City of Milwaukee
Fiscal Impact Statement

A	

Date May 21, 2015	**File Number** 150137
Subject Substitute resolution relative to the acceptance and funding of the Bioterrorism Focus Planning Grant from the State of Wisconsin - Department of Health Services.	

B

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

C

This File

- ☐ 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 Note

- ☐ Was requested by committee chair.

E

Charge To

☐ Department Account	☐ Contingent Fund
☐ Capital Projects Fund	☐ Special Purpose Accounts
☐ Debt Service	☒ Grant & Aid Accounts
☐ Other (Specify)	

F

Assumptions used in arriving at fiscal estimate.

_____

G			
Purpose	**Specify Type/Use**	**Expenditure**	**Revenue**
Salaries/Wages	Salaries	$ 5,000	$ 5,000
	Fringe Benefits	$ 2,250	$ 2,250
Supplies/Materials		$ 5,303	$ 5,303
Equipment		$ 15,000	$ 15,000
Services			
Other	Contractual Services	$ 4,000	$ 4,000
TOTALS		$ 31,553	$ 31,553

H
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.

☐ **1-3 Years** ☐ **3-5 Years** _____

☐ **1-3 Years** ☐ **3-5 Years** _____

☐ **1-3 Years** ☐ **3-5 Years** _____

I
List any costs not included in Sections E and F above.

_____

J
Additional information.

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