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James Duncan

\_\_\_\_\_  
Mike Woodzicka

\_\_\_\_\_  
Dominic Renteria

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:** Criminal Justice Treatment Services (CJTS) Request for Treatment Alternatives and Diversion Program (TAD) Grant 2019 Budget Adjustment

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)

The CJTS department administers a TAD grant which is funded by the Wisconsin Department of Justice (DOJ). For the 2019 budget, a total of \$31,970 was budgeted for fringe benefits in the TAD Grant Cost Center. CJTS requests a budget transfer of \$5,000 for additional fringe benefits due to a change in employee benefit selection in 2019 from Travel/Training in the amount of \$3,900 plus \$1,100 from Purchased Services. The department is able to absorb these adjustments within the line items noted and remain compliant with the grant budget and related requirements.

In summary, the CJTS department is requesting an increase in Fringe Benefits of \$5,000 which will be offset by decreases in Travel/Training of \$3,900 and Purchased Services of \$1,100 for calendar year 2019. This adjustment is cost neutral and does not require any additional county funding.

**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 ( )    partially ( X )
- 4. If the proposal requests additional spending, can the additional cost be absorbed within the current year's line item?                      yes ( )    no ( )    n/a ( X )
- 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
TAD Grant	Fringe Benefits	2101000.5200	5,000
TAD Grant	Travel/Training	2101000.5300	(3,900)
TAD Grant	Purchased Services	2101000.5500	(1,100)

**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                      Included in 2020 budget  
Annual Revenue                      0

Fiscal Note Prepared by: Bernie Vetrone / Yvette Mueller

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: <u>Detail Expenditures Account Number</u> <u>Amount</u>
Date: <u>10/22/2019</u>	_____
Comments:	