## MILWAUKEE COUNTY FISCAL NOTE FORM

DATI	E: September 22, 2014	Origin	al Fiscal Note					
		Subst	tute Fiscal Note					
SUBJECT: From the Director, Department of Health and Human Services (DHHS), Requesting Approval to Allocate the Anticipated 2015 Community Development Block Grant (CDBG) and HOME Funding								
FISCAL EFFECT:								
	No Direct County Fiscal Impact		Increase Capital Expenditures					
	Existing Staff Time Required		Decrease Capital Expenditures					
	Increase Operating Expenditures (If checked, check one of two boxes below)		Increase Capital Revenues					
	Absorbed Within Agency's Budget Not Absorbed Within Agency's Budget		Decrease Capital Revenues					
	Decrease Operating Expenditures		Use of contingent funds					
	Increase Operating Revenues							
	Decrease Operating Revenues							
Indicate below the dollar change from budget for any submission that is projected to result in increased/decreased expenditures or revenues in the current year.								

	Expenditure or Revenue Category	Current Year	Subsequent Year
Operating Budget	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
Capital Improvement	Expenditure		
Budget	Revenue		
	Net Cost		

## **DESCRIPTION OF FISCAL EFFECT**

In the space below, you must provide the following information. Attach additional pages if necessary.

- A. Briefly describe the nature of the action that is being requested or proposed, and the new or changed conditions that would occur if the request or proposal were adopted.
- B. State the direct costs, savings or anticipated revenues associated with the requested or proposed action in the current budget year and how those were calculated. <sup>1</sup> If annualized or subsequent year fiscal impacts are substantially different from current year impacts, then those shall be stated as well. In addition, cite any one-time costs associated with the action, the source of any new or additional revenues (e.g. State, Federal, user fee or private donation), the use of contingent funds, and/or the use of budgeted appropriations due to surpluses or change in purpose required to fund the requested action.
- C. Discuss the budgetary impacts associated with the proposed action in the current year. A statement that sufficient funds are budgeted should be justified with information regarding the amount of budgeted appropriations in the relevant account and whether that amount is sufficient to offset the cost of the requested action. If relevant, discussion of budgetary impacts in subsequent years also shall be discussed. Subsequent year fiscal impacts shall be noted for the entire period in which the requested or proposed action would be implemented when it is reasonable to do so (i.e. a five-year lease agreement shall specify the costs/savings for each of the five years in question). Otherwise, impacts associated with the existing and subsequent budget years should be cited.
- D. Describe any assumptions or interpretations that were utilized to provide the information on this form.

A. The Director of the Department of Health and Human Services (DHHS) is requesting authorization to allocate approximately \$1,394,806 in anticipated 2015 Community Development Block Grant (CDBG) funding and \$1,287,077 in HOME funding.

- B. This funding is included in the 2015 DHHS Requested Budget for the Housing Division.
- C. While recognizing that future Federal allocations of grant awards are always uncertain, it is anticipated that the Federal Department of Housing and Urban Development (HUD) will provide the grant revenue in 2015. In no case will program expenditures exceed available revenue. As a result, there is no tax levy impact associated with approval of this request.
- D. No further assumptions are made.

<sup>&</sup>lt;sup>1</sup> If it is assumed that there is no fiscal impact associated with the requested action, then an explanatory statement that justifies that conclusion shall be provided. If precise impacts cannot be calculated, then an estimate or range should be provided.

Department/Prepared By	Clare O'Brien, Fiscal & Management Analyst	
Authorized Signature	Hith Clor	
Did DAS-Fiscal Staff Review?	☐ Yes ⊠ No	
Did CDPB Staff Review?	☐ Yes ☐ No ☒	Not Required