

## MILWAUKEE COUNTY FISCAL NOTE FORM

**DATE:** 11/4/22

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** An action report from the Directors of Department of Administrative Services requesting release of \$112,399,560 held in allocated contingency for the Center for Forensic Science and Protective Medicine facility to house Milwaukee County’s Offices of the Medical Examiner and Emergency Management.

**FISCAL EFFECT:**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> No Direct County Fiscal Impact<br><input type="checkbox"/> Existing Staff Time Required<br><input type="checkbox"/> Increase Operating Expenditures<br>(If checked, check one of two boxes below)<br><input type="checkbox"/> Absorbed Within Agency’s Budget<br><input type="checkbox"/> Not Absorbed Within Agency’s Budget<br><input type="checkbox"/> Decrease Operating Expenditures<br><input type="checkbox"/> Increase Operating Revenues<br><input type="checkbox"/> Decrease Operating Revenues | <input type="checkbox"/> Increase Capital Expenditures<br><input type="checkbox"/> Decrease Capital Expenditures<br><input type="checkbox"/> Increase Capital Revenues<br><input type="checkbox"/> Decrease Capital Revenues<br><input type="checkbox"/> Use of contingent funds |
|---|--|

*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
<b>Operating Budget</b>	Expenditure	0	0
	Revenue	0	0
	Net Cost	0	0
<b>Capital Improvement Budget</b>	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. <sup>1</sup> 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.
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- A. The Director of Administrative Services is requesting release of funds held in an allocated contingency account for the County's planned Center of Forensic Science and Protective Medicine upon presentation of contract documents and building designs as requested by the County Board.
  - B. Approval will allow the release of \$112,399,560 held in allocated contingency account for the planned Center for Forensic Science and Protective Medicine. With the release of funds, Milwaukee County would seek to enter agreements to ensure the facility is constructed and acquired by Milwaukee County for use by the Office of Medical Examiner and Office of Emergency Management. Upon signature Milwaukee County will commit an earnest payment of not more than \$1,000,000 to help fund finalization of plans and other soft costs related to the project. The balance of funds would be paid as a not to exceed amount for completion of the project. True project costs may be reviewed in-partnership with the Milwaukee County Comptroller.
  - C. The release of funds from allocated contingency fully covers the costs associated with the project as outlined in the Purchase and Sale Agreement to be attached to the file. Additional funds have been made available through prior allocations by the Board, making up the total projected project cost of \$127,107,093.
  - D. The action requests the release of funds assumed to be allocated (as amended) as part of the 2023 budget.

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<sup>1</sup> 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    Aaron Hertzberg, Director, Department of Administrative Services

Approved by: *Aaron Hertzberg*

Aaron Hertzberg, Director  
Department of Administrative Services

Did DAS-Fiscal Staff Review?        Yes        No

Did CBDP Review?<sup>2</sup>        Yes        No        Not Required   

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