

RESOLUTION NO.: 157—2017-18

TO THE HONORABLE, THE OUTAGAMIE COUNTY BOARD OF SUPERVISORS

LADIES AND GENTLEMEN:

2/3 MAJORITY – 24 VOTES

1 The Outagamie County Emergency Management Department, along with the
2 Community Emergency Response Team (CERT), is working on fundraising in order to
3 aid them in becoming self-sustainable. The CERT members are volunteers who provide
4 aid to the county fire departments and law enforcement upon request, which involves
5 costs with vehicle and equipment maintenance as well as future needs. This resolution
6 will allow the Emergency Management Department to receive \$20,000 in fundraising
7 donations for CERT purposes with an offsetting increase in Supplies and Purchased
8 Services of \$10,000 each. The result of this adjustment is budget neutral.

9
10 NOW THEREFORE, the undersigned members of the Public Safety Committee recommend
11 adoption of the following resolution.

12 BE IT RESOLVED, that the Outagamie County Board of Supervisors does authorize and
13 approve the Outagamie County Emergency Management Department to accept and expend the \$20,000
14 in fundraising funds for the Community Emergency Response Team (CERT), of which \$10,000 will be
15 used in the Supplies Account and \$10,000 will be used in the Purchased Services Account as noted on
16 the attached fiscal note which by reference is made a part hereof, and

17 BE IT FINALLY RESOLVED, that the Outagamie County Clerk be directed to forward a copy
18 of this resolution to the Outagamie County Emergency Management Director and the Outagamie County
19 Finance Director.

20 Dated this ____ day of March 2018

21 Respectfully Submitted,

22 PUBLIC SAFETY COMMITTEE
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28 _____
James Duncan

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Lee W. Hammen

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Katrin Patience

Mike Thomas

Dan Grady

Duly and officially adopted by the County Board on: _____

Signed: _____
Board Chairperson

County Clerk

Approved: _____

Vetoed: _____

Signed: _____
County Executive

OUTAGAMIE COUNTY FISCAL NOTE

INTRODUCTION: This form must be attached to any resolution or ordinance which contains a spending or revenue proposal. The form should be completed by an individual within the department initiating the resolution or ordinance with assistance from the Financial Services Department. Contact the Finance Director (1675), Controller (1674) or Staff Accountant (1681) for assistance. Once completed, forward a copy of the form to the Financial Services Department for their review. Financial Services will forward a reviewed copy of the fiscal note to Legislative Services.

1. **Subject:** Request to accept and expend fundraising funds up to \$20,000 for Outagamie County CERT (Community Emergency Response Team).

2. **Description:** This section must be completed for all fiscal notes. Briefly and concisely describe the request. State assumptions used and discuss any current year and long-term fiscal impacts. (A separate attachment can be used)
 Emergency Management along with the CERT Team is working on fundraising, which will aid them in becoming self sustainable. CERT is a rehabilitation team that provides aid to the County fire departments and law enforcement upon their request. This team consists of volunteers, but there is cost involved with vehicle and equipment maintenance as well as future needs. This fiscal note will allow us to receive and expend funds in 2018 for CERT purposes. During the budgeting process for 2018, it was uncertain as to whether another fundraising opportunities would be pursued. The Department recently received approval from the CERT team to proceed and is requesting approval for this budget adjustment to increase Donations by \$20,000 with an offsetting increase in Supplies and Purchased Services of \$10,000 each. The result of this adjustment is budget neutral.

Current Year Budget Impact (Check one or more of the following boxes)

Revenues Expenses (Cost) None

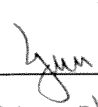
- 3. Is the specific cost or revenue included in the current year's budget? yes () no (X) partially ()
- 4. If the proposal requests additional spending, can the additional cost be absorbed within the current year's line item? yes () no (X) n/a ()
- 5. Is the proposal to accept additional revenues only? yes () no (X)
- 6. Does this request modify/adjust the current year budget? yes (X) no ()
 If no, skip to question 8 below.
- 7. Detail current year budget changes. Please list cost center name, line item, account number and either the increase or decrease amount. (Please note that all budget adjustments must balance. For example, an increase in an expenditure account must be offset by a decrease in another expenditure account or the contingency fund or an increase in a revenue account or other funding sources such as fund balance applied.)

COST CENTER NAME	LINE ITEM (i.e. Salaries, Supplies, Etc.)	ACCOUNT NUMBER INCLUDING COST CENTER (i.e. 1004100.5100, 1004100.5400, etc.)	INCREASE (DECREASE) AMOUNT
Emergency Management Donations	Donations	2140200.4500	20,000
EM Donations	Supplies	2140200.5400	10,000
EM Donations	Purchased Services	2140200.5500	10,000

Annual and Long-Term Impact

- 8. Is the above Increase/Decrease a nonrecurring one-time expense or revenue? yes () no (X) n/a ()
- 9. What is the anticipated annual and/or long-term cost or revenue impact? Annual Cost Est. 20,000
 Annual Revenue Est. 20,000

Fiscal Note Prepared by: Lisa VanSchyndel

For Financial Services purposes only									
Reviewed By: 	If expenditures are recorded in the financial system at a level of detail lower than the level 6 as shown above, indicate the specific account numbers and amounts below: <table border="1"> <thead> <tr> <th>Detail Expenditures Account Number</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>2140200.4510.20</td> <td>20,000</td> </tr> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table>	Detail Expenditures Account Number	Amount	2140200.4510.20	20,000				
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2140200.4510.20	20,000								
Date: <u>2/6/18</u>									
Comments:									