



City of Milwaukee Fiscal Impact Statement

A	Date	<u>11/28/2022</u>	File Number	<u>221109</u>	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Substitute
	Subject	<u>Resolution approving a Project Plan, authorizing expenditures, authorizing Grant Agreements, and creating Tax Incremental District No. 111 (East North Avenue), in the 3rd Aldermanic District.</u>				

B	Submitted By (Name/Title/Dept./Ext.)	<u>Lafayette Crump, Commissioner, DCD, x5800</u>
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C	<p>This File</p> <p><input type="checkbox"/> Increases or decreases previously authorized expenditures.</p> <p><input type="checkbox"/> Suspends expenditure authority.</p> <p><input type="checkbox"/> Increases or decreases city services.</p> <p><input type="checkbox"/> Authorizes a department to administer a program affecting the city's fiscal liability.</p> <p><input checked="" type="checkbox"/> Increases or decreases revenue.</p> <p><input type="checkbox"/> Requests an amendment to the salary or positions ordinance.</p> <p><input type="checkbox"/> Authorizes borrowing and related debt service.</p> <p><input type="checkbox"/> Authorizes contingent borrowing (authority only).</p> <p><input type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget.</p>
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D	<p>Charge To</p> <p><input type="checkbox"/> Department Account</p> <p><input checked="" type="checkbox"/> Capital Projects Fund</p> <p><input type="checkbox"/> Debt Service</p> <p><input type="checkbox"/> Other (Specify) _____</p> <p><input type="checkbox"/> Contingent Fund</p> <p><input type="checkbox"/> Special Purpose Accounts</p> <p><input type="checkbox"/> Grant & Aid Accounts</p>
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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	Contribution to project costs and administrative expenses.	\$4,100,000.00	\$4,100,000.00
			\$0.00	\$0.00
	TOTALS		\$4,100,000.00	\$4,100,000.00

F Assumptions used in arriving at fiscal estimate. See the Project Plan and Feasibility Study for TID No. 111.

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.

<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	_____

H List any costs not included in Sections D and E above. _____

I Additional information. _____

J This Note Was requested by committee chair.