MILWAUKEE COUNTY FISCAL NOTE FORM

| DATE : 6/25/20 | | Original Fiscal Note | | | | | | | | | | |
|--|--|----------------------|-------------------------------|--|--|--|--|--|--|--|--|--|
| | | Subst | titute Fiscal Note | | | | | | | | | |
| SUBJECT: Retroactive authorization to apply for, and accept, the Coronavirus Emergency Supplemental Funds; and to create an accompanying trust fund. | | | | | | | | | | | | |
| FISC | CAL 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 | | Decrease Capital Revenues | | | | | | | | | |
| | Not Absorbed Within Agency's Budget | | | | | | | | | | | |
| | Decrease Operating Expenditures | | Use of contingent funds | | | | | | | | | |
| | Increase Operating Revenues | | | | | | | | | | | |
| | Decrease Operating Revenues | | | | | | | | | | | |
| | cate below the dollar change from budget for an eased/decreased expenditures or revenues in the o | - | · · · | | | | | | | | | |

| | Expenditure or Revenue Category | Current Year | Subsequent Year |
|---------------------|---------------------------------|--------------|-----------------|
| Operating Budget | Expenditure | \$58,008 | \$0 |
| | Revenue | \$58,008 | \$0 |
| | Net Cost | \$0 | \$0 |
| Capital Improvement | Expenditure | \$0 | \$0 |
| Budget | Revenue | \$0 | \$0 |
| | Net Cost | \$0 | \$0 |

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. ¹ 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 Office of Performance, Strategy & Budget requests retroactive authority to apply for, and accept, the 2020 Coraonavirus Emergency Supplemental Funding grant from the U.S. Department of Justice, and to create a trust fund to hold funds.

B. Approval of this request will result in 2020 Coronavirus Emergency Supplemental funds of \$58,008 being provided to the following agencies:

Division of Youth and Family Services (DYFS): \$4,920 Sheriff/House of Correction (HOC)/OEM : \$53,088*

*It is currently unclear which department will make the purchase for the Disinfecting Robots.

- C. It is anticipated that the County will spend most if not all of the money in 2020. If all the money is not spent, the County has 2 years to spend.
- D. This grant does not require a local match, however staff time is required because DAS-PSB is the fiscal agent for the grant. DAS-PSB will, upon receiving verification of expenses submitted for reimbursment consistent with the approved spending plan, transfer funds to the appropriate account from the trust account that will be created.

¹ 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 | DAS PSB | | | |
|-------------------------------|------------|-----|----|--|
| | Docusigned | - | | |
| Authorized Signature | 64FBF7B776 | | | |
| Did DAS-Fiscal Staff Review | w? 🖂 | Yes | No | |
| Did CBDP Review? ² | | Yes | No | |

² Community Business Development Partners' review is required on all professional service and public work construction contracts.