

# CITY OF MILWAUKEE FISCAL NOTE

CC-170 (REV.6/86)  
Ref: GENFISCALNT.MST

A) DATE: *January 30, 2005*

FILE NUMBER: **041503**  
X Original Fiscal Note    Substitute

SUBJECT: *University of Wisconsin Medical School Grant for the Milwaukee Homicide Review Commission*

B) SUBMITTED BY (name/title/dept./ext.): *Barbara Butler, Budget Manager (Police Department), 935-7452*

<b>C) CHECK ONE:</b>	<input checked="" type="checkbox"/> ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES. <input type="checkbox"/> ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES; FURTHER COMMON COUNCIL ACTION NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW. <input type="checkbox"/> NOT APPLICABLE/NO FISCAL IMPACT.
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<b>D) CHARGE TO:</b>	<input type="checkbox"/> DEPARTMENTAL ACCOUNT (DA) <input type="checkbox"/> CAPITAL PROJECTS FUND (CPF) <input type="checkbox"/> PERM. IMPROVEMENT FUNDS (PIF) <input type="checkbox"/> OTHER (SPECIFY)	<input type="checkbox"/> CONTINGENT FUND (CF) <input type="checkbox"/> SPECIAL PURPOSE ACCOUNTS (SPA) <input checked="" type="checkbox"/> GRANT & AID ACCOUNTS (G & AA)
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E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
<b>SALARIES/WAGES:</b>					
<b>SUPPLIES:</b>					
<b>MATERIALS:</b>					
<b>NEW EQUIPMENT:</b>					
<b>EQUIPMENT REPAIR:</b>					
<b>OTHER:</b>			<b>441,488</b>	<b>400,000</b>	
<b>TOTALS</b>			<b>441,488</b>	<b>400,000</b>	

<p><del>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</del></p>		
1-3 YEARS	3-5 YEARS	
1-3 YEARS	3-5 YEARS	
1-3 YEARS	3-5 YEARS	

<p><b>G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:</b></p> <p><i>In addition to the above, the City will provide \$41,488 as an in-kind contribution</i></p>
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<p><b>H) COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE:</b></p>
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PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE