CC-170 (REV. 6/86)

CITY OF MILWAUKEE FISCAL NOTE

A) DATE March 30, 2009 **FILE NUMBER:** 081098

Original Fiscal Note [X] Substitute [ ]

SUBJECT: Substitute resolution relative to application, acceptance and funding of the 2009 Milwaukee Intensive Nurse Home Visiting Program from Columbia St. Mary's.

B) SUBMITTED BY (Name/title/dept./ext.): Yvette M. Rowe, Business Operations Manager-Health, X3997

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 APPLICABLE/NO FISCAL IMPACT.

D) CHARGE TO:

- [ ] DEPARTMENT ACCOUNT (DA)
- [ ] CONTINGENT FUND (CF)
- [ ] CAPITAL PROJECTS FUND (CPF)
- [ ] SPECIAL PURPOSE ACCOUNTS (SPA)
- [ ] PERM. IMPROVEMENT FUNDS (PIF)
- [X] GRANT & AID ACCOUNTS (G & AA)
- [ ] OTHER (SPECIFY)

E) PURPOSE	SPECIFY TYPE/USE	ACCOUNT	EXPENDITURE	REVENUE	SAVINGS
SALARIES/WAGES:					
SUPPLIES:					
MATERIALS:					
NEW EQUIPMENT:					
EQUIPMENT REPAIR:					
OTHER:			$86,997	$86,997	
TOTALS			$86,997	$86,997	

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**.

[ ] 1-3 YEARS	[ ] 3-5 YEARS	
[ ] 1-3 YEARS	[ ] 3-5 YEARS	
[ ] 1-3 YEARS	[ ] 3-5 YEARS	

G) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:

H) COMPUTATIONS USED IN ARRIVING AT FISCAL ESTIMATE: Department Estimates

PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE ☐