## CITY OF MILWAUKEE FISCAL NOTE CC-170 (REV. 6/86)

| <b>A) DATE:</b> June 11, 2010  |                              |                     | FILE NUMBER:      |                 |             |
|--|------------------------------|---------------------|-------------------|-----------------|-------------|
| Original Fiscal Note   SUBJECT: Resolution to cancel real estate taxes levied against a certain parcel bearing Taxkey Number   |                              |                     |                   |                 |             |
| 319-1289-000-X on the 2009 tax rolls, plus interest applicable to date of repayment, if appropriate.   |                              |                     |                   |                 |             |
| B) SUBMITTED BY (name/title/dept./ext.): Mary P. Reavey, Assessment Commissioner, Assessor's Office, Ext. 3101.  |                              |                     |                   |                 |             |
| 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. ☐ NOT APPLICABLE/NO FISCAL IMPACT. |                              |                     |                   |                 |             |
| D) CHARGE TO: ☐ DEPARTMENTAL ACCOUNT (DA) ☐ CONTINGENT FUND (CF) ☐ CAPITAL PROJECTS FUND (CPF) ☐ SPECIAL PURPOSE ACCOUNTS (SPA) ☐ PERM. IMPROVEMENT FUNDS (PIF) ☐ GRANT & AID ACCOUNTS (G & AA) ☐ OTHER SPECIFY)                             |                              |                     |                   |                 |             |
| E) DUDDOSE   | SDECIEV TVDE/IJSE            | ACCOUNT             | EXPENDITURE       | DEVENUE         | SAVINGS     |
| E) PURPOSE<br>SALARIES/WAGES:  | SPECIFY TYPE/USE             | ACCOUNT             | EXPENDITURE       | REVENUE         | SAVINGS     |
|  |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |
| SUPPLIES:  |                              |                     |                   |                 |             |
| MATERIALO  |                              |                     |                   |                 |             |
| MATERIALS:   |                              |                     |                   |                 |             |
| NEW EQUIPMENT:   |                              |                     |                   |                 |             |
| NEW EQUI MENT.   |                              |                     |                   |                 |             |
| EQUIPMENT REPAIR:  |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |
| OTHER 0001 Org 9990  | Remission of Taxes Fund      |                     | \$745.23          |                 |             |
| Prog 0001 Sub-cl S163  |                              |                     |                   |                 |             |
| Acct 006300  |                              |                     |                   |                 |             |
| TOTALS:  |                              |                     | \$745.23          |                 |             |
| F) FOR EXPENDITURES AND REVENUES WHICH WILL OCCUR ON AN ANNUAL BASIS OVER SEVERAL YEARS CHECK THE APPROPRIATE BOX  |                              |                     |                   |                 |             |
| BELOW AND THEN LIST EACH IT  |                              |                     | TOEVERAL TEARS OF | TEOR THE ALT RO | T RIATE BOX |
|  |                              |                     |                   |                 |             |
| ☐ 1-3 YEARS ☐ 3-5  | YEARS                        |                     |                   |                 |             |
| ☐ 1-3 YEARS ☐ 3-5  | ☐ 3-5 YEARS                  |                     |                   |                 |             |
| ☐ 1-3 YEARS ☐ 3-5  | YEARS                        |                     |                   |                 |             |
| C) LIST ANY ANTICIDATED SUTUR  | E COSTS THIS DDO IECT WILL D | PEOUIDE FOR COMPLET | TON:              |                 |             |
| G) LIST ANY ANTICIPATED FUTUR  | E COSTS THIS PROJECT WILL R  | REQUIRE FOR COMPLET | ION:              |                 |             |
|  |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |
| H) LIST ANY ANTICIPATED FUTURE COSTS THIS PROJECT WILL REQUIRE FOR COMPLETION:   |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |
|  |                              |                     |                   |                 |             |