



# City of Milwaukee Fiscal Impact Statement

**Date**

**File Number**

**Original**

**Substitute**

**A**

**Subject**

**B**

**Submitted By (Name/Title/Dept./Ext.)**

**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**

**This Note**

- Was requested by committee chair

**E**

**Charge To**

- Department Account
- Contingent Fund
- Capital Projects Fund
- Special Purpose Accounts
- Debt Service
- Grant & Aid Accounts
- Other (Specify)

**F**

Purpose	Specify Type/Use	Expenditure	Revenue
<b>Salaries/Wages</b>			
<b>Supplies/Materials</b>			
<b>Equipment</b>			
<b>Services</b>			
<b>Other</b>			
<b>TOTALS</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.**

G

1-3 Years     3-5 Years

1-3 Years     3-5 Years

1-3 Years     3-5 Years

**List any costs not included in Sections E and F above.**

H

**Assumptions used in arriving at fiscal estimate.**

I

**Additional information.**

J