

## MILWAUKEE COUNTY FISCAL NOTE FORM

**DATE:** December 1, 2015

Original Fiscal Note ☒

Substitute Fiscal Note ☐

**SUBJECT:** Informational report on 2016 program and service contracts between \$100,000 and \$299,999

### FISCAL EFFECT:

- ☒ No Direct County Fiscal Impact
- ☒ Existing Staff Time Required
- ☐ Increase Operating Expenditures  
(If checked, check one of two boxes below)
- ☐ Absorbed Within Agency's Budget
- ☐ Not Absorbed Within Agency's Budget
- ☐ Decrease Operating Expenditures
- ☐ Increase Operating Revenues
- ☐ Decrease Operating Revenues
- ☐ Increase Capital Expenditures
- ☐ Decrease Capital Expenditures
- ☐ Increase Capital Revenues
- ☐ Decrease Capital Revenues
- ☐ 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 |
|----------------------------|---------------------------------|--------------|-----------------|
| Operating Budget           | Expenditure                     | 0            |                 |
|                            | Revenue                         | 0            |                 |
|                            | Net Cost                        | 0            |                 |
| Capital Improvement Budget | Expenditure                     |              |                 |
|                            | Revenue                         |              |                 |
|                            | Net Cost                        |              |                 |

## 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.

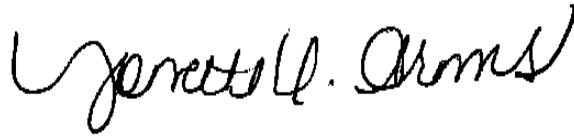
File No. 15-764 is an informational report on three 2016 purchase of service contracts between \$100,000 and \$299,999 recommended by the Milwaukee County Commission on Aging through an open and competitive request for proposals (RFP) in 2015 and renewed for 2016 based on vendor performance. The three programs include the following:

- (1) Nutrition Site Supervision Services (9 sites) funded at \$180,000 and provided by Goodwill Industries of Southeastern Wisconsin;
- (2) Nutrition Site Supervision Services (9 sites) funded at \$180,000 and provided by Interfaith Older Adult Programs, Inc.; and
- (3) Coordination of Neighborhood Services funded at \$271,232 and provided by Interfaith Older Adult Programs, Inc.

The 2016 adopted budget includes sufficient funding for these contracts. No assumptions were made.

This report has no fiscal impact on 2015 other than the allocation of staff time required to prepare the report.

Department/Prepared By    Department on Aging / Gary W. Portenier



Authorized Signature \_\_\_\_\_

Did DAS-Fiscal Staff Review?    ☐    Yes    ☒    No

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

Does this resolution or ordinance relate to an intergovernmental agreement that is believed to require approval by an Executive Council pursuant to Wisconsin Statute 59.794?

☐    Yes    ☒    No    ☐    Uncertain

---

<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.

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