



City of Milwaukee Fiscal Impact Statement

A			
Date	June 6, 2017	File Number	1048-2016-2414
Subject	Resolution authorizing payment of the claim of Nancy Smith; C.I. File No. 1048-2016-2414		

B	
Submitted By (Name/Title/Dept./Ext.)	Patricia A. Fricker, Assistant City Attorney, ext. 2601

C	
This File	<input checked="" type="checkbox"/> Increases or decreases previously authorized expenditures. <input type="checkbox"/> Suspends expenditure authority. <input type="checkbox"/> Increases or decreases city services. <input type="checkbox"/> Authorizes a department to administer a program affecting the city's fiscal liability. <input type="checkbox"/> Increases or decreases revenue. <input type="checkbox"/> Requests an amendment to the salary or positions ordinance. <input type="checkbox"/> Authorizes borrowing and related debt service. <input type="checkbox"/> Authorizes contingent borrowing (authority only). <input type="checkbox"/> Authorizes the expenditure of funds not authorized in adopted City Budget.

D	
This Note	<input type="checkbox"/> Was requested by committee chair.

E	
Charge To	<input checked="" type="checkbox"/> Department Account <input type="checkbox"/> Contingent Fund <input type="checkbox"/> Capital Projects Fund <input type="checkbox"/> Special Purpose Accounts <input type="checkbox"/> Debt Service <input type="checkbox"/> Grant & Aid Accounts <input type="checkbox"/> Other (Specify) (DA) 636506-0410-6411-2631-R643

F	
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Assumptions used in arriving at fiscal estimate.

G			
Purpose	Specify Type/Use	Expenditure	Revenue
Salaries/Wages			
Supplies/Materials			
Equipment			
Services			
Other	Claim	\$14,575.00	
TOTALS		\$14,575.00	

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.
