



**FINANCE COMMITTEE
THURSDAY, OCTOBER 17, 2013 - 7:30 A.M.
CONFERENCE ROOM N-1 – FIFTH FLOOR
ROCK COUNTY COURTHOUSE-EAST**

Agenda

1. Call to Order and Approval of Agenda
2. Citizen Participation, Communications and Announcements
3. Approval of Minutes – October 3, 2013
4. Transfers and Appropriations
 - A. Public Health
 - B. Human Services (9)
5.
 - A. Bills
 - B. Bills Over \$10,000
 - C. Encumbrances Over \$10,000
 - D. Pre-Approved Encumbrance Amendments
 - 1) Finance - Purchasing
 - 2) Developmental Disabilities
 - E. Approval of Bills for Other Departments
6. Review of Resolutions
 - A. Accepting Additional Community Transformation Grant Funding and Amending the 2013 Rock County Health Department Budget
 - B. Amending the 2013 Council on Aging Budget to Accept Additional NSIP and Title III-D Funds
 - C. Authorizing Award for Handicap Door Modifications at Rock Haven and Amending the Budget (Resolution will be provided at the meeting)
7. Set Meeting Date and Time for Review, Discussion and Recommended Revisions to the 2014 Recommended Budget
8. Department 2014 Budget Review
 - A. County Clerk
 - B. Finance Director
 - C. Information Technology
 - D. Register of Deeds
 - E. Treasurer
 - F. Other
9. Report on Cash Balances and Investments
10. Adjournment

**Rock County
Transfer Request - Over \$500**

TO: FINANCE DIRECTOR Date 10/8/13
Requested By Public Health Department
Department

Transfer No. 13-53
Karen Cain, Health Officer
Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 31-3000-0000-61610 Description: Health Insurance Current Balance: \$200,128	\$17,000	Account #: 31-3000-0000-64000 Description: Medical Supplies	\$25,000
Account #: 31-3000-0000-62503 Description: Interpreter Fees Current Balance: \$10,000	\$8,000	Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Health Insurance: Health Department staff used lower cost health insurance plans than had been budgeted for 2013, so funds are available in this account. Interpreter Fees: One of the department's public health nurses and a few other staff members have been handling the interpreting needs for our Spanish speaking clients, so we have sufficient funds in this account for this requested transfer of funds.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Demand remains high for the zostavax (shingles) vaccine, and this vaccine is expensive. An order of 50 doses of this vaccine costs over \$8,000, and we will need to order more of this vaccine in the remainder of 2013. This transfer of funds will enable the Health Department to keep up with the demand for this vaccine and serve our Rock County citizens.

FISCAL NOTE:

Sufficient funds are available for transfer. *45 10-8-13*

ADMINISTRATIVE NOTE:

Recommended *CK*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____

Finance Committee _____

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13
 Requested By Human Services (1)
Department

Transfer No. 13-44
 Charmian Klyve
Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3602-0000-68203 Description: Allocated Overhead Current Balance: \$327,872	(73,637)	Account #: 36-3602-0000-63100 Description: Office Supplies and Expenses	11,635
Account #: Description: Current Balance:		Account #: 36-3602-0000-64701 Description: Software Purchase	55,252
Account #: Description: Current Balance:		Account #: 36-3602-0000-67130 Description: Terminals and PCs	3,450
Account #: Description: Current Balance:		Account #: 36-3602-0000-67160 Description: Equipment under 5K	3,300

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

This account allocates overhead costs to all of the various HSD Divisions. Overall we expect to be under budget at this time due to trending in some of HSD's high cost placement areas.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Telephones - HSD is requesting to purchase 23 new phones. These will be used to replace non-functioning models and for new positions.
 Software Purchase - this request includes the cost of 4 additional Laserfische licenses for Medical Records scanning, 10 additional Netsmart Avatar and Cache licenses and the purchase of the OrderConnect ePrescribing solution for HSD's electronic health records system.
 Terminals and PCs - includes 3 replacement PCs, 1 color printer, 6 replacement monitors, and 1 level 1 printer
 Equipment under 5k - HSD would like to purchase 3 new scanners for Medical Records.

FISCAL NOTE:

Sufficient funds are available for transfer. *9/24/13*

ADMINISTRATIVE NOTE:

Recommended. *EJK*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

- Governing Committee 10-9-13
- Finance Committee _____

Brian Knudson

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13 Transfer No. 13-45
 Requested By Human Services (2) Charmian Klyve
 Department Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3602-0000-68203 Description: Allocated Overhead Current Balance: \$317,872	(10,000)	Account #: 36-3602-0000-67200 Description: Capital Improvements	10,000
Account #: 36-3634-0000-62119 Description: Other Contracted Services Current Balance: \$100,257	8,905	Account #: 36-3634-0000-67130 Description: Terminals and PCs (CPS)	5,290
Account #: Description: Current Balance:		Account #: 36-3634-0000-67160 Description: Equipment under 5K (CPS)	3,615
Account #: 36-3646-0000-62119 Description: Other Contracted Services Current Balance: \$39,612	3,390	Account #: 36-3646-0000-67130 Description: Terminals and PCs (JJS)	3,390

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Allocated Overhead - This account allocates overhead costs to all of the various HSD Divisions.
 Other Contracted Services (CPS)- spending in this account varies based on client need. We anticipate being under budget.
 Other Contracted Services (JJS) - spending in this account varies based on client need. We anticipate being under budget.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Capital Improvement - funds are requested to replace existing non-functioning and dilapidated furniture and office equipment throughout the Department.
 Terminals and PCs (CPS) - request includes 2 laptop level 1 packages, 1 level 1 printer and 15 replacement monitors
 Equipment under 5K (CPS) - request includes 2 scanners for administrative staff, and furniture for one new position
 Terminals and PCs (JJS) - request includes 2 laptop level 1 packages (monitor, keyboard, mouse, case)

FISCAL NOTE:

Sufficient funds are available for transfer. *PS 10/1/13*

ADMINISTRATIVE NOTE:

Recommended *CK*

REQUIRED APPROVAL

Governing Committee DATE 10-9-13

Finance Committee

COMMITTEE CHAIR

Charmian Klyve

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13 Transfer No. 13-46
 Requested By Human Services (3) Charmian Klyve
Department Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3646-0000-62119 Description: Other Contracted Services Current Balance: \$36,222	\$2,200	Account #: 36-3646-0000-67160 Description: Equipment under 5K (JJS)	\$2,200
Account #: 36-3664-0000-61610 Description: Health Insurance (YSC) Current Balance: \$161,286	\$18,850	Account #: 36-3664-0000-67130 Description: Terminals and PCs (YSC)	\$850
Account #: Description: Current Balance:		Account #: 36-3664-0000-67160 Description: Equipment under 5K (YSC)	\$3,000
Account #: Description: Current Balance:		Account #: 36-3664-0000-67200 Description: Capital Improvements (YSC)	\$15,000

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Other Contracted Services (JJS) - spending in this account varies based on client need. We anticipate being under budget.
 Health Insurance (YSC) - we anticipate being under budget due to various staff vacancies throughout the year.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Equipment under 5K (JJS) - request includes 2 scanners for administrative staff.
 Terminals and PCs (YSC) - request includes 1 replacement PC and 2 replacement monitors.
 Equipment under 5 (YSC) - request is for an air conditioning unit to be installed in the YSC IT room - per IT request
 Capital Improvements (YSC) - funds are requested for various capital improvements at the Youth Services Center - primarily painting of the holding area and replacement of secure furniture

FISCAL NOTE:

Sufficient funds are available for transfer. *85 10-4-13*

ADMINISTRATIVE NOTE:

Recommended *BK*

REQUIRED APPROVAL

- Governing Committee DATE 10-9-13
- Finance Committee

COMMITTEE CHAIR

Brian Knudson

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13 Transfer No. 13-47
 Requested By Human Services (4) Charmian Klyve
 Department Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3689-0000-62609 Description: State Institutions Current Balance: \$1,928,657	\$50,246	Account #: 36-3689-0000-67130 Description: Terminals and PCs (MH - CRI)	\$2,445
Account #: Description: Current Balance:		Account #: 36-3689-0000-67160 Description: Equipment under \$5K (MH-CRI)	\$1,415
Account #: Description: Current Balance:		Account #: 36-3689-0000-67130 Description: Equipment over \$5K (MH-CRI)	\$6,386
Account #: Description: Current Balance:		Account #: 36-3689-0000-64604 Description: Program Expense (MH-CRI)	\$40,000

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

State Institutions - the average daily cost is below the budget projection. This can vary year-to-year based Medicaid and insurance reimbursements for clients.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Terminals and PCs - request includes 4 replacement monitors and 1 laptop level 1 package
 Equipment under 5K - request includes furniture for a new Crisis Program Manager position
 Equipment over 5K- funds for a replacement Multi-Function Printer in the Crisis unit
 Program Expense - funding is based on client need.

FISCAL NOTE:

Sufficient funds are available for transfer. *85,415*

ADMINISTRATIVE NOTE:

Recommended *[Signature]*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee 10-9-13

Finance Committee

[Signature]

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13
Requested By Human Services (5)
Department

Transfer No. 13-48
Charmian Klyve
Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3697-0000-61610 Description: Health Insurance (MH- CFIS) Current Balance: \$80,801	\$14,440	Account #: 36-3697-0000-67130 Description: Terminals and PCs (MH - CFIS)	\$8,780
Account #: Description: Current Balance:		Account #: 36-3697-0000-67160 Description: Equipment under 5K (MH-CFIS)	\$5,660
Account #: 36-3706-0000-61210 Description: Overtime Wages (MH-CSP) Current Balance: \$21,801	\$15,735	Account #: 36-3706-0000-67130 Description: Terminals and PCs (MH - CSP)	\$12,905
Account #: Description: Current Balance:		Account #: 36-3706-0000-67160 Description: Equipment under 5K (MH-CSP)	\$2,830

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Health Insurance (MH - CFIS) - we are expected to be under budget due to staff changes and vacancies throughout the year.
Overtime (MH-CSP) - overtime is expected to be under budget

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Terminals and PCs - request includes 4 new laptop level 1 packages for new positions and 6 replacement monitors
Equipment under 5K - includes office furniture for 4 new positions in 2014.

FISCAL NOTE:

Sufficient funds are available for transfer. *gs 10-4-13*

ADMINISTRATIVE NOTE:

[Signature]

REQUIRED APPROVAL

- Governing Committee DATE 10-9-13
- Finance Committee

COMMITTEE CHAIR

Brian Knudson

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/4/13
 Requested By Human Services (6)
Department

Transfer No. 13-49
Charmian Klyve
Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3690-0000-62503 Description: Interpreter Fees Current Balance: \$9,535	\$5,000	Account #: 36-3690-0000-62119 Description: Other Contracted Services	\$1,500
Account #: 36-3690-0000-61610 Description: Health Insurance Current Balance: \$175,037	\$15,000	Account #: 36-3690-0000-67200 Description: Capital Improvement (MH-OPS)	\$500
Account #: 36-3690-0000-62170 Description: Physician and Other Current Balance: \$56,223	\$12,000	Account #: 36-3690-0000-67130 Description: Terminals and PCs (MH - OPS)	\$11,630
Account #: 36-3690-0000-64200 Description: Training Expenses Current Balance: \$9,936	\$4,843	Account #: 36-3690-0000-67160 Description: Equipment under 5K (MH-OPS)	\$23,213

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Interpreter Fees - expenses can vary year to year based on needs for interpreters. This year we are expected to be under budget.
 Health Insurance - we are expected to be under budget due to various staff changes and vacancies
 Physician and Other - we have been able to use a community partner to provide some of our prescribing needs
 Training Expenses - extra funds had been included for staff to become certified in a substance abuse certification program. Staff are still working on this but not expected to become certified in 2013.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Other Contracted Services - funds are requested for moving expenses for staff from the HCC to new offices at the Franklin Street location.
 Capital Improvement - funds are requested for various capital improvements at Franklin Street
 Terminals and PCs - request includes 3 replacement PCs, 2 replacement Laptops, 2 new laptops and 2 new PCs, and 2 replacement monitors
 Equipment under 5K - includes furniture and equipment for new staff and for Franklin Street expansion and move - air conditioner for IT room, POE Switch, 3 vinyl sofas for Doctors, 5 desks, phones related to move, tables and side chairs, office chairs, and file cabinets

FISCAL NOTE:

Sufficient funds are available for transfer. *FC 10-4-13*

ADMINISTRATIVE NOTE:

Recommended *CK*

REQUIRED APPROVAL

Governing Committee DATE 10-9-13
 Finance Committee

COMMITTEE CHAIR

Brian Knudson

Rock County
Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/2/13 Transfer No. 13-50
Requested By Human Services (7) Charmian Klyve
Department Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3704-0000-62119 Description: Other Contracted Services(IDP) Current Balance: \$136,254	\$7,930	Account #: 36-3704-0000-67160 Description: Equipment Under 5K (IDP)	\$3,840
Account #: Description: Current Balance:		Account #: 36-3704-0000-67130 Description: Terminals and PCs (IDP)	\$4,090
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Other Contracted Services (IDP) - under spending projected based on client need

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Equipment under \$5k - funds requested to purchase office furniture and phones for two new AODA treatment positions approved in 2013 resolution
Terminals and PCs - funds requested to purchase 2 level 1 laptop packages for two new AODA treatment positions approved in 2013 resolution

FISCAL NOTE:

Sufficient funds are available for transfer. *SS 10-4-13*

ADMINISTRATIVE NOTE:

Recommended *[Signature]*

REQUIRED APPROVAL

- Governing Committee DATE *10-9-13*
- Finance Committee

COMMITTEE CHAIR

Brian Knudson

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/4/13 Transfer No. 13-51
 Requested By Human Services (8) Charmian Klyve
Department Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3706-0000-61210 Description: Overtime Wages (MH-CSP) Current Balance: \$6,066	\$2,500	Account #: 36-3706-0000-67200 Description: Capital Improvement (MH-CSP)	\$2,500
Account #: 36-3689-0000-62609 Description: State Institutes Current Balance: \$1,878,411	\$40,000	Account #: 36-3689-0000-62170 Description: Physician and Other Services	\$40,000
Account #: Description: Current Balance:		Account #: Description:	
Account #: Description: Current Balance:		Account #: Description:	

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Overtime (MH-CSP) - overtime is expected to be under budget
 State Institutions - the average daily cost is below the budget projection. This can vary year-to-year based Medicaid and insurance reimbursements for clients.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

Capital Improvements - request for funds to perform the necessary wire pulls related to the Franklin Street expansion and other various capital improvements at that site.
 Physician and Other Services - funds are requested to hire a temporary Psychiatrist for approximately 16 hours a week through the end of the year. One of our contracted employee doctors has left and we are in dire need of psychiatric time for our clients.

FISCAL NOTE:

Sufficient funds are available for transfer. *SK 10/4/13*

ADMINISTRATIVE NOTE:

Recommended *CR*

REQUIRED APPROVAL

Governing Committee

Finance Committee

DATE

10-9-13

COMMITTEE CHAIR

Brian Knudson

Rock County Transfer Request - Over \$500

TO: FINANCE DIRECTOR Date 10/4/13
 Requested By Human Services (9)
Department

Transfer No. 13-52
Charmian Klyve
Department Head

FROM:	AMOUNT	TO:	AMOUNT
Account #: 36-3683-0000-63300 Description: Travel (ADRC) Current Balance: \$16,389	\$5,200	Account #: 36-3683-0000-62400 Description: Repair and Maint (ADRC)	\$700
Account #: Description: Current Balance:		Account #: 36-3683-0000-62503 Description: Interpreter Fees (ADRC)	\$500
Account #: Description: Current Balance:		Account #: 36-3683-0000-64701 Description: Software Purchase (ADRC)	\$700
Account #: Description: Current Balance:		Account #: 36-3683-0000-62210 Description: Telephone (ADRC)	\$3,300

REASON FUNDS ARE AVAILABLE FOR TRANSFER - BE SPECIFIC

Travel - costs have been less than anticipated.

REASON TRANSFER IS NECESSARY - BE SPECIFIC

HSD began operation of the Aging and Disability Resource Center in early 2013. The transfers requested will cover costs for areas that we did not fully anticipate. This includes various repair and maintenance projects that have come up, interpreter fees, additional costs for new software licenses unique to the ADRC, and ongoing telephone charges.

FISCAL NOTE:

Sufficient funds are available for transfer. *95 10-4-13*

ADMINISTRATIVE NOTE:

Recommended *CK*

REQUIRED APPROVAL

DATE

COMMITTEE CHAIR

Governing Committee _____ *10-9-13*

_____ *Brian Knudson*

Finance Committee _____

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
05-1500-0000-68010	EXP.ALLOCATIONS	P1301641	10/01/2013	STATELINE COPY PRODUCTS INC	119.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	0.00	105.98	24,941.25	119.00	(25,166.23)
FINANCE DIRECTOR PROG TOTAL				119.00	

I have examined the preceding bills and encumbrances in the total amount of **\$119.00**

Claims covering the items are proper and have been previously funded. These items are to be treated as follows:

- A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
- B. Bills under \$10,000 to be paid.
- C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: **OCT 17 2013**

Dept Head _____

Committee Chair _____

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
07-1430-0000-62400	R & M SERV	P1300648	09/17/2013	CINTAS FIRE PROTECTION	850.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	211,793.00	108,825.67	4,936.08	850.00	97,181.25
07-1430-0000-62421	COMPUTER EQUIP	P1303130	09/23/2013	CDW GOVERNMENT INC	80.42
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	9,000.00	4,573.25	557.27	80.42	3,789.06
07-1430-0000-64200	TRAINING EXP	P1303134	09/24/2013	WISCONSIN DEPARTMENT OF TRANSI	90.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	45,250.00	22,006.91	12,447.89	90.00	10,705.20
07-1430-0000-67130	TERMINALS/PC'S	P1303002	09/09/2013	CDW GOVERNMENT INC	422.96
		P1303064	09/21/2013	HEWLETT PACKARD DIRECT CDWG	4,455.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	115,521.00	71,932.28	0.00	4,877.96	38,710.76
07-1430-0000-67131	OTHER COMP HARDW	P1302325	09/19/2013	CORE BTS INC	1,295.00
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	109,579.00	79,043.92	0.00	1,295.00	29,240.08
07-1430-0000-67143	IT CROSS CHARGES	P1302839	09/10/2013	CDW GOVERNMENT INC	1,376.80
		P1303005	09/12/2013	CORE BTS INC	936.92
		P1303007	09/11/2013	CDW GOVERNMENT INC	99.54
		P1303008	09/14/2013	HEWLETT PACKARD DIRECT CDWG	495.00
		P1303058	09/16/2013	ENTERPRISE SYSTEMS GROUP	748.50
		P1303085	09/20/2013	CDW GOVERNMENT INC	256.74
		P1303099	09/23/2013	HEWLETT PACKARD DIRECT CDWG	990.00
		P1303143	09/25/2013	CDW GOVERNMENT INC	1,112.39
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	50,000.00	149,851.72	8,518.31	6,015.89	(114,385.92)
INFORMATION TECHNOLOGY PROG TOTAL				13,209.27	

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
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I have examined the preceding bills and encumbrances in the total amount of **\$13,209.27**

Claims covering the items are proper and have been previously funded. These items are to be treated as follows:

- A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
- B. Bills under \$10,000 to be paid.
- C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: **OCT 17 2013**

Dept Head _____

Committee Chair _____

Account Number	Account Name	PO#	Inv Date	Vendor Name	Inv/Enc Amt
15-1541-0000-64901	TAX DEED EXP	P1303123	09/18/2013	KRAUJALIS,ATTY ANTHONY C	675.27
	Budget	YTD Exp	YTD Enc	Pending	Closing Balance
	20,000.00	10,893.64	99.72	675.27	8,331.37
TAX DEED EXPENSE PROG TOTAL				675.27	

I have examined the preceding bills and encumbrances in the total amount of **\$675.27**

Claims covering the items are proper and have been previously funded. These items are to be treated as follows:

- A. Bills and encumbrances over \$10,000 referred to the Finance Committee and County Board.
- B. Bills under \$10,000 to be paid.
- C. Encumbrances under \$10,000 to be paid upon acceptance by the Department Head.

Date: **OCT 17 2013**

Dept Head _____

Committee Chair _____

PURCHASE ORDER NUMBER P1301550

PEID 052519

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

This form must be used when adding funds to or changing an account number of a previously approved encumbrance. Please complete this form and e-mail to Susan Balog in Accounting (balog@co.rock.wi.us), Cheryl Mikrut in Accounting (mikrut@co.rock.wi.us) **and** Jodi Millis in Purchasing (jodi@co.rock.wi.us). Susan or Cheryl will forward on to your governing committee for approval. The Encumbrance and Purchase Order will be updated upon approval of all necessary committees and County Board (if amendment is over \$10,000).

DATE OCTOBER 9, 2013

DEPARTMENT FINANCE - PURCHASING

COMMITTEE FINANCE

VENDOR NAME JP MORGAN CHASE

ACCOUNT NUMBER 05-1500-0000-68010 (ITEM 3)

FUNDS DESCRIPTION FINANCE EXPENSE ALLOCATION

AMOUNT OF INCREASE \$ 1,500.00

INCREASE FROM \$ 500.00 TO \$ 2,000.00

ACCOUNT BALANCE AVAILABLE \$ No budget - allocation account

9/10-9-13

REASON FOR AMENDMENT GETTING MORE REQUESTS TO CHARGE ON
JP MORGAN CREDIT CARD. ALL CHARGES WILL BE BILLED BACK TO THE
DEPARTMENTS.

APPROVALS

GOVERNING COMMITTEE

Chair

Date

FINANCE COMMITTEE

(If over \$10,000)

Chair

Date

COUNTY BOARD

(If over \$10,000)

Resolution #

Adoption Date

PURCHASE ORDER NUMBER P1300434

PEID 048996

PRE-APPROVED ENCUMBRANCE AMENDMENT FORM

This form must be used when adding funds to or changing an account number of a previously approved encumbrance. Please complete this form and e-mail to Susan Balog in Accounting (balog@co.rock.wi.us), Cheryl Mikrut in Accounting (mikrut@co.rock.wi.us) **and** Jodi Millis in Purchasing (jodi@co.rock.wi.us). Susan or Cheryl will forward on to your governing committee for approval. The Encumbrance and Purchase Order will be updated upon approval of all necessary committees and County Board (if amendment is over \$10,000).

DATE October 4, 2013

DEPARTMENT DD Board

COMMITTEE Rock County DD Board

VENDOR NAME Brotoloc South, Inc.

ACCOUNT NUMBER 33-3310-0000-62620

FUNDS DESCRIPTION CIP 1A

AMOUNT OF INCREASE \$ 20,480

INCREASE FROM \$ 0 TO \$ 20,480

ACCOUNT BALANCE AVAILABLE \$ 114,990.19 SB 10/04/13

REASON FOR AMENDMENT One current CIP 1A client moving into residential services.

APPROVALS

GOVERNING COMMITTEE _____
Chair _____ Date _____

FINANCE COMMITTEE _____
(If over \$10,000) Chair _____ Date _____

COUNTY BOARD _____
(If over \$10,000) Resolution # _____ Adoption Date _____

RESOLUTION

ROCK COUNTY BOARD OF SUPERVISORS

Board of Health
INITIATED BY



Geri Waugh, Account Clerk II
DRAFTED BY

Board of Health
SUBMITTED BY

October 4, 2013
DATE DRAFTED

Accepting Additional Community Transformation Grant Funding and Amending the 2013 Rock County Health Department Budget

- 1 **WHEREAS**, Rock County has been identified as a county with significant health concerns; and,
2
3 **WHEREAS**, Rock County Health Department is a member of the Transform Rock County Coalition,
4 an organization whose goal is to improve the health of Rock County citizens; and,
5
6 **WHEREAS**, Rock County Health Department was awarded a Community Transformation Grant in the
7 amount of \$450,000 in 2012 from the Transform Wisconsin Program to transform the health of Rock
8 County citizens; and,
9
10 **WHEREAS**, Rock County Health Department has been awarded additional funds in the amount of
11 \$3,000 to implement activities for the Transform Wisconsin Active School Evaluation 2013-2014
12 and assist with any related evaluation activities.
13
14 **NOW, THEREFORE, BE IT RESOLVED**, that the Rock County Board of Supervisors duly
15 assembled on this _____ day of _____, 2013 does hereby authorize the Rock
16 County Health Department to accept the additional Rock County Community Transformation Grant funds
17 and amend the 2013 Rock County Health Department Budget as follows:

<u>Account/Description</u>	<u>Budget</u>	<u>Increase</u>	<u>Amended</u>
<u>Source of Funds</u>	<u>10/4/13</u>	<u>(Decrease)</u>	<u>Budget</u>
31-3161-0000-42100			
Federal Aid	\$453,500	\$3,000	\$456,500
<u>Use of Funds</u>			
31-3161-0000-63110			
Administrative Expense	\$453,500	\$3,000	\$456,500

Respectfully submitted,

BOARD OF HEALTH

Sandra Kraft, Chair

Louis Peer, Vice Chair

Richard Bostwick

Mike Rundle

Vacant

Dr. Dean Peterson, DVM

Dr. Connie Winter, DDS

Judith Wade

Eric Gresens

Accepting Additional Community Transformation Grant Funding and
Amending the 2013 Rock County Health Department Budget

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FINANCE COMMITTEE ENDORSEMENT

Reviewed and approved on a vote of

Mary Mawhinney, Chair

FISCAL NOTE:


This resolution authorizes the acceptance and expenditure of \$3,000 in additional Federal Aid for the Health Department's Community Transformation program. No County matching funds are required.



Sherry Oja
Finance Director

LEGAL NOTE:

The County Board is authorized to accept grant funds pursuant to secs. 59.52(19), Wis. Stats. As an amendment to the adopted 2013 County Budget, this Resolution requires a 2/3 vote of the entire membership of the County Board pursuant to sec. 65.90(5)(a), Wis. Stats.



Jeffrey S. Kuglitsch
Corporation Counsel

ADMINISTRATIVE NOTE:

Recommended.



Craig Knutson
County Administrator

**Accepting Additional Community Transformation Grant Funding and
Amending the 2013 Rock County Health Department Budget**

EXECUTIVE SUMMARY

Rock County Health Department is a member of the 'Transform Rock County' coalition, and was awarded a Transform Wisconsin grant in 2012 in the amount of \$450,000.

In August, 2013 Rock County Health Department had been awarded an additional \$3,500 in funding for this grant.

In September, 2013 Rock County Health Department was again awarded an additional \$3,000 in funding for this grant, to be used to implement the Active School Evaluation tools and activities in grade 5 for 2013-2014.

Salary and benefits for the project manager, all supplies, equipment, mileage, training, and miscellaneous expenses are being reimbursed by the grant. The grant allows for mini-grants or subcontracting to coalition members who will assist in meeting the goals of the grant.

RESOLUTION NO. _____

AGENDA NO. _____

**RESOLUTION
ROCK COUNTY BOARD OF SUPERVISORS**

Education, Veterans & Aging
Services
INITIATED BY



Joyce Lubben
DRAFTED BY

Education, Veterans & Aging
Services
SUBMITTED BY

October 1, 2013
DATE DRAFTED

**AMENDING THE 2013 COUNCIL ON AGING BUDGET TO ACCEPT ADDITIONAL NSIP
AND TITLE III-D FUNDS**

1 **WHEREAS**, additional Nutrition Services Incentive Program (NSIP) funds have been awarded to the
2 Council on Aging for the congregate nutrition program; and,
3

4 **WHEREAS**, the Council on Aging has received a "special projects award" from the Greater Wisconsin
5 Agency on Aging to collaborate with the Community Academic Aging Research Network in offering a
6 wellness project for older adults to reduce sedentary time.
7

8 **NOW, THEREFORE, BE IT RESOLVED** by the Rock County Board of Supervisors duly assembled
9 this _____ day of _____, 2013 does hereby accept the additional NSIP and Title III-D
10 funds and amends the Adopted 2013 Rock County Council on Aging budget as follows:
11

<u>Account/Description</u>	<u>Budget at 10/01/2013</u>	<u>Increase (Decrease)</u>	<u>Amended Budget</u>
<u>Title II-C-1 Nutrition Program</u>			
<u>Source of Funds</u>			
30-3903-0000-42102 Federal Aid – NSIP	41,796	1,545	43,341
<u>Use of Funds</u>			
30-3903-0000-63408 Program Supplies	5,146	1,545	6,691
<u>Title III-D (Health Promotion)</u>			
<u>Source of Funds</u>			
30-3908-0000-42100 Federal Aid	11,262	8,000	19,262
<u>Use of Funds</u>			
30-3908-0000-64604 Program Expense	0	8,000	8,000

Respectfully submitted,

Education, Veterans & Aging Services Committee

Finance Committee Endorsement

Terry Thomas, Chair

Reviewed and approved on a vote of _____

Wayne Gustina, Vice Chair

Mary Mawhinney, Chair

Steve Howland

Edwin Nash

Rick Richard

AMENDING THE 2013 COUNCIL ON AGING BUDGET TO ACCEPT ADDITIONAL NSIP AND
TITLE III-D FUNDS

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FISCAL NOTE:

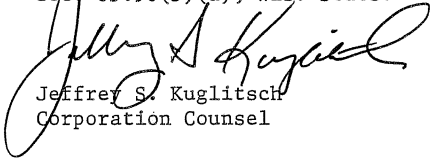
This resolution authorizes the acceptance and expenditure of \$9,545 in Federal Aid for Council on Aging programs. No County matching funds are required.



Sherry Oja
Finance Director

LEGAL NOTE:

The County Board is authorized to accept grant funds pursuant to sec. 59.52(19), Wis. Stats. As an amendment to the adopted 2013 County Budget, this Resolution requires a 2/3 vote of the entire membership of the County Board pursuant to sec. 65.90(5)(a), Wis. Stats.



Jeffrey S. Kuglitsch
Corporation Counsel

ADMINISTRATIVE NOTE:

Recommended.



Craig Knutson
County Administrator

EXECUTIVE SUMMARY

The Council on Aging receives federal Nutrition Services Incentive Program (NSIP) funds to support the congregate nutrition program. Allocations are estimated during the budget preparation process and now final allocations for the contract period of October 1, 2012 through September 30, 2013 have been received.

The Council on Aging has been chosen to collaborate with the University of Wisconsin Medical School in a Community Academic Aging Research Network project that will offer to older adults the opportunity to be part of a small research project testing the effects of reducing sedentary behavior. The research will test the association between total sedentary time (evaluated over a one-week period with objective monitoring devices), up-to-down transitions, and patterns of sedentary time with various measures of health including physical function, quality of life, and grip strength. It is hoped that the research study will prove a positive correlation between less sitting time and improved health indicators. The project will take place from October 1, 2013 to December 31, 2013.

No county funds are required.