



City of Milwaukee Fiscal Impact Statement

A	Date	12/5/2025	File Number	251400	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Substitute
	Subject	Resolution authorizing the Commissioners of the Public Debt to market up to \$150,000,000 of general obligation revenue anticipation promissory notes.				

B	Submitted By (Name/Title/Dept./Ext.)	Joshua Benson, Capital Finance Manager, Comptroller, x2319
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C	This File	<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 type="checkbox"/> Increases or decreases revenue.	
	<input type="checkbox"/> Requests an amendment to the salary or positions ordinance.	
	<input checked="" 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.	

D	Charge To	<input type="checkbox"/> Department Account	<input type="checkbox"/> Contingent Fund
	<input type="checkbox"/> Capital Projects Fund	<input type="checkbox"/> Special Purpose Accounts	
	<input checked="" 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	Debt Service	\$5,625,000.00	\$0.00
			\$0.00	\$0.00
	TOTALS		\$5,625,000.00	\$ 0.00

F**Assumptions used in arriving at fiscal estimate.** Assumes \$150,000,000, 1-year RAN at 5.00% for 9 months.**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.**☐ 1-3 Years ☐ 3-5 Years☐ 1-3 Years ☐ 3-5 Years☐ 1-3 Years ☐ 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.**