MILWAUKEE COUNTY FISCAL NOTE FORM

DATE: 04/17/2020

Original Fiscal Note ☒

Substitute Fiscal Note ☐

SUBJECT: <u>Establishing the classification for one, full time equivalent, Deputy Director in the Office of Emergency Management.</u>

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

☐ Decrease Capital Revenues

    ☐ Not Absorbed Within Agency's Budget

☐ 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	Not Applicable	Not Applicable
	Revenue	Not Applicable	Not Applicable
	Net Cost	Not Applicable	Not Applicable
Capital Improvement Budget	Expenditure	Not Applicable	Not Applicable
	Revenue	Not Applicable	Not Applicable
	Net Cost	Not Applicable	Not Applicable

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.

<u>A).</u> The Department of Human Resources requests the approval of the classification recommendation.
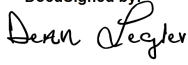
<u>B).</u> Not Applicable

<u>C).</u> Not Applicable

<u>D).</u> The Department of Human Resources is responsible for assessing the duties associated with the position and providing a job title and compensation recommendation.

Department/Prepared By: <u>Department of Human Resources</u>

Authorized Signature

Dean Legler, Director of Compensation/Human Resources Information Systems

Did DAS-Fiscal Staff Review?	☐	Yes	☒	No	
Did CBDP Review?[2]	☐	Yes	☐	No	☒ Not Required

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[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.

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