CITY OF MILWAUKEE FISCAL NOTE

| A) | DATE | | June 9, 2 | 2003 | | FI | LE NUM BER: | | | |
|--|---|--|------------------------|---|------------------------|-------------------------|-------------------------|-------------|---------|--|
| | | | | | | Or | iginal Fiscal Note X | Substitute | | |
| CLID | IECT. | Dagabutian | | liantina f | nadinar anadan sanadit | | LL and Dainaning Draves | etien Crent | | |
| SUBJECT: Resolution relative to application, funding, and expenditure of the Childhood Lead Poisoning Prevention Grant | | | | | | | | | | |
| | | | | | | | | | | |
| B) | SUBMIT | Janet Nell, Administrative Specialist-Sr, Health, 2251 | | | | | | | | |
| C) | C) CHECK ONE: X ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES | | | | | | | | | |
| 0, | CHLOR | ADOPTION OF THIS FILE AUTHORIZES EXPENDITURES: FURTHER COMMON COUNCIL ACTION | | | | | | | | |
| | | NEEDED. LIST ANTICIPATED COSTS IN SECTION G BELOW. | | | | | | | | |
| | | NOT APPLICABLE/NO FISCAL IMPACT. | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| D) | CHARG | ETO: | DEPARTMENT ACCOUNT(DA) | | | | CONTINGENT FUND (CF) | | | |
| | | l r | | | S FUND (CPF) | | SPECIAL PURPOSE A | | | |
| | | | | PERM. IMPROVEMENT FUNDS (PIF) LX GRANT & AID ACCOUNTS (G & | | | | | | |
| | | | OTHER | SPECIFY) | | | | | | |
| | | | | | | | | | | |
| E) | PURPO | SE | | SPECIFY T | YPE/USE | ACCOUNT | EXPENDITURE | REV ENUE | SAVINGS | |
| SAL | ARIES/W/ | AGES: | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| SUP | PLIES: | | | | | | | | | |
| | | | | | | | | | | |
| MAT | ERIALS: | | | | | | | | | |
| | | | | | | | | | | |
| NEW | EQUIPMI | ENT: | | | | | | | | |
| | | | | | | | | | | |
| EQU | IPM ENT F | REPAIR: | | | | | | | | |
| | | | | | | | | | | |
| ОТН | ER: | | | | | | \$538,034 | \$538,034 | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| TOT | ALS | | | | | | \$538,034 | \$538,034 | | |
| | | | | | | | | | | |
| F) | FOR EXP | ENDITURES | S AND REVENU | ES WHICH | WILL OCCUR ON AI | N ANNUAL BASIS (| OVER SEVERAL YEARS | S CHECK THE | | |
| | APPROP | RIATE BOX | BELOW AND | THEN LIST I | EACH ITEM AND DO | LLAR AMOUNT SEF | ARATELY. | | | |
| | | | | | | | | | | |
| | 1-3 | YEARS | | 3-5 | YEARS | | | | | |
| | 1-3 YEARS | | | 3-5 | YEARS | | | | | |
| 1-3 YEARS | | | 3-5 | YEARS | | | | | | |
| | | | | | | | | | | |
| G) | I IQT AI | ANTICII | פעדבט בו ודו ום | F COSTS T | THIS PRO IFOT WILL | I REQUIRE FOR CO | MPI FTION: | | | |
| G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION: | | | | | | | | | | |
| | | | | | | | | | | |

| COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE: Department Estimates | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
| | | | | | | | |
| PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE | | | | | | | |