

MILWAUKEE COUNTY FISCAL NOTE FORM**DATE:** 11/4/2022Original Fiscal Note Substitute Fiscal Note

SUBJECT: From the Superintendent, House of Correction, requesting authorization to execute a one-year Purchase of Service Contract extension with Wisconsin Community Services, Inc. (WCS) in the approximate amount of \$165,000 for the electronic monitoring (EM) services for Milwaukee County for the period of January 1, 2023, to December 31, 2023.

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. 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 Wisconsin Community Services, INC. (WCS).

B. Total cost for the contract is variable depending on the number of clients on electronic monitoring, and is estimated at this time to total about \$165,000 per year. This cost is included in the 2023 Requested Budget.

C. Approval of this resolution has no budgetary impact on 2022, sufficient funds are requested in the 2023 requested budget.

D. It is assumed that the 2023 requested budget will be adopted with \$165,000 for the WCS contract. It is also assumed that the number of clients will be consistent with the numbers from 2021.

Department/Prepared By HOC/Michael Bickerstaff

Authorized Signature _____ 

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

Envelope Id: AF1E2321C5AD4FE6A430AFF4DFB72F95	Status: Completed
Subject: Complete with DocuSign: 2023 WCS EMU Contract Extension FISCAL NOTE Draft 1.docx	
Source Envelope:	
Document Pages: 2	Signatures: 1
Certificate Pages: 1	Initials: 0
AutoNav: Enabled	Envelope Originator:
Enveloped Stamping: Enabled	Michael Bickerstaff
Time Zone: (UTC-06:00) Central Time (US & Canada)	633 W. Wisconsin Ave.
	Suite 901
	Milwaukee, WI 53203
	Michael.Bickerstaff@milwaukeecountywi.gov
	IP Address: 204.194.251.5

Record Tracking

Status: Original	Holder: Michael Bickerstaff	Location: DocuSign
11/4/2022 8:01:34 AM		
	Michael.Bickerstaff@milwaukeecountywi.gov	

Signer Events

Michael Bickerstaff
 michael.bickerstaff@milwaukeecountywi.gov
 Public Safety Fiscal Administrator - HOC
 Milwaukee County
 Security Level: Email, Account Authentication (None)

Signature



Signature Adoption: Uploaded Signature Image
 Using IP Address: 204.194.251.5

Timestamp

Sent: 11/4/2022 8:02:27 AM
 Viewed: 11/4/2022 8:10:49 AM
 Signed: 11/4/2022 8:11:09 AM

Electronic Record and Signature Disclosure:
 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 8:02:27 AM
Certified Delivered	Security Checked	11/4/2022 8:10:49 AM
Signing Complete	Security Checked	11/4/2022 8:11:09 AM
Completed	Security Checked	11/4/2022 8:11:09 AM

Payment Events

Status

Timestamps