

**MILWAUKEE COUNTY FISCAL NOTE FORM**

**DATE:** 2/12/2018

Original Fiscal Note

Substitute Fiscal Note

**SUBJECT:** Request to transfer \$655,006 from the allocated account within the Appropriations for Contingencies to the Department on Aging for continued operations and programming at the five Milwaukee County-owned senior centers from June 1, 2018 through December 31, 2018.

**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 type="checkbox"/> Absorbed within Agency's Budget  | <input type="checkbox"/> Decrease Capital Revenues     |
| <input checked="" 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                            | \$655,006           |                        |
|                                   | Revenue                                |                     |                        |
|                                   | Net Cost                               | \$655,006           |                        |
| <b>Capital Improvement Budget</b> | Expenditure                            |                     |                        |
|                                   | Revenue                                |                     |                        |
|                                   | Net Cost                               |                     |                        |

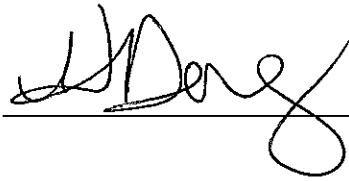
## DESCRIPTION OF FISCAL EFFECT

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.
    - A. The approval of this request will move \$655,006 from the allocated Appropriation for Contingency to the Department on Aging. This will allow the Executive Director, Department on Aging, to extend the professional service contracts with Interfaith from June 1, 2018 through December 31, 2018. This will enable continuation of operations and programming at the 5 County-owned senior centers.
    - B. Total 2018 expenditure included in this request is \$655,006. This money was placed in the allocated account within the Appropriation for Contingencies to fund seven months of operations and programming of the 5 County-owned senior centers.
    - C. The 2018 MCDA Recommended Budget currently includes funding of approximately \$468,000 for the first 5 months of operations of the senior centers. There are insufficient funds within the Department budget to continue senior center operations for the residual seven months, from June 1 to December 31, 2018.
    - D. This fiscal note assumes expenditures will not exceed the amounts authorized for this purchase of service contracts of \$1,122,867.
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Department/Prepared By: Department on Aging / Samta Bhatnagar

Authorized Signature



A handwritten signature in black ink, appearing to read 'S. Bhatnagar', is written over a horizontal line.

Did DAS-Fiscal Staff Review?  Yes  No

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

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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.