

MILWAUKEE COUNTY FISCAL NOTE FORM**DATE:** 6/13/2022Original Fiscal Note Substitute Fiscal Note **SUBJECT:** Petition for Waiver Request on Milwaukee County Code of General Ordinances Section 9.05(3) (a) for retired Correctional Officer Lieutenant Gregg Miliacca**FISCAL EFFECT:** No Direct County Fiscal Impact Expenditures Increase Capital 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	\$0	\$0
	Revenue	0	0
	Net Cost	\$0	0
Capital Improvement Budget	Expenditure	0	0
	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 approval of the requested action will allow the Superintendent of the House of Correction (HOC) to waive of Section 9.05 (3) (a) of the Ethics Code. This waiver will allow Gregg Miliacca, former Correctional Officer Lieutenant, to perform work for the County as a contractor.
- B. Approval of this resolutions has no direct County fiscal impact and does not require the expenditure of any funds
- C. Approval of this resolution has no budgetary impact.
- D. No assumptions were made.

Department/Prepared By HOC/Michael Bickerstaff

Authorized Signature Chantell Jewell

Did DAS-Fiscal Staff Review? Yes No

Did CBDP Review? Yes No Not Required

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.

Certificate Of Completion

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Signer Events

Signer Events	Signature	Timestamp
Chantell Jewell	<i>Chantell Jewell</i>	Sent: 6/13/2022 8:35:46 AM
Chantell.jewell@milwaukeecountywi.gov		Viewed: 6/13/2022 8:39:38 AM
Superintendent		Signed: 6/13/2022 8:39:48 AM
Milwaukee County	Signature Adoption: Pre-selected Style	
Security Level: Email, Account Authentication (None)	Signed by link sent to	
	Chantell.jewell@milwaukeecountywi.gov	
	Using IP Address: 172.58.61.175	
	Signed using mobile	

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Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
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Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp
Carbon Copy Events	Status	Timestamp
Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	6/13/2022 8:35:46 AM
Certified Delivered	Security Checked	6/13/2022 8:39:38 AM
Signing Complete	Security Checked	6/13/2022 8:39:48 AM
Completed	Security Checked	6/13/2022 8:39:48 AM
Payment Events	Status	Timestamps