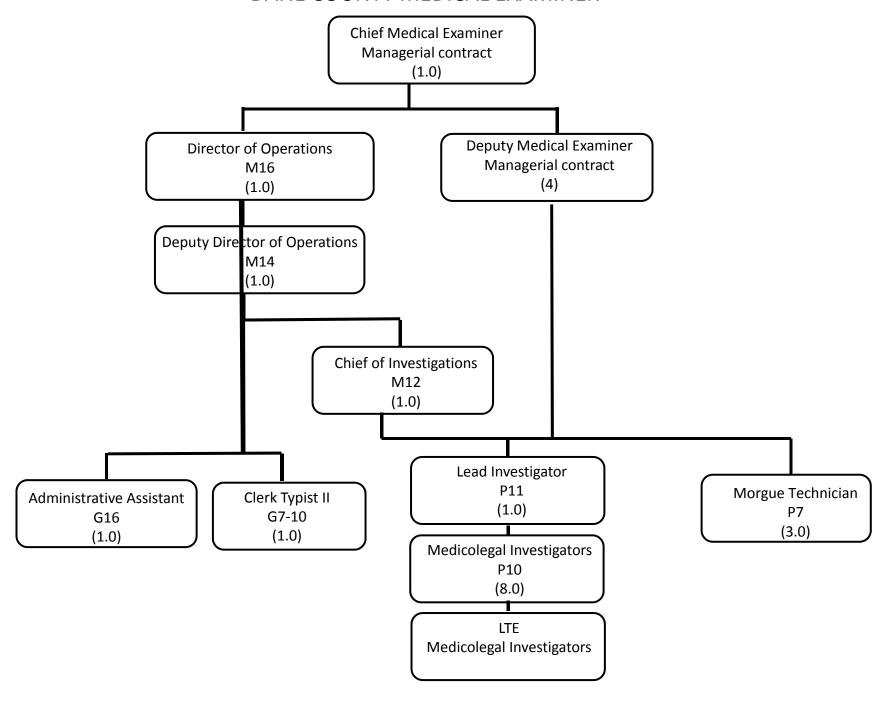
### DANE COUNTY MEDICAL EXAMINER



# COUNTY OF DANE BUDGETED POSITIONS

|   | BUDGE   | TED POSITIO | NS          | MOD         | 2024                 |                           |                        |  |  |  |  |
|---|---------|-------------|-------------|-------------|----------------------|---------------------------|------------------------|--|--|--|--|
| CLASSIFICATION TITLE                    | RANGE   | 2022        | 2023        | 2023        | REQUEST F            | RECOMM'D                  | ADOPTED                |  |  |  |  |
|   | MEDIC   | AL EXAMIN   | <u>ER</u>   |             |                      |                           |                        |  |  |  |  |
| CHIEF MEDICAL EXAMINER                  | MCME    | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| DEPUTY CHIEF MEDICAL EXAMINER           | MCDC    | 1.000       | 0.000       | 0.000       | 0.000                | 0.000                     | 0.000                  |  |  |  |  |
| DEPUTY MEDICAL EXAMINER                 | MCD     | 1.000 36-09 | 1.000 36-09 | 1.000 36-09 | 1.000 <sup>36-</sup> | -09 1.000 <sup>36-0</sup> | 9 1.000 <sup>36-</sup> |  |  |  |  |
| DEPUTY MEDICAL EXAMINER                 | MCD     | 1.000 36-08 | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| DEPUTY MEDICAL EXAMINER                 | MCD     | 2.000       | 2.000       | 2.000       | 2.000                | 2.000                     | 2.000                  |  |  |  |  |
| DIRECTOR OF OPERATIONS MEDICAL EXAMINER | M 16    | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| DEPUTY DIRECTOR OF OPERATIONS           | M 14    | 1.000       | 0.000       | 0.000       | 1.000                | 0.000                     | 0.000                  |  |  |  |  |
| CHIEF OF INVESTIGATIONS                 | M 12    | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| LEAD MEDICOLEGAL INVESTIGATOR           | P 11    | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| MEDICOLEGAL INVESTIGATOR                | P 10    | 8.000       | 8.000       | 8.000       | 8.000                | 8.000                     | 8.000                  |  |  |  |  |
| MORGUE TECHNICIAN                       | P 07    | 3.000       | 3.000       | 3.000       | 3.000                | 3.000                     | 3.000                  |  |  |  |  |
| ADMINISTRATIVE ASSISTANT I              | G 16    | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| CLERK I-II                              | G 07-10 | 1.000       | 1.000       | 1.000       | 1.000                | 1.000                     | 1.000                  |  |  |  |  |
| MEDICAL EXAMINER TOTAL                  |         | 23.000      | 21.000      | 21.000      | 22.000               | 21.000                    | 21.000                 |  |  |  |  |
|   |         | 23.000      | 21.000      | 21.000      | 22.000               | 21.000                    | 21.000                 |  |  |  |  |

TABLE 7 - BUDGETED POSITIONS PAGE 1

## COUNTY OF DANE BUDGETED POSITIONS

### **SUMMARY OF POSITION FOOTNOTES:**

### MEDICAL EXAMINER

36-08 2020 RES-219 REDUCES 1.0 FTE DEPUTY MEDICAL EXAMINER POSITION 3040 TO 0.6 FTE. THE RESOLUTION CREATES 1.0 FTE MORGUE TECHNICIAN POSITION 3276. 2022 EXEC BUDGET INCREASES POSITION 3040 TO 1.0 FTE.

36-09 2022 EXEC BUDGET CREATES POSITION AS PREHIRE (FUNDED AT 50%). 2023 REQUEST REDUCES PREHIRE FUNDING FROM 50% TO 20%.

TABLE 7 - BUDGETED POSITIONS PAGE 2

| Dept: | Medical Examiner | 36     | DANE COUNTY | Fund Name: | General Fund |
|-------|------------------|--------|-------------|------------|--------------|
| Prgm: | Medical Examiner | 000/00 |             | Fund No:   | 1110         |

### Mission:

To complete inquests of the dead as authorized by Chapter 979 of the Wisconsin State Statutes.

### Description:

Wisconsin law requires that any person, particularly physicians, and authorities of hospitals or sanitariums, having knowledge of the death of another, shall report such death to the Sheriff, Police Chief, Medical Examiner or Coroner. If the law enforcement officer receiving such a report of death determines that the death may have resulted from unusual, unexplained, or suspicious circumstances, such as homicide, suicide, abortion, poisoning, or accident, with no physician in attendance, or from any other for which a physician refuses to sign a death certificate, the death must be referred to the Coroner or Medical Examiner of the county for investigation. The Medical Examiner must make the investigation to determine how the death occurred, and report the findings of the investigation to the proper authority.

|                                       | Actual      | Adopted     | 2022          | Board     | Budget      | 2023        | Estimated   | Department  |
|---------------------------------------|-------------|-------------|---------------|-----------|-------------|-------------|-------------|-------------|
|                                       | 2022        | 2023        | Carry Forward | Transfers | As Modified | YTD         | 2023        | Request     |
| PROGRAM EXPENDITURES                  |             |             |               |           |             |             |             |             |
| Personnel Costs                       | \$3,589,260 | \$3,761,500 | \$0           | \$0       | \$3,761,500 | \$940,633   | \$3,818,910 | \$3,859,200 |
| Operating Expenses                    | \$398,257   | \$393,655   | \$1,204       | \$0       | \$394,859   | \$78,882    | \$394,859   | \$393,655   |
| Contractual Services                  | \$247,901   | \$291,800   | \$0           | \$0       | \$291,800   | \$111,727   | \$291,850   | \$299,300   |
| Operating Capital                     | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| TOTAL                                 | \$4,235,418 | \$4,446,955 | \$1,204       | \$0       | \$4,448,159 | \$1,131,242 | \$4,505,619 | \$4,552,155 |
| PROGRAM REVENUE                       |             |             |               |           |             |             |             |             |
| Taxes                                 | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| Intergovernmental Revenue             | \$1,889,146 | \$351,680   | \$0           | \$0       | \$351,680   | (\$135,865) | \$351,680   | \$377,109   |
| Licenses & Permits                    | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| Fines, Forfeits & Penalties           | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| Public Charges for Services           | \$1,185,586 | \$1,125,400 | \$0           | \$0       | \$1,125,400 | \$208,735   | \$1,125,400 | \$1,277,100 |
| Intergovernmental Charge for Services | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| Miscellaneous                         | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| Other Financing Sources               | \$0         | \$0         | \$0           | \$0       | \$0         | \$0         | \$0         | \$0         |
| TOTAL                                 | \$3,074,732 | \$1,477,080 | \$0           | \$0       | \$1,477,080 | \$72,870    | \$1,477,080 | \$1,654,209 |
| GPR SUPPORT                           | \$1,160,686 | \$2,969,875 |               |           | \$2,971,079 |             |             | \$2,897,946 |
| F.T.E. STAFF                          | 23.000      | 21.000      |               |           |             |             | 21.000      | 22.000      |

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| Dept: Medical Examiner                |             | 36        |          |            |                  |            |       | Fund Name: | General Fund   |
|---------------------------------------|-------------|-----------|----------|------------|------------------|------------|-------|------------|----------------|
| Prgm: Medical Examiner                |             | 000/00    |          |            |                  |            |       | Fund No.:  | 1110           |
|                                       | 2024        |           |          | Ne         | et Decision Iten | ns         |       |            | 2024 Requested |
| DI#                                   | Base        | 01        | 02       | 03         | 04               | 05         | 06    | 07         | Budget         |
| PROGRAM EXPENDITURES                  |             |           |          |            |                  |            |       |            |                |
| Personnel Costs                       | \$3,705,100 | \$154,100 | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$3,859,200    |
| Operating Expenses                    | \$393,655   | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$393,655      |
| Contractual Services                  | \$284,300   | \$0       | \$15,000 | \$0        | \$0              | \$0        | \$0   | \$0        | \$299,300      |
| Operating Capital                     | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| TOTAL                                 | \$4,383,055 | \$154,100 | \$15,000 | \$0        | \$0              | \$0        | \$0   | \$0        | \$4,552,155    |
| PROGRAM REVENUE                       |             |           |          |            |                  |            |       |            |                |
| Taxes                                 | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| Intergovernmental Revenue             | \$351,680   | \$0       | \$0      | \$0        | \$0              | \$25,429   | \$0   | \$0        | \$377,109      |
| Licenses & Permits                    | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| Fines, Forfeits & Penalties           | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| Public Charges for Services           | \$1,125,400 | \$0       | \$0      | \$86,500   | \$65,200         | \$0        | \$0   | \$0        | \$1,277,100    |
| Intergovernmental Charge for Services | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| Miscellaneous                         | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| Other Financing Sources               | \$0         | \$0       | \$0      | \$0        | \$0              | \$0        | \$0   | \$0        | \$0            |
| TOTAL                                 | \$1,477,080 | \$0       | \$0      | \$86,500   | \$65,200         | \$25,429   | \$0   | \$0        | \$1,654,209    |
| GPR SUPPORT                           | \$2,905,975 | \$154,100 | \$15,000 | (\$86,500) | (\$65,200)       | (\$25,429) | \$0   | \$0        | \$2,897,946    |
| F.T.E. STAFF                          | 21.000      | 1.000     | 0.000    | 0.000      | 0.000            | 0.000      | 0.000 | 0.000      | 22.000         |

| NARRAT  | IVE INFORMATION ABOUT DECISION ITEMS SHOWN ABOVE   | Expenditures | Revenue     | GPR Support |
|---------|--|--------------|-------------|-------------|
| DI#     | 2024 BUDGET BASE MEDX-MEDX-1 Operational Increases: Deputy Director of Operations  | \$4,383,055  | \$1,477,080 | \$2,905,975 |
| DEPT    | The department is requesting the re-instatement of the Deputy Director Of Operations, which was removed from the 2023 budget due to the dissolution of the Brown County Intergovernmental Agreement. | \$154,100    | \$0         | \$154,100   |
| EXEC    |  |              |             | \$0         |
| ADOPTED |  |              |             | \$0         |
|         | NET DI # MEDX-MEDX-1   | \$154,100    | \$0         | \$154,100   |
|         |  |              |             |             |

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| Dept:<br>Prgm: | Medical Examiner 36 Medical Examiner 000/00   |              |          | General Fund<br>1110 |
|----------------|---|--------------|----------|----------------------|
|                | NARRATIVE INFORMATION ABOUT DECISION ITEMS SHOWN ON PREVIOUS PAGE   | Expenditures | Revenue  | GPR Support          |
| DI#<br>DEPT    | MEDX-MEDX-2 Contractual Expense Changes Contractual obligations with NMS Laboratory Services and SSM Health (COVID related testing and microbiology). | \$15,000     | \$0      | \$15,000             |
| EXEC           |   |              |          | \$0                  |
| ADOPTED        |   |              |          | \$0                  |
|                | NET DI # MEDX-MEDX-2  | \$15,000     | \$0      | \$15,000             |
| DI#<br>DEPT    | MEDX-MEDX-3 Cremation Permit Increases Estimated increase in paid cremation permits.  | \$0          | \$86,500 | (\$86,500)           |
| EXEC           |   |              |          | \$0                  |
| ADOPTED        |   |              |          | \$0                  |
| DI#            | NET DI # MEDX-MEDX-3  MEDX-MEDX-4 Increase in Cremation Permit Fee  | \$0          | \$86,500 | (\$86,500)           |
| DEPT           | Allowable increase in cremation permit revenue based on Wisconsin State Statute 59.365  | \$0          | \$65,200 | (\$65,200)           |
| EXEC           |   |              |          | \$0                  |
| ADOPTED        |   |              |          | \$0                  |
|                | NET DI # MEDX-MEDX-4  | \$0          | \$65,200 | (\$65,200)           |
|                |   |              |          |                      |

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| Dept:     | Medical Examiner 36   |              |                | General Fund       |
|-----------|---|--------------|----------------|--------------------|
| Prgm:     | Medical Examiner 000/00   |              | Fund No.:      | 1110               |
|           | NARRATIVE INFORMATION ABOUT DECISION ITEMS SHOWN ON PREVIOUS PAGE         | Expenditures | Revenue        | GPR Support        |
| DI#       | MEDX-MEDX-5 Adjustments to Rock County Intergovernmental Agreements (IGA) |              | •==            | (4                 |
| DEPT      | These adjustments reflect changes in revenue from the Rock County IGA.    | \$0          | \$25,429       | (\$25,429)         |
|           |   |              |                |                    |
|           |   |              |                |                    |
| EXEC      |   |              |                | \$0                |
|           |   |              |                |                    |
|           |   |              |                |                    |
| ADOPTED   |   |              |                | \$0                |
| 7.501 125 |   |              |                | Ψ0                 |
|           |   |              |                |                    |
|           | NET DI # MEDY MEDY E  | \$0          | <b>ФОЕ 400</b> | ( <b>†</b> 05.400) |
|           | NET DI # MEDX-MEDX-5  | \$0          | \$25,429       | (\$25,429)         |
|           |   |              |                |                    |
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|           | 2024 REQUESTED BURGET   | Φ4 550 455   | ¢4.054.000     | ¢0.007.040         |
|           | 2024 REQUESTED BUDGET   | \$4,552,155  | \$1,654,209    | \$2,897,946        |
|           |   |              |                |                    |

|         | : Medical Examiner   |          |                                      |          |                                      |          |                      | OPERAT                      | ING      | BUDGET SU                            | JMN      | IARY                              |          |                                      |          |                               |          |                                      |
|---------|--|----------|--------------------------------------|----------|--------------------------------------|----------|----------------------|-----------------------------|----------|--------------------------------------|----------|-----------------------------------|----------|--------------------------------------|----------|-------------------------------|----------|--------------------------------------|
| PROGRAM | : Medical Examiner PROGRAM SUMMARY                                       |          | 2022<br>ACTUAL                       |          | ADOPTED<br>BUDGET<br>2023            | CAF      | 2022<br>RRYFORWD     | 2023<br>CO BOARD<br>ACTIONS | N        | CURRENT<br>MODIFIED<br>BUDGET        |          | ACTUAL<br>YTD                     | E        | STIMATED<br>TOTAL                    | ES       | TOTAL<br>STIMATED<br>RRYFORWD |          | AGENCY<br>BASE                       |
|         | PERSONNEL COSTS OPERATING EXPENSE CONTRACTUAL SERVICES OPERATING CAPITAL | \$       | 3,589,260<br>398,257<br>247,901<br>0 | \$       | 3,761,500<br>393,655<br>291,800<br>0 | \$       | 0<br>1,204<br>0<br>0 | \$<br>0<br>0<br>0<br>0      | \$       | 3,761,500<br>394,859<br>291,800<br>0 | \$       | 940,633<br>78,882<br>111,727<br>0 | \$       | 3,818,910<br>394,859<br>291,850<br>0 | \$       | 0<br>0<br>0<br>0              | \$       | 3,705,100<br>393,655<br>284,300<br>0 |
|         | TOTAL PROGRAM EXPENDITURES   | \$       | 4,235,418                            | \$       | 4,446,955                            | \$       | 1,204                | \$<br>0                     | \$       | 4,448,159                            | \$       | 1,131,242                         | \$       | 4,505,619                            | \$       | 0                             | \$       | 4,383,055                            |
|         | LESS REVENUES  |          |                                      |          |                                      |          |                      |                             |          |                                      |          |                                   |          |                                      |          |                               |          |                                      |
|         | TAXES INTERGOVERNMENTAL REVENUE  | \$       | 0<br>1,889,146                       | \$       | 0<br>351,680                         | \$       | 0                    | \$<br>0                     | \$       | 0<br>351,680                         | \$       | 0<br>(135,865)                    | \$       | 0<br>351,680                         | \$       | 0                             | \$       | 0<br>351,680                         |
|         | LICENSES & PERMITS FINES. FORFEITS & PENALTIES                           |          | 0                                    |          | 0                                    |          | 0                    | 0                           |          | 0                                    |          | 0                                 |          | 0                                    |          | 0                             |          | 0                                    |
|         | PUBLIC CHARGE FOR SERVICE  |          | 1,185,586                            |          | 1,125,400                            |          | 0                    | 0                           |          | 1,125,400                            |          | 208,735                           |          | 1,125,400                            |          | 0                             |          | 1,125,400                            |
|         | MISCELLANEOUS OTHER FINANCING SOURCES                                    |          | 0                                    |          | 0                                    |          | 0                    | 0                           |          | 0                                    |          | 0                                 |          | 0                                    |          | 0                             |          | 0                                    |
|         | TOTAL PROGRAM REVENUES NET COST:   | \$<br>\$ | 3,074,732<br>1,160,686               | \$<br>\$ | 1,477,080<br>2,969,875               | \$<br>\$ | 0<br>1,204           | \$<br>0                     | \$<br>\$ | 1,477,080<br>2,971,079               | \$<br>\$ | 72,870<br>1,058,372               | \$<br>\$ | 1,477,080<br>3,028,539               | \$<br>\$ |                               | \$<br>\$ | 1,477,080<br>2,905,975               |

|  |   |                        | DEPARTMENTAL CHANGES              |                        |                                 |          |                            |                        |                                 |                        |                            |                        |                       |                        |                       |          |   |
|--|---|------------------------|-----------------------------------|------------------------|---------------------------------|----------|----------------------------|------------------------|---------------------------------|------------------------|----------------------------|------------------------|-----------------------|------------------------|-----------------------|----------|---|
| PROGRAM SUMMARY  | AGENCY<br>BASE  | DECISION<br>ITEM<br>#1 |                                   | DECISION<br>ITEM<br>#2 |                                 |          | DECISION<br>ITEM<br>#3     | DECISION<br>ITEM<br>#4 |                                 | DECISION<br>ITEM<br>#5 |                            | DECISION<br>ITEM<br>#6 |                       | DECISION<br>ITEM<br>#7 |                       | ı        | AGENCY<br>REQUEST                                 |
| PERSONNEL COSTS OPERATING EXPENSE CONTRACTUAL SERVICES OPERATING CAPITAL TOTAL PROGRAM EXPENDITURES  | \$<br>3,705,100<br>393,655<br>284,300<br>0<br>4,383,055 | ·                      | 154,100<br>0<br>0<br>0<br>154,100 | \$                     | 0<br>0<br>15,000<br>0<br>15,000 | \$       | 0<br>0<br>0<br>0           | \$                     | 0<br>0<br>0<br>0                | \$                     | 0<br>0<br>0<br>0           | \$                     | 0<br>0<br>0<br>0      | \$                     | 0<br>0<br>0<br>0      | \$       | 3,859,200<br>393,655<br>299,300<br>0<br>4,552,155 |
| LESS REVENUES  |   |                        |                                   |                        |                                 |          |                            |                        |                                 |                        |                            |                        |                       |                        |                       |          |   |
| TAXES INTERGOVERNMENTAL REVENUE LICENSES & PERMITS FINES, FORFEITS & PENALTIES PUBLIC CHARGE FOR SERVICE MISCELLANEOUS OTHER FINANCING SOURCES | \$<br>351,680<br>0<br>0<br>1,125,400<br>0               | Ť                      | 0<br>0<br>0<br>0<br>0             | \$                     | 0<br>0<br>0<br>0<br>0           | \$       | 0<br>0<br>0<br>86,500<br>0 | \$                     | 0<br>0<br>0<br>65,200<br>0<br>0 | \$                     | 0<br>25,429<br>0<br>0<br>0 | \$                     | 0<br>0<br>0<br>0<br>0 | \$                     | 0<br>0<br>0<br>0<br>0 | \$       | 0<br>377,109<br>0<br>0<br>1,277,100<br>0          |
| TOTAL PROGRAM REVENUES NET COST:   | \$<br>1,477,080<br>2,905,975                            |                        | 0<br>154,100                      | \$<br>\$               | 0<br>15,000                     | \$<br>\$ | 86,500<br>(86,500)         | \$<br>\$               | 65,200<br>(65,200)              | \$                     | 25,429<br>(25,429)         | \$<br>\$               | 0                     | \$<br>\$               | 0                     | \$<br>\$ | 1,654,209<br>2,897,946                            |

|             |        |                                | C              |             |              |             |             |             |                     |              |             |
|-------------|--------|--------------------------------|----------------|-------------|--------------|-------------|-------------|-------------|---------------------|--------------|-------------|
|             |        |                                | P              | ADOPTED     |              | 2023        | CURRENT     | ACTUAL      | ESTIMATED           | TOTAL        |             |
|             |        |                                | B 2022         | BUDGET      |              | OUNTY BOARD | MODIFIED    |             | <b>EXPENDITURES</b> | ESTIMATED    | AGENCY      |
| YR ORG CODE | OBJECT | DESCRIPTION                    | D EXPENDITURES | 2023        | CARRYFORWARD | ACTIONS     | BUDGET      | YTD         | TOTAL               | CARRYFORWARD | BASE        |
| 24 MEDEXAM  | 10009  | SALARIES AND WAGES             | \$2,116,216    | \$2,656,300 | \$0          | \$0         | \$2,656,300 | \$558,614   | \$2,350,062         | \$0          | \$2,587,300 |
| 24 MEDEXAM  | 10027  | OVERTIME                       | \$37,176       | \$35,100    | \$0          | \$0         | \$35,100    | \$13,715    | \$85,029            | \$0          | \$35,100    |
| 24 MEDEXAM  | 10072  | LIMITED TERM EMPLOYEES         | \$555,644      | \$215,200   | \$0          | \$0         | \$215,200   | \$105,228   | \$508,776           | \$0          | \$215,200   |
| 24 MEDEXAM  | 10099  | RETIREMENT FUND                | \$152,170      | \$184,300   | \$0          | \$0         | \$184,300   | \$35,487    | \$162,155           | \$0          | \$178,600   |
| 24 MEDEXAM  | 10108  | SOCIAL SECURITY                | \$174,785      | \$189,400   | \$0          | \$0         | \$189,400   | \$51,801    | \$225,230           | \$0          | \$190,800   |
| 24 MEDEXAM  | 10117  | HEALTH                         | \$345,078      | \$417,000   | \$0          | \$0         | \$417,000   | \$110,464   | \$378,424           | \$0          | \$430,700   |
| 24 MEDEXAM  | 10126  | HEALTH-RETIREES                | \$149,797      | \$65,500    | \$0          | \$0         | \$65,500    | \$58,242    | \$58,243            | \$0          | \$60,000    |
| 24 MEDEXAM  | 10153  | DENTAL                         | \$20,577       | \$24,400    | \$0          | \$0         | \$24,400    | \$5,112     | \$23,945            | \$0          | \$25,300    |
| 24 MEDEXAM  | 10171  | DISABILITY INSURANCE           | \$4,437        | \$4,600     | \$0          | \$0         | \$4,600     | \$1,446     | \$3,969             | \$0          | \$3,800     |
| 24 MEDEXAM  | 10180  | LIFE INSURANCE                 | \$372          | \$500       | \$0          | \$0         | \$500       | \$85        | \$337               | \$0          | \$400       |
| 24 MEDEXAM  | 10185  | FSA ADMINISTRATION FEE         | \$286          | \$200       | \$0          | \$0         | \$200       | \$0         | \$200               | \$0          | \$100       |
| 24 MEDEXAM  | 10189  | WORKERS COMPENSATION           | \$30,900       | \$22,100    | \$0          | \$0         | \$22,100    | \$0         | \$22,100            | \$0          | \$29,500    |
| 24 MEDEXAM  | 10198  | UNEMPLOYMENT COMPENSATION      | \$37           | \$0         | \$0          | \$0         | \$0         | \$0         | \$0                 | \$0          | \$0         |
| 24 MEDEXAM  | 10207  | PROTECTIVE WEAR                | \$1,784        | \$0         | \$0          | \$0         | \$0         | \$440       | \$440               | \$0          | \$0         |
| 24 MEDEXAM  | 10250  | SALARY SAVINGS                 | \$0            | (\$53,100)  | \$0          | \$0         | (\$53,100)  | \$0         | \$0                 | \$0          | (\$51,700)  |
| 24 MEDEXAM  | 20096  | PREEMPLOYMENT TESTING          | \$3,692        | \$2,500     | \$0          | \$0         | \$2,500     | \$0         | \$2,500             | \$0          | \$2,500     |
| 24 MEDEXAM  | 20520  | CADAVER K9 PROGRAM EXPENSE     | \$1,597        | \$10,000    | \$0          | \$0         | \$10,000    | \$549       | \$10,000            | \$0          | \$10,000    |
| 24 MEDEXAM  | 20612  | COMMUNICATION EQUIPMENT REPAIR | \$675          | \$4,000     | \$0          | \$0         | \$4,000     | \$416       | \$4,000             | \$0          | \$4,000     |
| 24 MEDEXAM  | 20648  | CONFERENCES AND TRAINING       | \$1,795        | \$15,000    | \$0          | \$0         | \$15,000    | \$0         | \$15,000            | \$0          | \$15,000    |
| 24 MEDEXAM  | 20711  | CONVEYANCES                    | \$188,600      | \$170,600   | \$0          | \$0         | \$170,600   | \$38,870    | \$170,600           | \$0          | \$170,600   |
| 24 MEDEXAM  | 21029  | FINAL DISPOSITION EXPENSE      | \$1,725        | \$7,000     | \$0          | \$0         | \$7,000     | \$0         | \$7,000             | \$0          | \$7,000     |
| 24 MEDEXAM  | 21674  | MORGUE SUPPLIES                | \$38,379       | \$42,255    | \$0          | \$0         | \$42,255    | \$10,664    | \$42,255            | \$0          | \$42,255    |
| 24 MEDEXAM  | 21809  | OPERATING EQUIPMENT EXPENSE    | \$62,361       | \$50,100    | \$1,204      | \$0         | \$51,304    | \$5,763     | \$51,304            | \$0          | \$50,100    |
| 24 MEDEXAM  | 22043  | PRTNG STA & OFFICE SUPPLIES    | \$19,681       | \$25,245    | \$0          | \$0         | \$25,245    | \$4,416     | \$25,245            | \$0          | \$25,245    |
| 24 MEDEXAM  | 22632  | TRANSCRIPTIONS                 | \$57,122       | \$39,500    | \$0          | \$0         | \$39,500    | \$12,800    | \$39,500            | \$0          | \$39,500    |
| 24 MEDEXAM  | 22646  | TRAVEL EXPENSE                 | \$4,751        | \$3,955     | \$0          | \$0         | \$3,955     | \$0         | \$3,955             | \$0          | \$3,955     |
| 24 MEDEXAM  | 22736  | TELEPHONE                      | \$17,881       | \$23,500    | \$0          | \$0         | \$23,500    | \$5,404     | \$23,500            | \$0          | \$23,500    |
| 24 MEDEXAM  | 30180  | SCANNER MAINTENANCE            | \$80,750       | \$80,700    | \$0          | \$0         | \$80,700    | \$80,750    | \$80,750            | \$0          | \$80,700    |
| 24 MEDEXAM  | 30287  | LODOX WARRANTY CONTRACT        | \$6,167        | \$18,500    | \$0          | \$0         | \$18,500    | \$6,167     | \$18,500            | \$0          | \$18,500    |
| 24 MEDEXAM  | 30299  | POWERLOAD COT MAINTENANCE      | \$0            | \$7,300     | \$0          | \$0         | \$7,300     | \$0         | \$7,300             | \$0          | \$7,300     |
| 24 MEDEXAM  | 30304  | COVID DIAGNOSTIC SERVICES      | \$18,762       | \$30,000    | \$0          | \$0         | \$30,000    | \$3,800     | \$30,000            | \$0          | \$30,000    |
| 24 MEDEXAM  | 30860  | DIAGNOSTIC SERVICES            | \$112,720      | \$120,200   | \$0          | \$0         | \$120,200   | \$21,010    | \$120,200           | \$0          | \$120,200   |
| 24 MEDEXAM  | 31260  | INSURANCE                      | \$29,200       | \$34,100    | \$0          | \$0         | \$34,100    | \$0         | \$34,100            | \$0          | \$26,600    |
| 24 MEDEXAM  | 32223  | RENTAL OF EQUIPMENT            | \$302          | \$1,000     | \$0          | \$0         | \$1,000     | \$0         | \$1,000             | \$0          | \$1,000     |
|             |        | TOTAL EXPENDITURES             | \$4,235,418    | \$4,446,955 | \$1,204      | \$0         | \$4,448,159 | \$1,131,242 | \$4,505,619         | \$0          | \$4,383,055 |

|             |        |                                | С           |             |                  |                  | DEP              | ARTMENTAL CHAI   | NGES             |                  |                  |             |
|-------------|--------|--------------------------------|-------------|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------|
|             |        |                                | A<br>P<br>B | AGENCY      | DECISION<br>ITEM | AGENCY      |
| YR ORG CODE | OBJECT | DESCRIPTION                    | D           | BASE        | #1               | #2               | #3               | #4               | #5               | #6               | #7               | REQUEST     |
| 24 MEDEXAM  | 10009  | SALARIES AND WAGES             |             | \$2,587,300 | \$154,100        |                  |                  |                  |                  |                  |                  | \$2,741,400 |
| 24 MEDEXAM  | 10027  | OVERTIME                       |             | \$35,100    |                  |                  |                  |                  |                  |                  |                  | \$35,100    |
| 24 MEDEXAM  | 10072  | LIMITED TERM EMPLOYEES         |             | \$215,200   |                  |                  |                  |                  |                  |                  |                  | \$215,200   |
| 24 MEDEXAM  | 10099  | RETIREMENT FUND                |             | \$178,600   |                  |                  |                  |                  |                  |                  |                  | \$178,600   |
| 24 MEDEXAM  | 10108  | SOCIAL SECURITY                |             | \$190,800   |                  |                  |                  |                  |                  |                  |                  | \$190,800   |
| 24 MEDEXAM  | 10117  | HEALTH                         |             | \$430,700   |                  |                  |                  |                  |                  |                  |                  | \$430,700   |
| 24 MEDEXAM  | 10126  | HEALTH-RETIREES                |             | \$60,000    |                  |                  |                  |                  |                  |                  |                  | \$60,000    |
| 24 MEDEXAM  | 10153  | DENTAL                         |             | \$25,300    |                  |                  |                  |                  |                  |                  |                  | \$25,300    |
| 24 MEDEXAM  | 10171  | DISABILITY INSURANCE           |             | \$3,800     |                  |                  |                  |                  |                  |                  |                  | \$3,800     |
| 24 MEDEXAM  | 10180  | LIFE INSURANCE                 |             | \$400       |                  |                  |                  |                  |                  |                  |                  | \$400       |
| 24 MEDEXAM  | 10185  | FSA ADMINISTRATION FEE         |             | \$100       |                  |                  |                  |                  |                  |                  |                  | \$100       |
| 24 MEDEXAM  | 10189  | WORKERS COMPENSATION           |             | \$29,500    |                  |                  |                  |                  |                  |                  |                  | \$29,500    |
| 24 MEDEXAM  | 10198  | UNEMPLOYMENT COMPENSATION      |             | \$0         |                  |                  |                  |                  |                  |                  |                  | \$0         |
| 24 MEDEXAM  | 10207  | PROTECTIVE WEAR                |             | \$0         |                  |                  |                  |                  |                  |                  |                  | \$0         |
| 24 MEDEXAM  | 10250  | SALARY SAVINGS                 |             | (\$51,700)  |                  |                  |                  |                  |                  |                  |                  | (\$51,700)  |
| 24 MEDEXAM  | 20096  | PREEMPLOYMENT TESTING          |             | \$2,500     |                  |                  |                  |                  |                  |                  |                  | \$2,500     |
| 24 MEDEXAM  | 20520  | CADAVER K9 PROGRAM EXPENSE     |             | \$10,000    |                  |                  |                  |                  |                  |                  |                  | \$10,000    |
| 24 MEDEXAM  | 20612  | COMMUNICATION EQUIPMENT REPAIR |             | \$4,000     |                  |                  |                  |                  |                  |                  |                  | \$4,000     |
| 24 MEDEXAM  | 20648  | CONFERENCES AND TRAINING       |             | \$15,000    |                  |                  |                  |                  |                  |                  |                  | \$15,000    |
| 24 MEDEXAM  | 20711  | CONVEYANCES                    |             | \$170,600   |                  |                  |                  |                  |                  |                  |                  | \$170,600   |
| 24 MEDEXAM  | 21029  | FINAL DISPOSITION EXPENSE      |             | \$7,000     |                  |                  |                  |                  |                  |                  |                  | \$7,000     |
| 24 MEDEXAM  | 21674  | MORGUE SUPPLIES                |             | \$42,255    |                  |                  |                  |                  |                  |                  |                  | \$42,255    |
| 24 MEDEXAM  | 21809  | OPERATING EQUIPMENT EXPENSE    |             | \$50,100    |                  |                  |                  |                  |                  |                  |                  | \$50,100    |
| 24 MEDEXAM  | 22043  | PRTNG STA & OFFICE SUPPLIES    |             | \$25,245    |                  |                  |                  |                  |                  |                  |                  | \$25,245    |
| 24 MEDEXAM  | 22632  | TRANSCRIPTIONS                 |             | \$39,500    |                  |                  |                  |                  |                  |                  |                  | \$39,500    |
| 24 MEDEXAM  | 22646  | TRAVEL EXPENSE                 |             | \$3,955     |                  |                  |                  |                  |                  |                  |                  | \$3,955     |
| 24 MEDEXAM  | 22736  | TELEPHONE                      |             | \$23,500    |                  |                  |                  |                  |                  |                  |                  | \$23,500    |
| 24 MEDEXAM  | 30180  | SCANNER MAINTENANCE            |             | \$80,700    |                  |                  |                  |                  |                  |                  |                  | \$80,700    |
| 24 MEDEXAM  | 30287  | LODOX WARRANTY CONTRACT        |             | \$18,500    |                  |                  |                  |                  |                  |                  |                  | \$18,500    |
| 24 MEDEXAM  | 30299  | POWERLOAD COT MAINTENANCE      |             | \$7,300     |                  |                  |                  |                  |                  |                  |                  | \$7,300     |
| 24 MEDEXAM  | 30304  | COVID DIAGNOSTIC SERVICES      |             | \$30,000    |                  |                  |                  |                  |                  |                  |                  | \$30,000    |
| 24 MEDEXAM  | 30860  | DIAGNOSTIC SERVICES            |             | \$120,200   |                  | \$15,000         |                  |                  |                  |                  |                  | \$135,200   |
| 24 MEDEXAM  | 31260  | INSURANCE                      |             | \$26,600    |                  | ,                |                  |                  |                  |                  |                  | \$26,600    |
| 24 MEDEXAM  | 32223  | RENTAL OF EQUIPMENT            |             | \$1,000     |                  |                  |                  |                  |                  |                  |                  | \$1,000     |
|             |        | TOTAL EXPENDITURES             | 3           | \$4,383,055 | \$154,100        | \$15,000         | \$0              | \$0              | \$0              | \$0              | \$0              | \$4,552,155 |

DEPARTMENT: Medical Examiner PROGRAM: Medical Examiner

|             |        |                                | C<br>A                    |                           |                      |                                 |                               |                           |                                |                                    |                |
|-------------|--------|--------------------------------|---------------------------|---------------------------|----------------------|---------------------------------|-------------------------------|---------------------------|--------------------------------|------------------------------------|----------------|
| YR ORG CODE | OBJECT | DESCRIPTION                    | P<br>B 2022<br>D REVENUES | ADOPTED<br>BUDGET<br>2023 | 2022<br>CARRYFORWARD | 2023<br>COUNTY BOARD<br>ACTIONS | CURRENT<br>MODIFIED<br>BUDGET | ACTUAL<br>REVENUES<br>YTD | ESTIMATED<br>REVENUES<br>TOTAL | TOTAL<br>ESTIMATED<br>CARRYFORWARD | AGENCY<br>BASE |
| 24 MEDEXAM  | 81367  | ARP REVENUE                    | \$1,017,725               | \$0                       | \$0                  | \$0                             | \$0                           | \$0                       | \$0                            | \$0                                | \$0            |
| 24 MEDEXAM  | 82990  | CREMATION CERTIFICATES         | \$982,674                 | \$933,900                 | \$0                  | \$0                             | \$933,900                     | \$197,304                 | \$933,900                      | \$0                                | \$933,900      |
| 24 MEDEXAM  | 82991  | MORGUE USAGE REVENUE           | \$128,800                 | \$130,000                 | \$0                  | \$0                             | \$130,000                     | \$0                       | \$130,000                      | \$0                                | \$130,000      |
| 24 MEDEXAM  | 82993  | EXPERT SERVICES REVENUE        | \$9,860                   | \$7,000                   | \$0                  | \$0                             | \$7,000                       | \$0                       | \$7,000                        | \$0                                | \$7,000        |
| 24 MEDEXAM  | 82998  | AUTOPSY REVENUE                | \$58,440                  | \$52,000                  | \$0                  | \$0                             | \$52,000                      | \$10,781                  | \$52,000                       | \$0                                | \$52,000       |
| 24 MEDEXAM  | 83011  | ROCK COUNTY-AUTOPSY MEDICINE   | \$256,305                 | \$236,600                 | \$0                  | \$0                             | \$236,600                     | \$0                       | \$236,600                      | \$0                                | \$236,600      |
| 24 MEDEXAM  | 83012  | ROCK COUNTY-ADMIN/OVERSIGHT    | \$48,049                  | \$47,100                  | \$0                  | \$0                             | \$47,100                      | \$0                       | \$47,100                       | \$0                                | \$47,100       |
| 24 MEDEXAM  | 83013  | ROCK CNTY-FORENSIC CASE REVIEW | \$47,174                  | \$50,500                  | \$0                  | \$0                             | \$50,500                      | \$0                       | \$50,500                       | \$0                                | \$50,500       |
| 24 MEDEXAM  | 83014  | ROCK COUNTY-PATHOLOGIST MGMT   | \$17,510                  | \$17,480                  | \$0                  | \$0                             | \$17,480                      | \$0                       | \$17,480                       | \$0                                | \$17,480       |
| 24 MEDEXAM  | 83016  | BROWN COUNTY-AUTOPSY MEDICINE  | \$330,777                 | \$0                       | \$0                  | \$0                             | \$0                           | (\$89,453)                | \$0                            | \$0                                | \$0            |
| 24 MEDEXAM  | 83017  | BROWN COUNTY-ADMIN/OVERSIGHT   | \$92,219                  | \$0                       | \$0                  | \$0                             | \$0                           | (\$33,940)                | \$0                            | \$0                                | \$0            |
| 24 MEDEXAM  | 83018  | BROWN CO-FORENSIC CASE REVIEW  | \$33,119                  | \$0                       | \$0                  | \$0                             | \$0                           | (\$4,866)                 | \$0                            | \$0                                | \$0            |
| 24 MEDEXAM  | 83019  | BROWN COUNTY-PATHOLOGIST MGMT  | \$46,268                  | \$0                       | \$0                  | \$0                             | \$0                           | (\$7,606)                 | \$0                            | \$0                                | \$0            |
| 24 MEDEXAM  | 83620  | MISCELLANEOUS REVENUE          | \$5,812                   | \$2,500                   | \$0                  | \$0                             | \$2,500                       | \$650                     | \$2,500                        | \$0                                | \$2,500        |
|             |        | TOTAL REVENUES                 | \$3,074,732               | \$1,477,080               | \$0                  | \$0                             | \$1,477,080                   | \$72,870                  | \$1,477,080                    | \$0                                | \$1,477,080    |

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**DEPARTMENT:** Medical Examiner **PROGRAM:** Medical Examiner

|             |        |                                | С                 | DEPARTMENTAL CHANGES   |                        |                        |                        |                        |                        |                        |                   |  |
|-------------|--------|--------------------------------|-------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|-------------------|--|
| YR ORG CODE | OBJECT | DESCRIPTION                    | P B AGENCY D BASE | DECISION<br>ITEM<br>#1 | DECISION<br>ITEM<br>#2 | DECISION<br>ITEM<br>#3 | DECISION<br>ITEM<br>#4 | DECISION<br>ITEM<br>#5 | DECISION<br>ITEM<br>#6 | DECISION<br>ITEM<br>#7 | AGENCY<br>REQUEST |  |
| 24 MEDEXAM  | 81367  | ARP REVENUE                    | \$0               |                        |                        | -                      |                        | -                      |                        |                        | \$0               |  |
| 24 MEDEXAM  | 82990  | CREMATION CERTIFICATES         | \$933,900         |                        |                        | \$86,500               | \$65,200               |                        |                        |                        | \$1,085,600       |  |
| 24 MEDEXAM  | 82991  | MORGUE USAGE REVENUE           | \$130,000         |                        |                        |                        |                        |                        |                        |                        | \$130,000         |  |
| 24 MEDEXAM  | 82993  | EXPERT SERVICES REVENUE        | \$7,000           |                        |                        |                        |                        |                        |                        |                        | \$7,000           |  |
| 24 MEDEXAM  | 82998  | AUTOPSY REVENUE                | \$52,000          |                        |                        |                        |                        |                        |                        |                        | \$52,000          |  |
| 24 MEDEXAM  | 83011  | ROCK COUNTY-AUTOPSY MEDICINE   | \$236,600         |                        |                        |                        |                        | \$13,026               |                        |                        | \$249,626         |  |
| 24 MEDEXAM  | 83012  | ROCK COUNTY-ADMIN/OVERSIGHT    | \$47,100          |                        |                        |                        |                        | \$11,403               |                        |                        | \$58,503          |  |
| 24 MEDEXAM  | 83013  | ROCK CNTY-FORENSIC CASE REVIEW | \$50,500          |                        |                        |                        |                        |                        |                        |                        | \$50,500          |  |
| 24 MEDEXAM  | 83014  | ROCK COUNTY-PATHOLOGIST MGMT   | \$17,480          |                        |                        |                        |                        | \$1,000                |                        |                        | \$18,480          |  |
| 24 MEDEXAM  | 83016  | BROWN COUNTY-AUTOPSY MEDICINE  | \$0               |                        |                        |                        |                        |                        |                        |                        | \$0               |  |
| 24 MEDEXAM  | 83017  | BROWN COUNTY-ADMIN/OVERSIGHT   | \$0               |                        |                        |                        |                        |                        |                        |                        | \$0               |  |
| 24 MEDEXAM  | 83018  | BROWN CO-FORENSIC CASE REVIEW  | \$0               |                        |                        |                        |                        |                        |                        |                        | \$0               |  |
| 24 MEDEXAM  | 83019  | BROWN COUNTY-PATHOLOGIST MGMT  | \$0               |                        |                        |                        |                        |                        |                        |                        | \$0               |  |
| 24 MEDEXAM  | 83620  | MISCELLANEOUS REVENUE          | \$2,500           |                        |                        |                        |                        |                        |                        |                        | \$2,500           |  |
|             |        | TOTAL REVENUES                 | \$1,477,080       | \$0                    | \$0                    | \$86,500               | \$65,200               | \$25,429               | \$0                    | \$0                    | \$1,654,209       |  |

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| 1. DEPARTMENT                          | Medical Examiner   | 3. DEPT. NO.                            | 36                            |                  |              | 5. FUND NAME                             | General F | und        |
|--|--|---|-------------------------------|------------------|--------------|--|-----------|------------|
| 2. PROGRAM                             | Medical Examiner   | 4. PROGRAM NO.                          | 000/00                        |                  |              | 6. FUND NO.                              | 1110      |            |
| 7. DECISION ITEM T                     | ITLE   |   |                               |                  | ,            | 8. BUDGETED POSITION CHANGES             | S         |            |
| Operational In                         | creases: Deputy Director of Operations   |   |                               | POSITION#        |              | TITLE                                    | # FTE     | START DATE |
| 9. DECISION ITEM N                     | UMBER  |   |                               | 3042             | DEPUTY DIRE  | CTOR OF OPERATIONS                       | 1.000     | 1/1/2024   |
| MEDX-MEDX-                             | 1  |   |                               |                  |              |  |           |            |
|  |  |   |                               |                  |              |  |           |            |
|  | PTION (for budget documentmay no   | •                                       |                               |                  |              |  |           |            |
| _                                      | equesting the re-instatement of the De<br>issolution of the Brown County Intergov                                    |   | s removed from the 2023       |                  |              |  |           |            |
|  | , ,  | ·                                       |                               |                  |              |  |           |            |
|  |  |   |                               |                  |              |  |           |            |
|  |  |   |                               |                  | -            | TOTAL REQUESTED FTE CHANGE               | 1.000     |            |
|  |  |   |                               |                  |              | TOTAL REGOLDTED TTE OTTARDE              | 1.000     |            |
| 11. (a) EXPLANATIO                     | N/JUSTIFICATION (please be specifi   | c)                                      |                               |                  |              | 12. OPERATING EXPENSES /                 | 'REVENUE  | SUMMARY    |
| - •                                    | of Operations, was established in 201  | ·                                       |                               |                  |              |  |           |            |
| Medical Examiner's Intergovernmental A | Office (DCMEO) and oversight of parting Agreement (IGA).   | ner counties. In 2023, the position was | eliminated due to the disso   | lution of the Br | own County   | REQUESTED EXPENDITURES                   |           |            |
|  | een an 8.87% increase in investigative   |   |                               |                  |              | PERSONNEL COSTS                          |           | \$154,100  |
| with opportunities fo                  | within reasonable work hours and export growth, open and direct communicated dministration to accomplish daily opera | on, and means to thrive as employees    | . Re-instatement of the De    | puty Director o  | f Operations | OPERATING EXPENSE                        |           | \$0        |
| -                                      | t of the office and focus on growth/dev  | •                                       |                               |                  |              | CONTRACTUAL EXPENSE                      |           | \$0        |
|  |  |   |                               |                  |              | OPERATING OUTLAY                         |           | \$0        |
|  |  |   |                               |                  |              | TOTAL EXPENSE                            |           | \$154,100  |
|  |  |   |                               |                  |              | RELATED REVENUES                         |           |            |
|  |  |   |                               |                  |              | TAVEC                                    |           | Φ0.        |
|  |  |   |                               |                  |              | TAXES                                    | ENUIE     | \$0        |
| (b) What are the                       | consequences of not funding this re  | equest?                                 |                               |                  |              | INTERGOVERNMENTAL REV                    | ENUE      | \$0        |
| Current administrati                   | ve staff will continue struggling to main  | tain operations within reasonable work  | hours.                        |                  |              | LICENSES & PERMITS                       |           | \$0        |
|  |  |   |                               |                  |              | FINES, FORFEITS & PENALTI                | ES        | \$0        |
|  |  |   |                               |                  |              | PUBLIC CHARGES FOR SER                   | VICES     | \$0        |
|  |  |   |                               |                  |              | INTERGOVERNMENTAL<br>CHARGE FOR SERVICES |           | \$0        |
| ,                                      | s/productivity improvements will res   |   |                               |                  |              | MISCELLANEOUS                            |           | \$0        |
|  | to accomplish daily operations in a time office and focus on growth/developme  |   | tion of duties and tasks; pro | vide more time   | e for self-  | OTHER FINANCING SOURCE                   | S         | \$0        |
|  |  |   |                               |                  |              | TOTAL REVENUE                            |           | \$0        |
|  |  |   |                               |                  |              | NET COST TO CO                           | UNTY      | \$154,100  |

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| 1. DEPARTMENT         | Medical Examiner  | 3. DEPT. N      | О.               | 36               |                 |                 | 5. FUND NAME | General Fun | t   |
|-----------------------|---|-----------------|------------------|------------------|-----------------|-----------------|--------------|-------------|-----|
| 2. PROGRAM            | Medical Examiner  | 4. PROGR        | AM NO.           | 000/00           |                 |                 | 6. FUND NO.  | 1110        |     |
| 7. DECISION ITEM T    | TITLE   |                 |                  |                  |                 | 9. DECISION ITI | EM NUMBER    |             |     |
| Operational Ir        | ncreases: Deputy Director of Operations   |                 |                  |                  |                 | MEDX-M          | EDX-1        |             |     |
| -                     | IDGETED POSITION CHANGES INFORMATION  |                 |                  |                  |                 |                 |              |             |     |
| POSITION#             | TITLE   | UNIT            | RANGE            | FOOTNOTE?        |                 | FOOT            | NOTE REASON  | / TEVT      |     |
|                       |   |                 |                  | FOOTNOTES        |                 | F0011           | NOTE REASON  | /   [ ]     |     |
| 3042                  | DEPUTY DIRECTOR OF OPERATIONS   | M               | 14-00            |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
| 44 EVDENCEC/DEV       | VENUES INCLUDED WITH FACIL NEW DOCITION I   | DECLIEST (was   | d to adjust Dasi | oion Hom if omo  |                 |                 | <u> </u>     |             |     |
| 14. EXPENSES/REV      | 'ENUES INCLUDED WITH EACH NEW POSITION I  | 3042            | to adjust Deci   | Sion item if ame | naea auring the | buaget process  | 5)           |             |     |
| BASE SALARY           | Instructions for this section: In the column                                      | \$111,400       |                  |                  |                 |                 |              |             |     |
| LONGEVITY             | for each position, enter the appropriate data                                     | ψ,.σσ           |                  |                  |                 |                 |              |             |     |
| INCENTIVE             | from the new position request printout.   |                 |                  |                  |                 |                 |              |             |     |
| RETIREMENT            |   | 7,700           |                  |                  |                 |                 |              |             |     |
| FICA<br>HEALTH        | For the "Items under \$500", "Capital" and "Revenue" sections, please use columns | 8,500<br>26,800 |                  |                  |                 |                 |              |             |     |
| DENTAL                | M, N. and O to give a short description of  | 1,700           |                  |                  |                 |                 |              |             |     |
| DISABILITY            | each item included.   | 200             |                  |                  |                 |                 |              |             |     |
| LIFE                  |   |                 |                  |                  |                 |                 |              |             |     |
| WORKERS COMP          |   |                 |                  |                  |                 |                 |              |             |     |
| PROTECTIVE TOOL ALL.  | L and the Column headings by using the "Freeze Panes" feature so that you can     |                 |                  |                  |                 |                 |              |             |     |
| BAR DUES              | move across the screen to the right   |                 |                  |                  |                 |                 |              |             |     |
| UNIFORMS              | and down without losing that information.   |                 |                  |                  |                 |                 |              |             |     |
| SALARY SAVGS          |   | 2,200           |                  |                  |                 |                 |              |             |     |
| CONF & TRNG           | _   |                 |                  |                  |                 |                 |              |             |     |
| SUPPLIES<br>ITEMS     |   |                 |                  |                  |                 |                 |              |             |     |
| UNDER                 |   |                 |                  |                  |                 |                 |              |             |     |
| \$2,500               |   |                 |                  |                  |                 |                 |              |             |     |
| TELEPHONE             |   |                 |                  |                  |                 |                 |              |             |     |
| TRAVEL                |   |                 |                  |                  |                 |                 |              |             |     |
| CAPITAL               |   |                 |                  |                  |                 |                 |              |             |     |
|                       |   |                 |                  |                  |                 |                 |              |             |     |
| 071155                |   |                 |                  |                  |                 |                 |              |             |     |
| OTHER                 |   |                 |                  |                  |                 |                 |              |             |     |
|                       | TOTAL   |                 |                  |                  |                 |                 |              |             |     |
|                       | EXPENSES  | \$158,500       | \$0              | \$0              | \$0             | \$0             | \$0          | \$0         | \$0 |
| SPECIFY               | Source 1:   |                 |                  |                  |                 |                 |              |             |     |
| REVENUES              | Source 2:   |                 |                  |                  |                 |                 |              |             |     |
| ASSOCIATED<br>W/ EACH | Source 3:<br>Source 4:  |                 |                  |                  |                 |                 |              |             |     |
| POSITION              | Source 5:   |                 |                  |                  |                 |                 |              |             |     |
| 1 233                 | TOTAL   |                 |                  |                  |                 |                 |              |             |     |
|                       | REVENUES  | \$0             | \$0              | \$0              | \$0             | \$0             | \$0          | \$0         | \$0 |

| 1. DEPARTMENT             | Medical Examiner   | 3. [                      | EPT. NO.            | 36              | 1                      |                    |              |          | 5. FUND NAME                            | General F | und        |
|---------------------------|--|---------------------------|---------------------|-----------------|------------------------|--------------------|--------------|----------|---|-----------|------------|
| 2. PROGRAM                | Medical Examiner   | 4. F                      | PROGRAM NO.         | 000             | 0/00                   |                    |              |          | 6. FUND NO.                             | 1110      |            |
| 7. DECISION ITEM T        |  |                           |                     |                 |                        |                    |              |          | TED POSITION CHANGE                     | 1         |            |
|                           | tual Expense Changes   |                           |                     |                 |                        | POSITION#          |              | Т        | TLE                                     | # FTE     | START DATE |
| 9. DECISION ITEM N MEDX-N |  |                           |                     |                 |                        |                    |              |          |   |           |            |
| WEDX-1                    | WEDA-2   |                           |                     |                 |                        |                    |              |          |   |           |            |
| 10. SHORT DESCRI          | PTION (for budget document-  | -may not exceed 470 cha   | racters)            |                 |                        |                    |              |          |   |           |            |
| Contractual obliga        | ations with NMS Laboratory Ser                                       | vices and SSM Health (CO  | VID related testing | ng and          | f microbiology).       |                    |              |          |   |           |            |
|                           |  |                           |                     |                 |                        |                    |              |          |   |           |            |
|                           |  |                           |                     |                 |                        |                    |              |          |   |           |            |
|                           |  |                           |                     |                 |                        |                    |              | TOTAL RI | EQUESTED FTE CHANGE                     | 0.000     |            |
|                           |  |                           |                     |                 |                        |                    |              |          |   |           | <u> </u>   |
|                           | N/JUSTIFICATION (please be   |                           |                     |                 |                        |                    |              | 12.      | OPERATING EXPENSES                      | / REVENUE | SUMMARY    |
|                           | ate Lab of Hygiene (WSLH) is r<br>St. Mary's hospital, to facilitate |                           |                     |                 | he department will be  | paying \$100.00    | per test for |          |   |           |            |
| · ·                       |  | ·                         |                     |                 |                        |                    |              | REQUES   | STED EXPENDITURES                       |           |            |
|                           | SLH is no longer able to subside a price of \$1000 per case.         | ned by St.                |                     | PERSONNEL COSTS |                        | \$0                |              |          |   |           |            |
|                           | s are increasing prices by 3% in                                     | 2024, and more specialize | d testing is being  | g reque         | ested in many cases of | due to new illicit | synthetic    |          | OPERATING EXPENSE                       |           | \$0        |
| substances.               |  |                           |                     |                 |                        |                    |              |          | CONTRACTUAL EXPENS                      | SE        | \$15,000   |
|                           |  |                           |                     |                 |                        |                    |              |          | OPERATING OUTLAY                        |           | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | TOTAL EXPENSE                           | <b>=</b>  | \$15,000   |
|                           |  |                           |                     |                 |                        |                    |              |          |   |           |            |
|                           |  |                           |                     |                 |                        |                    |              | RELATE   | D REVENUES                              |           |            |
|                           |  |                           |                     |                 |                        |                    |              |          | TAXES                                   |           | \$0        |
| (b) What are the          | consequences of not fundin   | g this request?           |                     |                 |                        |                    |              |          | INTERGOVERNMENTAL                       | REVENUE   | \$0        |
| Insufficient funding      | g to meet unavoidable contract                                       | ual expenditures.         |                     |                 |                        |                    |              |          | LICENSES & PERMITS                      |           | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | FINES, FORFEITS & PEN                   | NALTIES   | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | PUBLIC CHARGES FOR                      | SERVICES  | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | INTERGOVERNMENTAL<br>CHARGE FOR SERVICE |           | \$0        |
| (c) What saving           | s/productivity improvements  | will result from approval | of this request?    |                 |                        |                    |              |          | MISCELLANEOUS                           |           | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | OTHER FINANCING SOL                     | JRCES     | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | TOTAL REVENUE                           |           | \$0        |
|                           |  |                           |                     |                 |                        |                    |              |          | NET COST TO CO                          | DUNTY     | \$15,000   |
|                           |  |                           |                     |                 |                        |                    |              |          |   |           |            |

| 1. DEPARTMENT      | Medical Examiner                  | 3. DEPT. NO.                               | 36                    |                        |            | 5. FUND NAME                           | General F | und        |
|--------------------|-----------------------------------|--|-----------------------|------------------------|------------|--|-----------|------------|
| 2. PROGRAM         | Medical Examiner                  | 4. PROGRAM NO.                             | 000/00                |                        |            | 6. FUND NO.                            | 1110      |            |
| 7. DECISION ITEM 1 | TITLE                             |  |                       |                        |            | 8. BUDGETED POSITION CHANGI            | ES        |            |
| Cremat             | ion Permit Increases              |  |                       | POSITION#              |            | TITLE                                  | # FTE     | START DATE |
| 9. DECISION ITEM N | NUMBER                            |  |                       |                        |            |  |           |            |
| MEDX-              | MEDX-3                            |  |                       |                        |            |  |           |            |
|                    |                                   |  |                       |                        |            |  |           |            |
|                    | PTION (for budget documentn       | nay not exceed 470 characters)             |                       |                        |            |  |           |            |
| Estimated increas  | se in paid cremation permits.     |  |                       |                        |            |  |           |            |
|                    |                                   |  |                       |                        |            |  |           |            |
|                    |                                   |  |                       |                        |            |  |           |            |
|                    |                                   |  |                       |                        |            | TOTAL REQUESTED FTE CHANG              | E 0.000   |            |
|                    |                                   |  |                       |                        |            |  | - 0.000   | 1          |
| 11. (a) EXPLANATIO | ON/JUSTIFICATION (please be s     | pecific)                                   |                       |                        |            | 12. OPERATING EXPENSES                 | / REVENU  | E SUMMARY  |
| Overall increase   | of an estimated 250 paid crematic | on permits, as cremation continues to be a | more popular choice f | or final disposition n | ationwide. |  |           |            |
|                    |                                   |  |                       |                        |            | REQUESTED EXPENDITURES                 |           |            |
|                    |                                   |  |                       |                        |            | PERSONNEL COSTS                        |           | \$0        |
|                    |                                   |  |                       |                        |            | OPERATING EXPENSE                      |           | \$0        |
|                    |                                   |  |                       |                        |            |  | 0.5       |            |
|                    |                                   |  |                       |                        |            | CONTRACTUAL EXPEN                      | SE        | \$0        |
|                    |                                   |  |                       |                        |            | OPERATING OUTLAY                       |           | \$0        |
|                    |                                   |  |                       |                        |            | TOTAL EXPENS                           | E         | \$0        |
|                    |                                   |  |                       |                        |            | RELATED REVENUES                       |           |            |
|                    |                                   |  |                       |                        |            | TAXES                                  |           | \$0        |
| (h) What are the   | e consequences of not funding     | this request?                              |                       |                        |            | INTERGOVERNMENTAL                      | . REVENUE | \$0        |
| Revenue will be u  | · -                               | uno request:                               |                       |                        |            | LICENSES & PERMITS                     |           | \$0        |
|                    |                                   |  |                       |                        |            | FINES, FORFEITS & PE                   | NALTIES   | \$0        |
|                    |                                   |  |                       |                        |            | PUBLIC CHARGES FOR                     | SERVICES  | \$86,500   |
|                    |                                   |  |                       |                        |            | INTERGOVERNMENTAL<br>CHARGE FOR SERVIC |           | \$0        |
| (c) What saving    | s/productivity improvements w     | ill result from approval of this request?  |                       |                        |            | MISCELLANEOUS                          |           | \$0        |
|                    |                                   |  |                       |                        |            | OTHER FINANCING SO                     | JRCES     | \$0        |
|                    |                                   |  |                       |                        |            | TOTAL REVENU                           | E         | \$86,500   |
|                    |                                   |  |                       |                        |            | NET COST TO C                          | OUNTY     | (\$86,500) |
|                    |                                   |  |                       |                        |            |  |           |            |

| 1. DEPARTMENT                            | Medical Examiner                  | 3. DEPT. NO  | ).       | 3      | 36                     |                |              |        | 5. FUND NAME                          | General I      | und        |
|--|-----------------------------------|--|----------|--------|------------------------|----------------|--------------|--------|---------------------------------------|----------------|------------|
| 2. PROGRAM                               | Medical Examiner                  | 4. PROGRA  | M NO.    | (      | 000/00                 |                |              |        | 6. FUND NO.                           | 1110           |            |
| 7. DECISION ITEM                         | TITLE                             |  |          |        |                        |                |              |        | 8. BUDGETED POSITION CHANG            | ES             |            |
|  | e in Cremation Permit Fee         |  |          |        |                        | POSITIO        | N#           |        | TITLE                                 | # FTE          | START DATE |
| 9. DECISION ITEM                         |                                   |  |          |        |                        |                |              |        |                                       |                |            |
| MEDX-                                    | MEDX-4                            |  |          |        |                        |                |              |        |                                       |                |            |
| 10 SHOPT DESCR                           | IDTION (for budget decument       | may not exceed 470 characters)   |          |        |                        |                |              |        |                                       |                |            |
|  |                                   | based on Wisconsin State Statute 59  | 9.365    |        |                        |                |              |        |                                       |                |            |
|  | •                                 |  |          |        |                        |                |              |        |                                       |                |            |
|  |                                   |  |          |        |                        |                |              |        |                                       |                |            |
|  |                                   |  |          |        |                        |                |              |        |                                       |                |            |
|  |                                   |  |          |        |                        |                |              |        | TOTAL REQUESTED FTE CHANG             | <b>E</b> 0.000 |            |
|  |                                   |  |          |        |                        |                |              |        |                                       |                |            |
|  | ON/JUSTIFICATION (please be       |  |          | ,      | <b></b>                | <b>-</b>       |              |        | 12. OPERATING EXPENSES                | S / REVENU     | E SUMMARY  |
| the increase or d<br>\$20.92. The depart | ecrease in the consumer price i   | mits the amount a County can increa<br>index (CPI) for the previous year. In 2<br>fee to a whole dollar amount of \$20.0 | .024, th | he all | lowable increase in th | e cremation pe | ermit fee wi | ill be |                                       |                |            |
| permit increases                         | that are not taken in the year ti | ley are possible.  |          |        |                        |                |              |        | PERSONNEL COSTS                       |                | \$0        |
|  |                                   |  |          |        |                        |                |              |        | OPERATING EXPENSE                     |                | \$0        |
|  |                                   |  |          |        |                        |                |              |        | CONTRACTUAL EXPEN                     | ISE            | \$0        |
|  |                                   |  |          |        |                        |                |              |        | OPERATING OUTLAY                      |                | \$0        |
|  |                                   |  |          |        |                        |                |              |        | TOTAL EXPENS                          | E              | \$0        |
|  |                                   |  |          |        |                        |                |              |        | RELATED REVENUES                      |                |            |
|  |                                   |  |          |        |                        |                |              |        | TAXES                                 |                | \$0        |
| (b) What are th                          | e consequences of not fundir      | ng this request?   |          |        |                        |                |              |        | INTERGOVERNMENTA                      | L REVENUE      | \$0        |
| Losing the allowa                        | able increase in cremation perm   | it revenue according to Wisconsin S  | tate Sta | atue : | 59.365.                |                |              |        | LICENSES & PERMITS                    |                | \$0        |
|  |                                   |  |          |        |                        |                |              |        | FINES, FORFEITS & PE                  | NALTIES        | \$0        |
|  |                                   |  |          |        |                        |                |              |        | PUBLIC CHARGES FOR                    | R SERVICES     | \$65,200   |
|  |                                   |  |          |        |                        |                |              |        | INTERGOVERNMENTA<br>CHARGE FOR SERVIO |                | \$0        |
| (c) What saving                          | gs/productivity improvements      | will result from approval of this re   | quest    | ?      |                        |                |              |        | MISCELLANEOUS                         |                | \$0        |
|  |                                   |  |          |        |                        |                |              |        | OTHER FINANCING SO                    | URCES          | \$0        |
|  |                                   |  |          |        |                        |                |              |        | TOTAL REVENU                          | ΙE             | \$65,200   |
|  |                                   |  |          |        |                        |                |              |        | NET COST TO C                         | OUNTY          | (\$65,200) |
|  |                                   |  |          |        |                        |                |              |        |                                       |                |            |

| 1. DEPARTMENT      | Medical Examiner  | 3. DEPT. NO.                               | 36                    |           |         | 5. FUND NAME                            | General F | und        |
|--------------------|---|--|-----------------------|-----------|---------|---|-----------|------------|
| 2. PROGRAM         | Medical Examiner  | 4. PROGRAM NO.                             | 000/00                |           |         | 6. FUND NO.                             | 1110      |            |
| 7. DECISION ITEM   | TITLE .   |  |                       |           | 8. BUDG | SETED POSITION CHANGE                   | s         |            |
| Adjustn            | nents to Rock County Intergoverni   | mental Agreements (IGA)                    |                       | POSITION# |         | TITLE                                   | # FTE     | START DATE |
| 9. DECISION ITEM I |   |  |                       |           |         |   |           |            |
| MEDX-              | MEDX-5  |  |                       |           |         |   |           |            |
| 10. SHORT DESCRI   | PTION (for budget documentn   | nay not exceed 470 characters)             |                       |           |         |   |           |            |
|                    | ts reflect changes in revenue from  |  |                       |           |         |   |           |            |
|                    |   |  |                       |           |         |   |           |            |
|                    |   |  |                       |           |         |   |           |            |
|                    |   |  |                       |           |         |   |           |            |
|                    |   |  |                       |           | TOTAL I | REQUESTED FTE CHANGE                    | 0.000     |            |
| 11 (a) EVDI ANATIO | ON/ ILICTIFICATION (places be a   | nosifia                                    |                       |           | 42      | ODEDATING EVDENCES                      | / DEVENUE | CUMMADY    |
|                    | ON/JUSTIFICATION (please be some stooth street street)  stoother revenue from 2023-2024 | Rock County IGA (i.e., physician and admir | nistrative salaries). |           | 12      | . OPERATING EXPENSES                    | / KEVENUI | SUMMARY    |
|                    |   | , , ,                                      | ,                     |           | PEOU    | ESTED EXPENDITURES                      |           |            |
|                    |   |  |                       |           | REQUI   | ESTED EXPENDITURES                      |           |            |
|                    |   |  |                       |           |         | PERSONNEL COSTS                         |           | \$0        |
|                    |   |  |                       |           |         | OPERATING EXPENSE                       |           | \$0        |
|                    |   |  |                       |           |         | CONTRACTUAL EXPENS                      | SE        | \$0        |
|                    |   |  |                       |           |         | OPERATING OUTLAY                        |           | \$0        |
|                    |   |  |                       |           |         | TOTAL EXPENSE                           | =         | \$0        |
|                    |   |  |                       |           |         |   | -         | <b>Q</b>   |
|                    |   |  |                       |           | RELAT   | ED REVENUES                             |           |            |
|                    |   |  |                       |           |         | TAXES                                   |           | \$0        |
| (b) What are the   | e consequences of not funding   | this request?                              |                       |           |         | INTERGOVERNMENTAL                       | REVENUE   | \$25,429   |
| Revenue will be u  | underestimated.   |  |                       |           |         | LICENSES & PERMITS                      |           | \$0        |
|                    |   |  |                       |           |         | FINES, FORFEITS & PEN                   | IALTIES   | \$0        |
|                    |   |  |                       |           |         | PUBLIC CHARGES FOR                      | SERVICES  | \$0        |
|                    |   |  |                       |           |         | INTERGOVERNMENTAL<br>CHARGE FOR SERVICE |           | \$0        |
| (c) What saving    | s/productivity improvements w   | ill result from approval of this request?  |                       |           |         | MISCELLANEOUS                           |           | \$0        |
|                    |   |  |                       |           |         | OTHER FINANCING SOL                     | JRCES     | \$0        |
|                    |   |  |                       |           |         | TOTAL REVENUE                           | Ē         | \$25,429   |
|                    |   |  |                       |           |         | NET COST TO CO                          | DUNTY     | (\$25,429) |
|                    |   |  |                       |           |         |   |           |            |

| DEPARTMENT: Medical Examiner                              |    |               |    |                          |     |                  |    | CAPITA                     | AL B | SUDGET SUN                    | /MA | RY            |    |                   |    |                               |                |
|---|----|---------------|----|--------------------------|-----|------------------|----|----------------------------|------|-------------------------------|-----|---------------|----|-------------------|----|-------------------------------|----------------|
| DIVISION: Capital Projects  PROGRAM SUMMARY               | A  | 2022<br>CTUAL |    | DOPTED<br>BUDGET<br>2023 | CAF | 2022<br>RRYFORWD |    | 2023<br>O BOARD<br>ACTIONS | N    | CURRENT<br>MODIFIED<br>BUDGET | ,   | ACTUAL<br>YTD | ES | STIMATED<br>TOTAL |    | TOTAL<br>STIMATED<br>RRYFORWD | AGENCY<br>BASE |
| CAPITAL EXPENDITURES - BORROW CAPITAL EXPENDITURES - LEVY | \$ | 290,760<br>0  | \$ | 628,000<br>0             | \$  | 349,594<br>0     | \$ | 0                          | \$   | 977,594<br>0                  | \$  | 17,600<br>0   | \$ | 0                 | \$ | 936,393<br>0                  | \$ 0           |
| TOTAL CAPITAL EXPENDITURES:                               | \$ | 290,760       | \$ | 628,000                  | \$  | 349,594          | \$ | 0                          | \$   | 977,594                       | \$  | 17,600        | \$ | 0                 | \$ | 936,393                       | \$ 0           |
| LESS REVENUES TAXES                                       | \$ | 0             | ¢  | 0                        | \$  | 0                | \$ | 0                          | \$   | 0                             | \$  | 0             | \$ | 0                 | \$ | 0                             | \$ 0           |
| INTERGOVERNMENTAL REVENUE                                 | φ  | 0             | φ  | 0                        | φ   | 0                | φ  | 0                          | φ    | 0                             | φ   | 0             | φ  | 0                 | φ  | 0                             | ψ 0<br>0       |
| LICENSES & PERMITS  |    | 0             |    | 0                        |     | 0                |    | 0                          |      | 0                             |     | 0             |    | 0                 |    | 0                             | 0              |
| FINES, FORFEITS & PENALTIES                               |    | Ö             |    | 0                        |     | 0                |    | 0                          |      | 0                             |     | 0             |    | 0                 |    | 0                             | 0              |
| PUBLIC CHARGE FOR SERVICE                                 |    | 0             |    | 0                        |     | 0                |    | 0                          |      | 0                             |     | 0             |    | 0                 |    | 0                             | 0              |
| MISCELLANEOUS   |    | 245,200       |    | 628,000                  |     | 251,300          |    | 0                          |      | 879,300                       |     | 0             |    | 879,300           |    | 879,300                       | 0              |
| OTHER FINANCING SOURCES                                   |    | 0             |    | 0                        |     | 0                |    | 0                          |      | 0                             |     | 0             |    | 0                 |    | 0                             | 0              |
| TOTAL PROGRAM REVENUES                                    | \$ | 245,200       | \$ | 628,000                  | \$  | 251,300          | \$ | 0                          | \$   | 879,300                       | \$  | 0             | \$ | 879,300           | \$ | 879,300                       |                |
| NET COST (BORROWING & LEVY):                              | \$ | 45,560        | \$ | 0                        | \$  | 98,294           | \$ | 0                          | \$   | 98,294                        | \$  | 17,600        | \$ | (879,300)         | \$ | 57,093                        | \$ 0           |

|  |                   |   | DEPARTMENTAL CHANGES |                       |    |                        |    |                        |    |                        |    |                        |    |                        |                        |                    |
|--|-------------------|---|----------------------|-----------------------|----|------------------------|----|------------------------|----|------------------------|----|------------------------|----|------------------------|------------------------|--------------------|
| PROGRAM SUMMARY  | GRAM SUMMARY BASE |   |                      | ECISION<br>ITEM<br>#1 | [  | DECISION<br>ITEM<br>#2 |    | DECISION<br>ITEM<br>#3 |    | DECISION<br>ITEM<br>#4 | [  | DECISION<br>ITEM<br>#5 | [  | DECISION<br>ITEM<br>#6 | DECISION<br>ITEM<br>#7 | AGENCY<br>REQUEST  |
| CAPITAL EXPENDITURES - BORROW<br>CAPITAL EXPENDITURES - LEVY | \$                | 0 | \$                   | 150,000<br>0          | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0<br>0                 | \$ | 0                      | \$<br>0                | \$<br>150,000<br>0 |
| TOTAL CAPITAL EXPENDITURES:                                  | \$                | 0 | \$                   | 150,000               | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$<br>0                | \$<br>150,000      |
| LESS REVENUES  |                   |   |                      |                       |    |                        |    |                        |    |                        |    |                        |    |                        |                        |                    |
| TAXES  | \$                | 0 | \$                   | 0                     | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$<br>0                | \$<br>0            |
| INTERGOVERNMENTAL REVENUE                                    |                   | 0 |                      | 0                     |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 0                  |
| LICENSES & PERMITS   |                   | 0 |                      | 0                     |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 0                  |
| FINES, FORFEITS & PENALTIES                                  |                   | 0 |                      | 0                     |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 0                  |
| PUBLIC CHARGE FOR SERVICE                                    |                   | 0 |                      | 0                     |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 0                  |
| MISCELLANEOUS  |                   | 0 |                      | 150,000               |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 150,000            |
| OTHER FINANCING SOURCES                                      |                   | 0 |                      | 0                     |    | 0                      |    | 0                      |    | 0                      |    | 0                      |    | 0                      | 0                      | 0                  |
| TOTAL PROGRAM REVENUES                                       | \$                |   | \$                   | 150,000               | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$<br>0                | 150,000            |
| NET COST (BORROWING & LEVY):                                 | \$                | 0 | \$                   | 0                     | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$ | 0                      | \$<br>0                | \$<br>0            |

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|             |        |                              | C<br>A |              |                   |              |                      |                     |                        |                           |                    |        |
|-------------|--------|------------------------------|--------|--------------|-------------------|--------------|----------------------|---------------------|------------------------|---------------------------|--------------------|--------|
|             |        |                              | P<br>B | 2022         | ADOPTED<br>BUDGET | 2022         | 2023<br>COUNTY BOARD | CURRENT<br>MODIFIED | ACTUAL<br>EXPENDITURES | ESTIMATED<br>EXPENDITURES | TOTAL<br>ESTIMATED | AGENCY |
| YR ORG CODE | OBJECT | DESCRIPTION                  | D      | EXPENDITURES | 2023              | CARRYFORWARI | ACTIONS              | BUDGET              | YTD                    | TOTAL                     | CARRYFORWARD       | BASE   |
| 24 CPMEDEXM | 51497  | TABLETS                      | С      | \$0          | \$0               | \$50,900     | \$0                  | \$50,900            | \$0                    | \$0                       | \$50,900           | \$0    |
| 24 CPMEDEXM | 52110  | CT AREA REMODEL              | С      | \$30,000     | \$550,000         | \$30,000     | \$0                  | \$580,000           | \$12,000               | \$0                       | \$550,000          | \$0    |
| 24 CPMEDEXM | 57734  | LAPTOPS AND DOCKING STATIONS | С      | \$0          | \$0               | \$17,333     | \$0                  | \$17,333            | \$0                    | \$0                       | \$17,333           | \$0    |
| 24 CPMEDEXM | 58155  | RADIO EQUIPMENT REPLACEMENT  | С      | \$0          | \$0               | \$45,179     | \$0                  | \$45,179            | \$0                    | \$0                       | \$45,179           | \$0    |
| 24 CPMEDEXM | 58925  | VEHICLES & EQUIPMENT         | С      | \$260,760    | \$78,000          | \$206,182    | \$0                  | \$284,182           | \$5,600                | \$0                       | \$272,981          | \$0    |
|             |        | TOTAL EXPENDITURES           | S      | \$290,760    | \$628,000         | \$349,594    | \$0                  | \$977,594           | \$17,600               | \$0                       | \$936,393          | \$0    |

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|             |        |                              | С           |        | DEPARTMENTAL CHANGES |                  |                  |                  |                  |                  |                  |           |  |  |
|-------------|--------|------------------------------|-------------|--------|----------------------|------------------|------------------|------------------|------------------|------------------|------------------|-----------|--|--|
|             |        |                              | A<br>P<br>B | AGENCY | DECISION<br>ITEM     | DECISION<br>ITEM | DECISION<br>ITEM | DECISION<br>ITEM | DECISION<br>ITEM | DECISION<br>ITEM | DECISION<br>ITEM | AGENCY    |  |  |
| YR ORG CODE | OBJECT | DESCRIPTION                  | D           | BASE   | #1                   | #2               | #3               | #4               | #5               | #6               | #7               | REQUEST   |  |  |
| 24 CPMEDEXM | 51497  | TABLETS                      | С           | \$0    |                      |                  |                  |                  |                  |                  |                  | \$0       |  |  |
| 24 CPMEDEXM | 52110  | CT AREA REMODEL              | С           | \$0    | \$150,000            |                  |                  |                  |                  |                  |                  | \$150,000 |  |  |
| 24 CPMEDEXM | 57734  | LAPTOPS AND DOCKING STATIONS | С           | \$0    |                      |                  |                  |                  |                  |                  |                  | \$0       |  |  |
| 24 CPMEDEXM | 58155  | RADIO EQUIPMENT REPLACEMENT  | С           | \$0    |                      |                  |                  |                  |                  |                  |                  | \$0       |  |  |
| 24 CPMEDEXM | 58925  | VEHICLES & EQUIPMENT         | С           | \$0    |                      |                  |                  |                  |                  |                  |                  | \$0       |  |  |
|             |        | TOTAL EXPENDITURES           | S           | \$0    | \$150,000            | \$0              | \$0              | \$0              | \$0              | \$0              | \$0              | \$150,000 |  |  |

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|                    |                    | С |           |           |              |              |           |          |                  |              |        |
|--------------------|--------------------|---|-----------|-----------|--------------|--------------|-----------|----------|------------------|--------------|--------|
|                    |                    | Α |           |           |              |              |           |          |                  |              |        |
|                    |                    | Ρ |           | ADOPTED   |              | 2023         | CURRENT   | ACTUAL   | <b>ESTIMATED</b> | TOTAL        |        |
|                    |                    | В | 2022      | BUDGET    | 2022         | COUNTY BOARD | MODIFIED  | REVENUES | REVENUES         | ESTIMATED    | AGENCY |
| YR ORG CODE OBJECT | DESCRIPTION        | D | REVENUES  | 2023      | CARRYFORWARD | ACTIONS      | BUDGET    | YTD      | TOTAL            | CARRYFORWARD | BASE   |
| 24 CPMEDEXM 84974  | BORROWING PROCEEDS | С | \$245,200 | \$628,000 | \$251,300    | \$0          | \$879,300 | \$0      | \$879,300        | \$879,300    | \$0    |
|                    | TOTAL REVENUES     | ; | \$245,200 | \$628,000 | \$251,300    | \$0          | \$879,300 | \$0      | \$879,300        | \$879,300    | \$0    |

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|                    | C                    |        | DEPARTMENTAL CHANGES |          |          |          |          |          |          |           |
|--------------------|----------------------|--------|----------------------|----------|----------|----------|----------|----------|----------|-----------|
|                    | Α                    |        |                      |          |          |          |          |          |          |           |
|                    | P                    |        | DECISION             | DECISION | DECISION | DECISION | DECISION | DECISION | DECISION |           |
|                    | В                    | AGENCY | ITEM                 | ITEM     | ITEM     | ITEM     | ITEM     | ITEM     | ITEM     | AGENCY    |
| YR ORG CODE OBJECT | DESCRIPTION D        | BASE   | #1                   | #2       | #3       | #4       | #5       | #6       | #7       | REQUEST   |
| 24 CPMEDEXM 84974  | BORROWING PROCEEDS C | \$0    | \$150,000            |          |          |          |          |          |          | \$150,000 |
|                    | TOTAL REVENUES \$0   |        | \$150,000            | \$0      | \$0      | \$0      | \$0      | \$0      | \$0      | \$150,000 |

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### **BUDGET CARRYFORWARD REQUEST**

**DEPT:** MEDICAL EXAMINER **PROG:** CAPITAL PROJECTS

|          |        |        |                              | EXPEND   | DITURES   | REVENUES           |          |         |               |                                    |
|----------|--------|--------|------------------------------|----------|-----------|--------------------|----------|---------|---------------|------------------------------------|
|          | EXP    | REV    |                              | MODIFIED | ESTIMATED | MODIFIED ESTIMATED |          |         |               |                                    |
| ORG      | OBJECT | SOURCE | DESCRIPTION                  | BUDGET   | CARRYFWD  | BUDGET             | CARRYFWD | TYPE    | AUTHORIZATION | JUSTIFICATION/COMMENTS             |
| CPMEDEXM | 51497  |        | TABLETS                      | 50,900   | 50,900    |                    |          | CAPITAL | BUDGET        | Project may not be complete in CY. |
| CPMEDEXM | 52110  |        | CT AREA REMODEL              | 550,000  | 550,000   |                    |          | CAPITAL | BUDGET        | Project may not be complete in CY. |
| CPMEDEXM | 57734  |        | LAPTOPS AND DOCKING STATIONS | 17,333   | 17,333    |                    |          | CAPITAL | BUDGET        | Project may not be complete in CY. |
| CPMEDEXM | 58155  |        | RADIO EQUIPMENT REPLACEMENT  | 45,179   | 45,179    |                    |          | CAPITAL | BUDGET        | Project may not be complete in CY. |
| CPMEDEXM | 58925  |        | VEHICLES & EQUIPMENT         | 272,981  | 272,981   |                    |          | CAPITAL | BUDGET        | Project may not be complete in CY. |
| CPMEDEXM |        | 84974  | BORROWING PROCEEDS           |          |           | 879,300            | 879,300  | CAPITAL | BUDGET        | Project may not be complete in CY. |
|          |        |        |                              | 936,393  | 936,393   | 879,300            | 879,300  |         |               |                                    |



Year: 2024 Fund: CAPITAL PROJECTS FUND

Org: CPMEDEXM Agency: MEDICAL EXAMINER

STATE

OTHER

MUNICIPAL

TOTAL FUNDING SOURCES

0

0

0

150,000

550,000 \$

| PROJECT TITLE  | PROJECT COST COMPONENTS (budget year)                            |            |    |         |  |  |  |
|--|--|------------|----|---------|--|--|--|
| Computed tomography (CT) Area Remodel  |  |            |    |         |  |  |  |
| PROJECT DESCRIPTION / JUSTIFICATION / LOCATION   | Quantity and/or descriptive information  CT Remodel construction |            | \$ | 150,000 |  |  |  |
| In the 2022 budget, funds were approved for the architectural and engineering fees to develop plans for an expansion of the x-ray suite, which had been planned for in the original design of the building. This also require the addition of a storage area inside the building. The expansion of the x-ray suite will significantly reduce the personal protective equipment (PPE) storage area. The purpose of this project is to reduce the likelihood of damage to the CT unit by traversing unleveled floors in the autopsy suite. It will also reduce staff time, as two staff members are required to move the unit from where it is parked to where it is used. The unit has very low thresholds for an operational surface. In 2023, the department received funds for the completion of this project. Expected start date for this project is November 2023; however, the department of public works recommended an additional \$150,000 for the project to account for increasing cost of building materials and construction. |  |            |    |         |  |  |  |
|  |  | TOTAL      |    | 150,000 |  |  |  |
|  | NON-DEBT REVENUE SOURCE (Type/Object/Description/2024 Amount)    |            |    |         |  |  |  |
|  | N NONE   |            | \$ | 0       |  |  |  |
|  | PROJECT FINANCIAL SUMMARY  | 2023       |    | 2024    |  |  |  |
|  | TOTAL EXPENDITURES   | \$ 550,000 | \$ | 150,000 |  |  |  |
|  | PROJECT FUNDING SOURCES  DEBT                                    | \$ 550,000 | \$ | 150,000 |  |  |  |
|  | FEDERAL  | 0          |    | 0       |  |  |  |