## CITY OF MILWAUKEE FISCAL NOTE

A) DATE: April 5	, 2005			FILENUMB				
				ORIGINAL FISC	AL NOTE X SUBSTI	ITUTE		
SUBJECT: Settlement of the uninsured motorist claim of Barry Kusik								
B) SUBMITTED BY name/title/dept./ext.): Rudolph M. Konrad, Deputy City Attorney, ext. 2601								
C) CHECK ONE: X ADOPTION OF THIS FILE AUTHORIZES EXPENDIT URES.								
☐ ADOPTION OFT HIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURT HER COMMON COUNCIL ACTION NEEDED.  LIST ANTICP ATED COSTS IN SECTION G BELOW.								
□ NOT APPLICABLE/NO FISCAL IMPACT.								
D) CHARGE TO:	DEP	ARTMENTAL ACCOUNT (DA)		CONTINGENT FUND (CF)				
	□САР	'IT AL PROJECTS FU	AL PROJECTS FUND (CPF)		${f X}$ SPECIAL PURPOSE ACCOUNT S (SPA)			
	☐ PER	M. IMPROVEMENT	FUNDS (PIF)	☐ GRANT & AID	☐ GRANT & AID ACCOUNTS (G & AA)			
OT HER (SPECIFY) Damages and Claims Fund								
E) PURPOSE	E) PURPOSE		SPECIFY TYPE/USE		EXPENDITURE	REVENUE	SAVINGS	
SALARIES/WAGES:								
SUPPLIES:							-	
MATERIALS:								
NEW EQUIPMENT:								
EQ UIPMENT REPAI	R:							
OTHER:		Uninsured Motorist Claim Settlement		636505 0001 1490	5,000.00			
				2631 S118				
TOTALS				5,000.00				
F) FOR EVERNORTH	DEC AND		H WILL OCCUR ON AN <b>ANN</b> U	IAI DACIC OVED CEV	EDAL VEADS CHECK	THE ADDDODD	LATE DOV	
			LLAR AMOUNT SEPARATEL		ERAL TEARS CHECK	CTILE ALT NOT K	AIL BOX	
☐ 1-3 YEARS		☐ 3-5 YEARS						
☐ 1-3 YEARS			☐ 3-5 YEARS					
☐ 1-3 YEARS		☐ 3-5 YEARS						
G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:								
H) COMPUTATION	IS USED	IN ARRIVING AT F	ISCAL ESTIMATE:					

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE  $\square$