** Payment of uninsured motorist settlement of Taylor Baas

**B** **Submitted By (Name/Title/Dept./Ext.)** Yolanda Y. McGowan, Deputy city Attorney, X2601

**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

**E**

Purpose	Specify Type/Use	Expenditure	Revenue
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	Uninsured Motorist Settlement	\$25,000.00	\$0.00
		\$0.00	\$0.00
<b>TOTALS</b>		<b>\$25,000.00</b>	<b>\$ 0.00</b>

F

Assumptions used in arriving at fiscal estimate. \_\_\_\_\_

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.