

**MILWAUKEE COUNTY FISCAL NOTE FORM**

**DATE:** March 2, 2015

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** A resolution authorizing the Milwaukee County Transit System to develop and implement a unique, smart card ID program for GO Pass participants

**FISCAL EFFECT:**

- |   |  |
|---|--|
| <input type="checkbox"/> No Direct County Fiscal Impact   | <input type="checkbox"/> Increase Capital Expenditures |
| <input type="checkbox"/> Existing Staff Time Required   | <input type="checkbox"/> Decrease Capital Expenditures |
| <input checked="" type="checkbox"/> Increase Operating Expenditures<br>(If checked, check one of two boxes below) | <input type="checkbox"/> Increase Capital Revenues     |
| <input checked="" type="checkbox"/> Absorbed Within Agency's Budget   | <input type="checkbox"/> Decrease Capital Revenues     |
| <input type="checkbox"/> Not Absorbed Within Agency's Budget  |  |
| <input type="checkbox"/> Decrease Operating Expenditures  | <input type="checkbox"/> Use of contingent funds       |
| <input type="checkbox"/> Increase Operating Revenues  |  |
| <input type="checkbox"/> 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	\$160,000	\$0
	Revenue	\$0	\$0
	Net Cost	\$160,000	\$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. Approval of this resolution requires the Milwaukee County Transit System to develop and implement a unique, smart card ID program for GO Pass participants.
  - B. Approval of this resolution includes the following direct costs smart cards, printer operating costs, and postage for \$36,000 (\$1.20 per card, 30,000 cards), smart card printing stations for \$15,000 (\$3,000/each, up to 5 stations), staffing to develop and implement the program for \$100,000, and \$10,000 in refunds for individuals currently using an MCTS M-CARD that will be eligible for the GO Pass program.
  - C. Funds for the development and implementation of a GO Pass smart card ID were not appropriated in the 2015 Adopted Budget. This resolution addresses the start-up cost of the smart card ID program, the costs will not be repeated in 2016.
  - D. The information that was used in this fiscal note was reported in File No. 15-166, a recent communication from the Director, Department of Transportation, outlining the costs associated with the start-up of the program. According to that fiscal note, the costs associated with the smart card (approximately \$160,000) would be absorbed within the MCTS 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.

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

Authorized Signature

*Stephen J. Corby*

Did DAS-Fiscal Staff Review?

Yes

No

Did CDBP Review?<sup>2</sup>

Yes

No

Not Required