



# City of Milwaukee Fiscal Impact Statement

A			
Date	6/22/16	File Number	160277
Subject	Classification and pay recommendations approved by the City Service Commission on June 22, 2016.		

B	
Submitted By (Name/Title/Dept./Ext.)	Sarah Trotter, Human Resources Representative Dept. of Employee Relations/X2398.

C	
This File	<input checked="" 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 checked="" 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.

D	
This Note	<input type="checkbox"/> Was requested by committee chair.

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

**F**

Assumptions used in arriving at fiscal estimate.

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**G**

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

**H**

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

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**I**

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

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**J**

Additional information.

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Department of Employee Relations  
Fiscal Note Spreadsheet

Finance and Personnel Committee Meeting of June 29, 2016  
City Service Commission Meeting of June 22, 2016

**NEW COSTS FOR 2016**

No. Pos.	Dept	From	PR	To	PR	Present Annual	New Annual	New Cost	Rollup	Total Rollup+ Sal
1	Employee Relations	Office Assistant II	6EN	Office Assistant III	6FN	N/A	N/A	N/A	Included in 2016 Budget	
1										\$0

Assume effective date is Pay Period 1, 2016 (December 20, 2015)

**NEW COSTS FOR FULL YEAR**

No. Pos.	Dept	From	PR	To	PR	Present Annual	New Annual	New Cost	Rollup	Total Rollup+ Sal
1	Employee Relations	Office Assistant II	6EN	Office Assistant III	6FN	N/A	N/A	N/A	Included in 2016 Budget	
1										\$0