MILWAUKEE COUNTY FISCAL NOTE FORM

DAT	E:	11/4/2022	Origin	al Fiscal Note	
			Subst	itute Fiscal Note	
SUI	BJECT:	From the Superintendent, House of Corenter into a Purchase of Service Contra Correctional Services LLC to extend the accounting, and kiosk services for the p December 31, 2023, to ensure continuit services, and to give the County time to for these services.	ct exte e term f eriod o y in co	nsion with Aramark or commissary, trust of January 1, 2023, to mmissary and accou	o Inting
FISC	CAL EFF	ECT:			
⊠ Expe	No Direct County Fiscal Impact penditures			Increase Capital	
Ξχρε	E	Existing Staff Time Required		Decrease Capital	
		ncrease Operating Expenditures f checked, check one of two boxes below)		Increase Capital Re	venues
		Absorbed Within Agency's Budget		Decrease Capital Re	evenues
		Not Absorbed Within Agency's Budget			
	Decreas	se Operating Expenditures		Use of contingent fu	nds
	Increase	e Operating Revenues			
	Decreas	se 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	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. Approval of this contract will authorize the Superintendent of the House of Correction (HOC) to enter into a one-year Purchase of Service contract extension with Aramark Correctional Services, LLC for continuation of commissary and trust accounting services.
 - B. Aramark pays the County a percentage of commissary sales. This extension would not change costs or revenues. The estimated revenue for 2023 for the HOC is \$505,416, and for the CJF is \$320,000. These revenues was also included in the 2023 Requested Budget.
 - C. No impact on current or subsequent year if this extension is approved.
 - D. No assumptions applicable.

Authorized Signature	_
Did DAS-Fiscal Staff Review?	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

Envelope Id: 1A75EEB49D554CA9B7E835B0C95DFD96 Status: Completed

Subject: Complete with DocuSign: 2023 Aramark Commissary Contract Extension Fiscal Note Draft 1.docx

Source Envelope:

Document Pages: 2 Signatures: 1 **Envelope Originator:** Certificate Pages: 1 Initials: 0 Michael Bickerstaff AutoNav: Enabled 633 W. Wisconsin Ave.

Envelopeld Stamping: Enabled Suite 901

Time Zone: (UTC-06:00) Central Time (US & Canada) Milwaukee, WI 53203

Michael.Bickerstaff@milwaukeecountywi.gov

IP Address: 204.194.251.5

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Michael Bickerstaff michael.bickerstaff@milwaukeecountywi.gov Public Safety Fiscal Administrator - HOC

11/4/2022 7:59:21 AM

Milwaukee County

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Not Offered via DocuSign

In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
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	11/4/2022 7:59:54 AM
Certified Delivered	Security Checked	11/4/2022 8:11:19 AM
Signing Complete	Security Checked	11/4/2022 8:11:58 AM
Completed	Security Checked	11/4/2022 8:11:58 AM