



**Fiscal Estimate Narratives**

**DOT 4/26/01**

LRB Number <b>01-2710/1</b>	Introduction Number <b>AB-328</b>	Estimate Type <b>Original</b>
<b>Subject</b> City of West Allis claim #1		

**Assumptions Used in Arriving at Fiscal Estimate**

The \$13,785.25 cost is the amount approved by the State Claims Board.

No Local Government Costs are anticipated.

Note: State Project ID #2160-00-24.

**Long-Range Fiscal Implications**

None.

## Fiscal Estimate Worksheet - 2001 Session

Detailed Estimate of Annual Fiscal Effect

Original     
  Updated     
  Corrected     
  Supplemental

LRB Number <b>01-2710/1</b>		Introduction Number <b>AB-328</b>	
<b>Subject</b>			
City of West Allis claim #1			
<b>I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):</b>			
A one time cost of \$13,785.25 is required for this claim.			
<b>II. Annualized Costs:</b>		<b>Annualized Fiscal Impact on funds from:</b>	
		Increased Costs	Decreased Costs
<b>A. State Costs by Category</b>			
	State Operations - Salaries and Fringes	\$0	
	(FTE Position Changes)		
	State Operations - Other Costs		
	Local Assistance		
	Aids to Individuals or Organizations		
	<b>TOTAL State Costs by Category</b>	<b>\$0</b>	<b>\$0</b>
<b>B. State Costs by Source of Funds</b>			
	GPR		
	FED		
	PRO/PRS		
	SEG/SEG-S		
<b>III. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)</b>			
		Increased Rev	Decreased Rev
	GPR Taxes	\$	\$
	GPR Earned		
	FED		
	PRO/PRS		
	SEG/SEG-S	0	0
	<b>TOTAL State Revenues</b>	<b>\$0</b>	<b>\$0</b>
<b>NET ANNUALIZED FISCAL IMPACT</b>			
		State	Local
	NET CHANGE IN COSTS	\$0	\$0
	NET CHANGE IN REVENUE	\$0	\$0
<b>Agency/Prepared By</b>		<b>Authorized Signature</b>	<b>Date</b>
DOT/ Anita Pusch (262) 548-8789		Carol Buckmaster (608) 267-6979	4/26/01