CITY OF MILWAUKEE FISCAL NOTE

A)	DATE		October 2	9, 2003		FII	LE NUM BER:			
						Or	riginal Fiscal Note X	Substitute		
SUB	JECT:	Resolutio	n relative to ap	pplication, funding	g, and expenditur	e of the Operation	n Lead Elimination Acti	ion Program Grant		
B)	SUBMIT	TTED BY (Name/title/dept./ext.): Janet Nell, Administrative Specialist-Sr, Health, 2251								
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.							N	
	NOT APPLICABLE/NO FISCAL IMPACT.									
D) CHARGE TO: DEPARTMENT ACCOUNT(DA) CONTINGENT FUND (CF						(CF)				
			CAPITAL PROJECTS FUND (CPF)				SPECIAL PURPOSE ACCOUNTS (SPA)			
			PERM. I	PERM. IMPROVEMENT FUNDS (PIF) X GRANT & AID ACCOUNTS (G & AA)						
				HER (SPECIFY)						
E)	PURPO	SE		SPECIFY TYPE	/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS	
SAL	ARIES/W	AGES:								
SUP	PLIES:									
MA	TERIALS:									
NEW	EQUIPM	ENT:								
EQU	IPMENT F	REPAIR:								
ОТН	IER:		Estimated to	o be			\$800,000	\$800,000		
TOT	ALS						\$800,000	\$800,000		
F)	FOR EXP	PENDITURE	S AND REVEN	UES WHICH WILI	L OCCUR ON AN	ANNUAL BASIS C	OVER SEVERAL YEAR	RS CHECK THE		
	A PPROP	RIATE BOX	K BELOW AND	THEN LIST EAC	H ITEM AND DOLL	AR AMOUNT SEF	PARATELY.			
1-3 YEARS				3-5 YEARS						
	1-3 YEARS			3-5 YEARS						
1-3 YEARS				3-5 YEARS						
			•							
G)	I ICT A	NV ANTIC	ופאדבה בו ודי יי	DE COSTS TUIS	DDO IECT WILL	DECLIIDE FOR CO	MPI ETION:			
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							