

**MILWAUKEE COUNTY FISCAL NOTE FORM****DATE:** 12/8/2023Original Fiscal Note Substitute Fiscal Note 

**SUBJECT:** From the Superintendent, Community Reintegration Center requesting authorization to enter into a Purchase of Service Contract extension with Aramark Correctional Services LLC to extend the term for commissary, trust accounting, and kiosk services for the period of January 1, 2024, to June 30, 2024, to ensure continuity in commissary and accounting services, and allow the request for proposal to conclude for these services.

**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.*

	<b>Expenditure or Revenue Category</b>	<b>Current Year</b>	<b>Subsequent Year</b>
<b>Operating Budget</b>	Expenditure	\$0	\$0
	Revenue	0	\$375,000
	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.

- A. Approval of this contract will authorize the Superintendent of the Community Reintegration Center (CRC) to enter into a six-month 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 six months in 2024 for the CRC is \$215,000, and for the CJF is \$160,000. .
- C. No impact on current year if this extension is approved. This contract would increase revenue for 2024.
- D. No assumptions applicable.

Department/Prepared By      CRC/Michael Bickerstaff

Authorized Signature Chantell Jewell

Did DAS-Fiscal Staff Review?        Yes        No

Did CBDP Review?                        Yes        No        Not Required

<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.

**Certificate Of Completion**

Envelope Id: 6FCEC9941E6B4D8EA98A5F3AE33D68FF	Status: Completed
Subject: Complete with DocuSign: 2024 Aramark Commissary 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
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	IP Address: 204.194.251.5

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12/8/2023 11:34:39 AM		
	Michael.Bickerstaff@milwaukeecountywi.gov	

**Signer Events**

Signer Events	Signature	Timestamp
Chantell Jewell		Sent: 12/8/2023 11:35:12 AM
Chantell.jewell@milwaukeecountywi.gov		Viewed: 12/8/2023 12:06:28 PM
Superintendent		Signed: 12/8/2023 12:06:33 PM
Milwaukee County	Signature Adoption: Pre-selected Style	
Security Level: Email, Account Authentication (None)	Using IP Address: 204.194.251.5	

**Electronic Record and Signature Disclosure:**  
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<b>Editor Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Agent Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
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<b>Certified Delivery Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Carbon Copy Events</b>	<b>Status</b>	<b>Timestamp</b>
<b>Witness Events</b>	<b>Signature</b>	<b>Timestamp</b>
<b>Notary Events</b>	<b>Signature</b>	<b>Timestamp</b>
<b>Envelope Summary Events</b>	<b>Status</b>	<b>Timestamps</b>
Envelope Sent	Hashed/Encrypted	12/8/2023 11:35:12 AM
Certified Delivered	Security Checked	12/8/2023 12:06:28 PM
Signing Complete	Security Checked	12/8/2023 12:06:33 PM
Completed	Security Checked	12/8/2023 12:06:33 PM
<b>Payment Events</b>	<b>Status</b>	<b>Timestamps</b>