



# City of Milwaukee Fiscal Impact Statement

Date 1/9/2025 File Number 1030-2023-1274 ☒ Original ☐ Substitute

A Subject Settlement Authorization for Robert Kohlhoff and State of Wisconsin Department of Health Services, Milwaukee County Case No. 23CV5473

B Submitted By (Name/Title/Dept./Ext.) Kevin P. Todt, Assistant 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

<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) <u>Damages and Claim Fund Account No. 001-S118-006300</u>	

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	Settlement	\$200,000.00	\$0.00
			\$0.00	\$0.00
	TOTALS		\$200,000.00	\$ 0.00

**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.