

CITY OF MILWAUKEE FISCAL NOTE

CC-170 (REV. 6/86)

A) DATE: January 15, 2003

FILE NUMBER: _____
Original Fiscal Note Substitute

SUBJECT: Transfer of \$221,302 from the 2002 Common Council Contingent Fund to the Health Care Claims Special Purpose Account 613001 0001 1654 1613 S114 2002.

B) SUBMITTED BY (name/title/dept./ext.): Michael Brady/Manager/DER-EBD/x2317

C) CHECK ONE:

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.

C) CHECK ONE:

DEPARTMENTAL ACCOUNT (DA)

CAPITAL PROJECTS FUND (CPF)

PERM. IMPROVEMENT FUNDS (PIF)

OTHER (SPECIFY)

CONTINGENT FUND (CF)

SPECIAL PURPOSE ACCOUNTS (SPA)

GRANT & AID ACCOUNTS (G & AA)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
SALARIES/WAGES:					
SUPPLIES:					
MATERIALS:					
NEW EQUIPMENT:					
EQUIPMENT REPAIR:					
OTHER:					
Health Care Claims	613001 0001 1654 1613 S114 2002		\$221,302		
TOTALS			\$221,302		

F) 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	

F) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:

H) COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE:

YTD EXPENDITURES = \$25,983,763.24 + FINAL WPS INVOICE \$821,989.58 = **\$26,805,752.82** LESS BUDGET \$26,048,422 = **\$757,330.82** SHORTFALL.

\$757,330.82 SHORTFALL LESS FUND TRANSFERS OF \$430,794.75 FROM HMO; \$83,218.19 FROM DENTAL; \$22,016.50 CLAIMS COST CONTAINMENT = **\$221,301.38** SHORTFALL THAT NEEDS TO BE COVER BY CONTINGENT FUND TRANSFER.

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE