## **CITY OF MILWAUKEE FISCAL NOTE**

| A)   | DATE   | 5/18/10         |   | FILE                 | NUMBER:           | 091571                         |         |  |  |
|--|--|-----------------|---|----------------------|-------------------|--------------------------------|---------|--|--|
|  |  |                 |   | Origi                | nal Fiscal Note x | Substitute                     |         |  |  |
| SUBJECT: Resolution relative to various legislative bills  |  |                 |   |                      |                   |                                |         |  |  |
| Trocolution Totalive to Various logislative since  |  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| B)   | B) SUBMITTED BY (Name/title/dept./ext.): Linda Elmer/Staff Assistant/City Clerks' Office |                 |   |                      |                   |                                |         |  |  |
| C)   | C) CHECK ONE. ADOPTION OF THIS FILE ALTHODIZES EXPENDITIBES                              |                 |   |                      |                   |                                |         |  |  |
| C)   | CHECK ONE:   |                 | 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.  |                      |                   |                                |         |  |  |
|  |  | x NOT APPLICABL | NOT APPLICABLE/NO FISCAL IMPACT.  |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| D)   | CHARGE TO:   | DEPARTMENT A    |   | CONTINGENT FUND (CF) |                   |                                |         |  |  |
|  |  |                 | CAPITAL PROJECTS FUND (CPF)   |                      |                   | SPECIAL PURPOSE ACCOUNTS (SPA) |         |  |  |
|  |  |                 | RM. IMPROVEMENT FUNDS (PIF) GRANT & AID ACCOUNTS (G & AA)   |                      |                   |                                |         |  |  |
|  | OTHER (SPECIFY)  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| E)   | PURPOSE  | SPECIFY         | TYPE/USE  | ACCOUNT              | EXPENDITURE       | REVENUE                        | SAVINGS |  |  |
| SAL  | ARIES/WAGES:   |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| OUD  | DI 150   |                 |   |                      |                   |                                |         |  |  |
| SUP  | PLIES:   |                 |   |                      |                   |                                |         |  |  |
| MAT  | ERIALS:  |                 |   |                      |                   |                                |         |  |  |
| - MAI  | ENIALO.  |                 |   |                      |                   |                                |         |  |  |
| NEW  | / EQUIPMENT:   |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| EQU  | IPMENT REPAIR  | :               |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| отн  | ER:  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| TOT  | ALS  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| EN FOR EVERNINETURES AND REVENUES WITHOUT WITH COOLIN ON AN ANNUAL PAGE OVER SEVERAL VEARS OUT OF 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.   |  |                 |   |                      |                   |                                |         |  |  |
| ALL TO A DELOTE AND THE PEOPLE AND T |  |                 |   |                      |                   |                                |         |  |  |
|  | 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:   |  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
|  |  |                 |   |                      |                   |                                |         |  |  |
| DI EASE LIST ANY COMMENTS ON DEVEDSE SIDE AND CHECK HEDE   |  |                 |   |                      |                   |                                |         |  |  |
| PLEASE LIST ANY COMMENTS ON REVERSE SIDE AND CHECK HERE  |  |                 |   |                      |                   |                                |         |  |  |