CITY OF MILWAUKEE FISCAL NOTE

A)	DATE		March 7,	2006	_	FI	LE NUM BER:	051579	9	
						0	riginal Fiscal Note X	Substitute		
SUBJECT: Resolution relative to application, funding, and expenditure of the Medical Assistance Outreach Grant										
B)	B) SUBMITTED BY (Name/title/dept./ext.): Janet Nell, Administrative Specialist-Sr, Health, 2251									
C)	CHECK ONE: A DOPTION 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.								ON	
	NOT APPLICABLE/NO FISCAL IMPACT.									
L INOT AFFEIGABLETING FIGGAL HVIFAGT.										
D) CHARGE TO:			DEPAR1	MENT ACCOUNT(DA	۸)	CONTINGENT FUND (CF)				
			CAPITAL PROJECTS FUND (CPF)				SPECIAL PURPOSE ACCOUNTS (SPA)			
			PERM. IN	MPROVEMENT FUND	S (PIF)	X	GRANT & AID ACCC	UNTS (G & AA)		
			_	(SPECIFY)						
							T	T	T	
E)	PURPO	SE		SPECIFY TYPE/USE		ACCOUNT	EXPENDITURE	REV ENUE	SAVINGS	
SAL	ARIES/W/	AGES:								
SUP	PLIES:									
MAT	TERIALS:									
NEW	EQUIPM	ENT:								
EQU	IPM ENT F	REPAIR:								
ОТН	ER:						\$15,000	\$15,000		
TOT	ALS						\$15,000	\$15,000		
F)	FOR EXP	ENDITURES	S AND REVENU	JES WHICH WILL OC	CUR ON AN A	NNUAL BASIS (OVER SEVERAL YEAR	S CHECK THE		
F) 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.										
Г	1-3	YEARS		3-5 YEARS						
Ī	1-3 YEARS			3-5 YEARS						
1-3 YEARS				3-5 YEARS						
			I							
G)	LIST AI	NY ANTICI	IPATED FUTUR	E COSTS THIS PRO	JECT WILL R	EQUIRE FOR CO	OMPLETION:			

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