



City of Milwaukee Fiscal Impact Statement

A	Date	6/28/2011	File Number		<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Substitute
	Subject	Resolution relating to the expenditure of funds to be reimbursed by greater than anticipated revenues-Firemen's Relief				

B	Submitted By (Name/Title/Dept./Ext.)	Beverly LaFlex/Accounting Manager/Comptroller/x2308
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C	<p>This File</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Increases or decreases previously authorized expenditures. <input type="checkbox"/> Suspends expenditure authority. <input type="checkbox"/> Increases or decreases city services. <input type="checkbox"/> Authorizes a department to administer a program affecting the city's fiscal liability. <input type="checkbox"/> Increases or decreases revenue. <input type="checkbox"/> Requests an amendment to the salary or positions ordinance. <input type="checkbox"/> Authorizes borrowing and related debt service. <input type="checkbox"/> Authorizes contingent borrowing (authority only). <input type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget.
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D	<p>Charge To</p> <ul style="list-style-type: none"> <li style="width: 50%;"><input type="checkbox"/> Department Account <li style="width: 50%;"><input type="checkbox"/> Contingent Fund <li style="width: 50%;"><input type="checkbox"/> Capital Projects Fund <li style="width: 50%;"><input checked="" type="checkbox"/> Special Purpose Accounts <li style="width: 50%;"><input type="checkbox"/> Debt Service <li style="width: 50%;"><input type="checkbox"/> Grant & Aid Accounts <li style="width: 50%;"><input type="checkbox"/> Other (Specify) _____
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	Purpose	Specify Type/Use	Expenditure	Revenue
E	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	SPA-Firement's Relief S133	\$535.72	\$0.00
			\$0.00	\$0.00

TOTALS		\$ 535.72	\$ 0.00
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F	Assumptions used in arriving at fiscal estimate.	1/8 of State Aid revenue received of \$1,044,285.74=\$130,535.72 minus \$130,000.00 of 2011 budget appropriation=\$535.72 Supplemental Appropriation requested.	
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G	<p>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.</p> <p> <input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years _____ <input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years _____ <input type="checkbox"/> 1-3 Years <input type="checkbox"/> 3-5 Years _____ </p>
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H	List any costs not included in Sections D and E above.	
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I	Additional information.	
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J	This Note	<input type="checkbox"/> Was requested by committee chair.	
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