

RESOLUTION NO.: 136—2024-25

TO THE HONORABLE, THE OUTAGAMIE COUNTY BOARD OF SUPERVISORS

LADIES AND GENTLEMEN:

2/3 MAJORITY – 24 VOTES

1 The Outagamie County Veterans Services Office is requesting the following
2 adjustments to the 2024 budget:

- 3 • Decrease Salaries by \$5,300 to cover overages in Supplies and Purchased
- 4 Services
- 5 • Increase Supplies by \$5,300 for outstanding Purchase Orders
- 6 • Increase Revenue by \$16,728 for Veterans WI DOA ARPA Grant
- 7 • Increase Purchased Services by \$16,728 for WI DOA ARPA grant expenses

8
9 The department is able to absorb these adjustments internally, therefore, no additional county
10 funding is required.

11 NOW THEREFORE, the undersigned members of the Health and Human Services Committee
12 recommend adoption of the following resolution.

13 BE IT RESOLVED, that the Outagamie County Board of Supervisors does hereby authorize and
14 approve of decreasing the 2024 Veterans Service Office Salaries line item by \$5,300; increasing the
15 Supplies line item by \$5,300; increasing the Veteran’s WI DOA ARPA Grant line item by \$16,728;
16 increasing the Purchased Services line item by \$16,728 as detailed on the attached fiscal note, which by
17 reference is made a part hereof, and

18 BE IT FINALLY RESOLVED, that the Outagamie County Clerk be directed to forward a copy
19 of this resolution to the Outagamie County Veterans Service Officer and the Outagamie County Finance
20 Director.

21 Dated this ____ day of March 2025

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Respectfully Submitted,
HEALTH AND HUMAN SERVICES
COMMITTEE

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Jeff McCabe

Justin Krueger

Dustin Koury

Cathy Thompson

Kelly Schroeder

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:** 2024 Budget adjustment request for Veteran's Services

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 1008700 –Veteran's Office

- Decrease Salaries \$5,300 to cover overages in supplies and purchased services
- Increase Supplies \$5,300 for outstanding purchase orders
- Increase Revenue for Veterans WI DOA ARPA grant for \$16,728
- Increase Purchased Services for the WI DOA ARPA grant expenses \$16,728

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 (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 () 2024 Budget
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	INCREASE
		COST CENTER (i.e. 1004100.5100, 1004100.5400, etc.)	(DECREASE) AMOUNT
Veterans Service Office	Salaries	1008700.5100	(\$5,300)
Veterans Service Office	Supplies	1008700.5400	\$5,300
Veterans Service Office	Veterean's WI DOA ARPA Grant	1008700.4264.03	\$16,728
Veterans Service Office	Purchased Services	1008700.5500	\$16,728

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 _____
Annual Revenue _____

Fiscal Note Prepared by: Kell Bales/MLU

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: <u>Detail Expenditures Account Number</u> <u>Amount</u> _____ _____
Date: 2/10/2025	
Comments:	