

RESOLUTION NO.: 132—2024-25

TO THE HONORABLE, THE OUTAGAMIE COUNTY BOARD OF SUPERVISORS

LADIES AND GENTLEMEN:

2/3 MAJORITY – 24 VOTES

1 The Outagamie County Clerk of Circuit Courts Office is requesting to transfer \$3,047 from
2 the department 2024 Supplies line item to the 2024 Purchased Services line item. The
3 monies are related to standing desks for staff and increased order of file stamps. The
4 department is able to absorb these adjustments internally, therefore, no additional county
5 funding is required.
6

7 NOW THEREFORE, the undersigned members of the Public Safety Committee recommend
8 adoption of the following resolution.

9 BE IT RESOLVED, that the Outagamie County Board of Supervisors does authorize and approve
10 of increasing the Clerk of Courts Supplies line item and decreasing the Clerk of Courts Purchased Services
11 line item by \$3,047 each as detailed on the attached fiscal note, which by reference is made a part hereof,
12 and

13 BE IT FINALLY RESOLVED, that the Outagamie County Clerk be directed to forward a copy of
14 this resolution to the Outagamie County Clerk of Circuit Court and the Outagamie County Finance
15 Director.

16 Dated this ____ day of March 2025

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Respectfully submitted,

PUBLIC SAFETY COMMITTEE

Katrin Patience

Christine Lamers

Timothy Hermes

Michael Smith

Jeremy Thyssen

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:** Clerk of Courts Request for 2024 Budget Adjustments

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)

Cost Center 1000500
 Increase in Supplies \$3,047 related to standing desks for employees and increased order of stamps
 Decrease in Purchased Services \$3,047 due to not spending as much in postage

The department is able to absorb these adjustments within the line items noted. These adjustments are cost neutral and do 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 (X) no () partially ()
- 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 () 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
Clerk of Courts1000500	Supplies	1000500.5420.08	3,047
Clerk of Courts1000500	Purchased Services	1000500.5570.04	(3,047)

Annual and Long-Term Impact

- 8. Is the above Increase/Decrease a nonrecurring one-time expense or revenue? yes (X) no () n/a ()
- 9. What is the anticipated annual and/or long-term cost or revenue impact? Annual Cost 0
 Annual Revenue 0

Fiscal Note Prepared by: Kathy Wippich

For Financial Services purposes only							
Reviewed By: <i>Michelle Witenbrook</i>	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="0"> <tr> <td><u>Detail Expenditures Account Number</u></td> <td><u>Amount</u></td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table>	<u>Detail Expenditures Account Number</u>	<u>Amount</u>	_____	_____	_____	_____
<u>Detail Expenditures Account Number</u>	<u>Amount</u>						
_____	_____						
_____	_____						
Date: 1/30/2025							
Comments:							