



City of Milwaukee Fiscal Impact Statement

A Date 7/30/2024 File Number 1048-2024-1054 Original Substitute
 Subject Resolution Authorizing Claim Settlement Payment to Badger Mutual Insurance Company

B Submitted By (Name/Title/Dept./Ext.) Julie P. Wilson, Deputy 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 Department Account Contingent Fund
 Capital Projects Fund Special Purpose Accounts
 Debt Service Grant & Aid Accounts
 Other (Specify) 636506 0410 6410 2631 R643

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	Claim Settlement Payment	\$14,191.04	\$0.00
		\$0.00	\$0.00
TOTALS		\$14,191.04	\$ 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.

<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.