



# City of Milwaukee Fiscal Impact Statement

## A

**Date** June 12, 2013 **File Number** 130228

**Subject** Substitute resolution relative to the acceptance and funding of the Public Health Preparedness (CDC) Grant from the State of Wisconsin - Department of Health Services.

## B

**Submitted By (Name/Title/Dept./Ext.)** Yvette M. Rowe, Business Operations Manager, Health, X3997

## 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.

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**G**

Purpose	Specify Type/Use	Expenditure	Revenue
<b>Salaries/Wages</b>	Salaries	\$181,496	\$181,496
	Fringe Benefits	\$ 90,748	\$ 90,748
<b>Supplies/Materials</b>		\$ 1,500	\$ 1,500
<b>Equipment</b>		\$ 5,000	\$ 5,000
<b>Services</b>		\$ 10,000	\$ 10,000
<b>Other</b>		\$ 22,987	\$ 22,987
<b>TOTALS</b>		\$311,731	\$311,731

**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.

- 1-3 Years     3-5 Years    \_\_\_\_\_  
 1-3 Years     3-5 Years    \_\_\_\_\_  
 1-3 Years     3-5 Years    \_\_\_\_\_

**I**

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

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**J**

Additional information.

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