

## **City of Milwaukee Fiscal Impact Statement**

Α							
Date	September 04, 2013	File Number	130580				
Subject	Substitute resolution relative to acceptance and funding of the CHAP (Community Healthcare Access Program) Challenge Grant from the United Way of Wisconsin.						

## В

Submitted By (Name/Title/Dept./Ext.) Yvette M. Rowe, Business Operations Manager-Health, X3997

C			
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 Was requested by committee chair. Note

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

Assumptions used in arriving at fiscal estimate.

G					
Purpose	Specify Type/Use	Expenditure	Revenue		
Salaries/Wages		\$	\$		
Supplies/Materials		\$	\$		
Equipment		\$	\$		
Services		\$	\$		
Other	Contractual	\$50,000	\$50,000		
TOTALS		\$50,000	\$50,000		

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.

Η

□ 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.

Additional information.

J