CITY OF MILWAUKEE FISCAL NOTE

A)	DATE	November 15, 2005	FILE	NUMBER:	050962	2	
			Origi	inal Fiscal Note	Substitute	X	
SUBJECT: Resolution relative to application, funding, and expenditure of the Municipal Health Services Grant							
B) SUBMITTED BY (Name/title/dept./ext.): Janet Nell, Administrative Specialist-Sr, Health, 2251							
C)	C) CHECK ONE: X ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES						
		ADOPTION OF THIS FILE DOES NOT AUTHORIZE EXPENDITURES: FURTHER COMMON COUNCIL ACTION NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW.					
	NOT APPLICABLE/NO FISCAL IMPACT.						
D)	D) CHARGE TO: DEPARTMENT ACCOUNT(DA) CONTINGENT FUND (CF)				 F)		
		CAPITAL PROJECTS FUND (CPF)	SPECIAL PURPOSE ACCOUNTS (SPA)				
		PERM. IMPROVEMENT FUNDS (PIF)	X	X GRANT & AID ACCOUNTS (G & AA)			
		OTHER (SPECIFY)					
E)	PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REV ENUE	SAVINGS	
SAL	ARIES/WAGES:						
CLID	DL ICC.						
SUP	PLIES:						
MA	ΓERIALS:						
NEW	/ EQUIPMENT:						
EQU	IPMENT REPAIR:						
OTH	IER:			3,500,000	3,500,000		
				700,000	700,000		
тот	ALS			4,200,000	4,200,000		
F)	FOR EXPENDITURES	S AND REVENUES WHICH WILL OCCUR ON AN	ANNUAL BASIS OV	ER SEVERAL YEARS	CHECK THE		
	A PPROPRIATE BOX	K BELOW AND THEN LIST EACH ITEM AND DOLL	_AR AMOUNT SEPA	RATELY.			
Г	1-3 YEARS	3-5 YEARS					
<u>L</u>	1-3 YEARS	3-5 YEARS 3-5 YEARS	+				
1-3 YEARS		3-5 YEARS	1				
		<u> </u>	-				
G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:							
-/							
H)	COMPLITATIONS	USED IN ARRIVING AT FISCAL ESTIMATE: D)enartment Estima	ates			

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE	
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