## CITY OF MILWAUKEE FISCAL NOTE

| A)   | DATE   |  | January 31                    | 1, 2006      |                     | FIL                            | E NUM BER:            | 051351      |         |  |
|--|--|--|-------------------------------|--------------|---------------------|--------------------------------|-----------------------|-------------|---------|--|
|  |  |  |                               |              |                     | Ori                            | ginal Fiscal Note X   | Substitute  |         |  |
| ei ib  | IECT.  | Population   | a rolativa ta an              | olioation fu | ading and avnanditu | uro of the Sovuelly T          | ransmitted Diseases ( | Cront       |         |  |
| SUBJECT: Resolution relative to application, funding, and expenditure of the Sexually Transmitted Diseases Grant |  |  |                               |              |                     |                                |                       |             |         |  |
| D)   | D) CUDMITTED DV (New ability (death least )                |  |                               |              |                     |                                |                       |             |         |  |
| B)   | SORMIT   | SUBMITTED BY (Name/title/dept./ext.): Janet Nell, Administrative Specialist-Sr, Health, 2251 |                               |              |                     |                                |                       |             |         |  |
| C)   | CHECK ONE: X 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.   |                               |              |                     |                                |                       |             |         |  |
|  | NOT A PPLICA BLE/NO FISCAL IMPACT.                         |  |                               |              |                     |                                |                       |             |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
| D) CHARGE TO: DEPARTMENT ACCOUNT(DA) CONTINGENT FUND (CF)  |  |  |                               |              |                     |                                | CF)                   |             |         |  |
|  | OHANGE 10.   |  | CAPITAL PROJECTS FUND (CPF)   |              |                     | SPECIAL PURPOSE ACCOUNTS (SPA) |                       |             |         |  |
|  |  |  | PERM. IMPROVEMENT FUNDS (PIF) |              |                     |                                |                       |             |         |  |
|  |  | OTHER (SPECIFY)  |                               |              |                     |                                |                       |             |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
|  |  | _  |                               |              |                     |                                |                       |             |         |  |
| E)   | PURPO  |  |                               | SPECIFY T    | YPE/USE             | ACCOUNT                        | EXPENDITURE           | REV ENUE    | SAVINGS |  |
| SAL  | ARIES/W/   | AGES:  |                               |              |                     |                                |                       |             |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
| OLID   | DI IEO   |  |                               |              |                     |                                |                       |             |         |  |
| SUP  | PLIES:   |  |                               |              |                     |                                |                       |             |         |  |
| MAT  | ERIALS:  |  |                               |              |                     |                                |                       |             |         |  |
| IVIA   | ERIALS.  |  |                               |              |                     |                                |                       |             |         |  |
| NFW  | EQUIPMI  | FNT·   |                               |              |                     |                                |                       |             |         |  |
| 14277  | EQOII III  |  |                               |              |                     |                                |                       |             |         |  |
| EQU  | IPMENT R   | REPAIR:  |                               |              |                     |                                |                       |             |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
| отн  | ER:  |  |                               |              |                     |                                | \$473,758             | \$473,758   |         |  |
|  |  |  |                               |              |                     |                                |                       | -           |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
| тот  | ALS  |  |                               |              |                     |                                | \$473,758             | \$473,758   |         |  |
|  |  |  |                               |              |                     |                                |                       |             |         |  |
| F)   |  | EVIDITI IDEG   |                               |              | MAILL OCCUP ON A N  | I ANNILIAL DASIS O             | VER SEVERAL YEAR      |             |         |  |
| ''   |  |  |                               |              | EACH ITEM AND DOL   |                                |                       | 3 CHLOR THE |         |  |
|  | ATTROFT  | VIA IL BOX   | BLLOW AND                     | ITILIVEIOT I | SACITIENTAND DOL    | LARAWOON 3L /                  | ANATELT.              |             |         |  |
| Г  | 1-3 YEARS  |  |                               | 3-5          | YEARS               |                                |                       |             |         |  |
|  |  | YEARS  |                               |              | YEARS               |                                |                       |             |         |  |
| F  | 1-3 YEARS  |  |                               |              | YEARS               |                                |                       |             |         |  |
|  |  |  | 1                             |              |                     |                                |                       |             |         |  |
| 0,   |  | D/ A1710:  | DATED 5: 55 : :               | E 000T0 =    |                     | DECLUDE FOR CO.                | MDI 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                |  |  |  |  |  |  |  |