## MILWAUKEE COUNTY FISCAL NOTE FORM

<b>DATE</b> : 6/4/20		Origin	Original Fiscal Note			
			Subst	itute Fiscal N	ote	
SUBJECT: From the County Executive requesting that the House of Correction remains under the County Executive's Administration and creating a taskforce to make recommendations for enhancing evidence-based programming to reduce recidivism						
FIS	CAL EFFECT:					
	No Direct County Fisc	cal Impact		Increase Ca	apital Expenditures	
<ul><li>Existing Staff 1</li><li>Increase Operating Existing Increase</li></ul>		·		Decrease Capital Expenditures		
	(If checked, check on	e of two boxes below)		Increase Capital Revenues		
	Absorbed With	nin Agency's Budget		Decrease C	apital Revenues	
	☐ Not Absorbed	Within Agency's Budget				
<ul> <li>□ Decrease Operating Expenditures</li> <li>□ Use of contingent funds</li> </ul>			ingent 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.						
		Expenditure or Revenue Category	Curre	ent Year	Subsequent Year	
Operating Budget		Expenditure	0		0	
		Revenue				
		Net Cost				
Capital Improvement		Expenditure				
6	Budget	Revenue				

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 County Executive and the County Board Chairwoman will convene a taskforce that will examine and recommend evidence-based practices and system changes that the House of Correction (HOC) should adopt to move it closer to a human services agency that is working toward racial equity. This will be done while maintaining a secure facility.

The taskforce will make recommendations to the County Executive and County Board by September 2020 so they can be included in the 2021 budget.

- B. There are currently no known costs associated with this action. The taskforce will require existing staff time. Once the taskforce's recommendations are made to the County Executive and County Board in September, it will be determined if any additional costs will need to be included in the 2021 budget.
- C. There are no known budgetary impacts from this action in 2020. If necessary, potential costs for 2021 will be recommended to decisionmakers in September.
- D. No assumptions were utilized in preparing this form.

<sup>&</sup>lt;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	DAS-Office	of Perfo	rmance, Strategy	and Budget	
Authorized Signature	( so	cusigned by: SEPH U	amers		
Č					
Did DAS-Fiscal Staff Revie	w? 🖂	Yes	☐ No		
Did CBDP Review? <sup>2</sup>		Yes	☐ No	☐ Not Required	

 $^2\ Community\ Business\ Development\ Partners'\ review\ is\ required\ on\ all\ professional\ service\ and\ public\ work\ construction\ contracts.$ 



### **Certificate Of Completion**

Envelope Id: B75EE13F38B54386BE8E2E31961697BF

Subject: Please DocuSign: June Report HOC-Sheriff Study Fiscal Note.docx

Source Envelope:

Document Pages: 3Signatures: 1Envelope Originator:Certificate Pages: 2Initials: 0Joseph LamersAutoNav: Disabled633 W. Wisconsin Ave.

Envelopeld Stamping: Disabled

Time Zone: (UTC-06:00) Central Time (US & Canada)

Milwaukee, WI 53203

Joseph.Lamers@milwaukeecountywi.gov

IP Address: 204.194.251.3

Status: Completed

### **Record Tracking**

Status: Original Holder: Joseph Lamers Location: DocuSign

Joseph.Lamers@milwaukeecountywi.gov

### **Signer Events**

### JOSEPH LAMERS

joseph.lamers@milwaukeecountywi.gov

6/4/2020 11:56:36 AM

**Budget Director** 

Milwaukee County

Security Level: Email, Account Authentication

(None)

### Signature

**Status** 

# DocuSigned by:

JOSEPH LIMERS —64FBF7B7766148A...

Signature Adoption: Pre-selected Style Using IP Address: 204.194.251.3

### **Timestamp**

Suite 901

Sent: 6/4/2020 12:00:48 PM Viewed: 6/4/2020 12:01:13 PM Signed: 6/4/2020 12:01:45 PM

Freeform Signing

### **Electronic Record and Signature Disclosure:**

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In Person Signer Events	Signature	Timestamp
Editor Delivery Events	Status	Timestamp
Agent Delivery Events	Status	Timestamp
Intermediary Delivery Events	Status	Timestamp
Certified Delivery Events	Status	Timestamp

## **Carbon Copy Events**

#### Joseph Lamers

 $joseph. lamers @\,milwauke ecountywi.gov$ 

Budget Director Milwaukee County

Security Level: Email, Account Authentication

(None)

### **Electronic Record and Signature Disclosure:**

Not Offered via DocuSign

CODIED	Sent: 6/4/2020 12:01:45 PM
COPIED	Resent: 6/4/2020 12:01:45 PM
	Viewed: 6/4/2020 12:35:19 PM

**Timestamp** 

Witness Events	Signature	Timestamp
Notary Events	Signature	Timestamp
F	01-1	T'
Envelope Summary Events	Status	Timestamps
Envelope Summary Events  Envelope Sent	Hashed/Encrypted	6/4/2020 12:01:45 PM
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Envelope Summary Events	Status	Timestamps
Completed	Security Checked	6/4/2020 12:01:45 PM
Payment Events	Status	Timestamps