



# City of Milwaukee Fiscal Impact Statement

<b>A</b>	<b>Date</b> <u>5/30/2012</u>	<b>File Number</b> <u>101341</u>	<input type="checkbox"/> Original	<input checked="" type="checkbox"/> <b>Substitute</b>
	<b>Subject</b> <u>Substitute resolution dissolving Tax Incremental District No. 55 (Holt Plaza) and authorizing the City Comptroller to distribute excess incremental revenue to overlying taxing districts.</u>			

<b>B</b>	<b>Submitted By (Name/Title/Dept./Ext.)</b> <u>Rocky Marcoux, Commissioner, DCD, x5800</u>
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<b>C</b>	<b>This File</b>	<input 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 checked="" 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.

<b>D</b>	<b>Charge To</b>	<input type="checkbox"/> Department Account	<input type="checkbox"/> Contingent Fund
		<input type="checkbox"/> Capital Projects Fund	<input type="checkbox"/> Special Purpose Accounts
		<input type="checkbox"/> Debt Service	<input type="checkbox"/> Grant & Aid Accounts
		<input type="checkbox"/> Other (Specify) _____	

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	Surplus revenue returned to all taxing districts	\$0.00	\$871,476.00 (estimate)
			\$0.00	\$0.00
	<b>TOTALS</b>		<b>\$ 0.00</b>	<b>\$871,476.00</b>

<b>F</b>	Total Project Costs - \$1,772,132
	Total Increments Levied - \$2,643,608
	Assumptions used in arriving at fiscal estimate. Excess Increments - (\$871,476) _____

<b>G</b>	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    _____

<b>H</b>	List any costs not included in Sections D and E above. _____
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<b>I</b>	Additional information. _____
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<b>J</b>	This Note <input type="checkbox"/> Was requested by committee chair.
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