Tuesday, July 11, 2017 8:30 a.m.

## **HUMAN SERVICES BOARD**

Door County Government Center Chambers Room, 1st floor 421 Nebraska Street, Sturgeon Bay, WI

Oversight Board for the Department of Human Services

#### **AGENDA**

### **PUBLIC HEARING**

- 1. Call Public Hearing to Order at 8:30am
- 2. Introductions
- 3. Ground Rules for Public Hearing
- 4. Public Comments
- 5. Adjourn the Public Hearing

#### **HUMAN SERVICES BOARD MEETING**

- 1. Call Meeting or Order
- 2. Roll Call-Establishing Quorum
- 3. Adopt Agenda
- 4. Approve Minutes June 13, 2017 Human Services Board Meeting
- 5. Correspondence
- 6. Public Comment
- 7. Discussion of Public Participation Meeting
- 8. Program Reports
  - a. Written Collective Unit Report
  - b. 2nd Quarter Written Statistical Program Report
- 9. Continuing /Pending Business
  - a. Resource Center Building Update
  - b. Staff Recruitment Updates
  - c. Vouchers
- 10. Topics To Be Referred to the Legislative Committee
- 11. New Business
  - a. Review Lincoln County Resolution and Recommendation
  - b. Hunger Outreach
  - c. Resignation Erin Szakala
  - d. Request to Refill Adult Case Manager Position
  - e. Request to Refill Assistant ADRC Director Position
  - f. Wisconsin County Human Services Association (WCHSA) Update
  - g. FYI Completion of Introductory Periods Kirsten Foss
- 12. Matters to be Placed on a Future Agenda or Referred to a Committee, Official or Employee
- 13. Set Next Meeting Date Tuesday, August 8, 2017
- 14. Meeting Per Diem Code
- 15. Adjourn Meeting

#### DOOR COUNTY HUMAN SERVICES BOARD MINUTES

Tuesday, June 13, 2017

These minutes have not been reviewed by the oversight board and are subject to approval or revision at the next regular meeting.

#### 1. Call to Order-

Chair Mark Moeller called the June 13, 2017 meeting of the Door County Human Services Board to order at 9:30am in the Government Center's Chambers Room.

#### 2. Roll Call / Establishing a Quorum-

<u>Present</u>: Chair Mark Moeller, Helen Bacon, Roy Englebert, Wayne Kudick, Megan Lundahl, Joe Miller and Laura Vlies Wotachek.

Excused: Tom Leist and Robert Rau

<u>Staff Present</u>: Joseph Krebsbach-Director; Cori MacFarlane-Deputy Director; Ken Pabich-County Administrator; JoAnn Bauman-Department Accountant from Finance; Tim Hendricks-Business Manager, Jake Erickson-Aging Program Manager, Cindy Zellner-Ehlers-Children's Services Manager, Margaret Buhk, Laura Hall, Danielle Nyman, Gloria Schneider, Naomi Spritka, and Kris Wagner-Maclean-Children's Services Team and Shawn Barlament—Office Manager/Recording Secretary.

Others Present: Jean and Darrel Severson

Board members present established a quorum.

#### Adopt Agenda-

A motion was made by Roy Englebert and seconded by Megan Lundahl to adopt the agenda. All were in favor.

#### 4. Approve Minutes-

Megan Lundahl motioned to approve minutes from the Public Participation Meeting and the regular Human Services Board meeting held on May 9, 2017. This was seconded by Laura Vlies Wotachek. All approved.

#### 5. Correspondence-

None

#### 6. Public Comment-

None

#### 7. Program Reports-

### a. Aging Program Verbal Report

Jake Erickson, Aging Program Director, shared info on programs and activities being offered at the center:

- Elder Nutrition Program that includes Meals on Wheels within the Sturgeon Bay limits, frozen
  meals beyond Sturgeon Bay and congregate meals at the center that support socialization
  beyond the nutritional value.
- Caregiver Support Program throughout the county in Forestville, Sister Bay and Sturgeon Bay.
- Health & Wellness programs that provide, exercise, strengthening, fall preventions, etc. Recently "Strong Women" was a several week program that was well attended. There have been conversations with the YMCA for offering additional programs.
- Many activities take place throughout the year for holidays, special occasions such as Mardi Gras and outside of the center that have included Brewer games.

Questions were asked about pinwheels displayed outside of the center representing the 247 Elder Abuse cases in 2016. The majority of cases are self-neglect situations then financial abuse and physical abuse.

#### 1. Consideration of Moving Forestville Meal Site to Brussels

Forestville demographics at the meal site have changed over the years and the majority of community members are now individuals below the age of 60 and families with young children. The number of participants at this meal site has diminished to under 8. After conversation with this group, all would be willing to consider traveling to a different location or participate in the frozen meal program. The Brussels Community Center may be able to offer access to other services besides the meal program. An example would be the Baileys Harbor meal site location that offers an exercise program before the noon meal.

## b. Written Collective Unit Report -

No inquiries were made about content.

#### 8. Continuing / Pending Business-

#### a. Resource Center Building Updates

 Renovation and construction continue to be on target. Photos of progress will be shared via email from Joe to the board.

#### b. Staff Recruitment Updates

- There will be follow-up interviews for the ADRC Director position this Thursday from the four conducted on Monday, June 5<sup>th</sup>.
- There have been no applicants for the Behavioral Health Therapist since it was posted.

#### c. Vouchers

No questions asked.

#### 9. Topics To Be Referred to the Legislative Committee-

None at this time.

#### 10. New Business-

# a. General Duties of Committees and Rules of Human Service Committee-Review/Revise and/or Reaffirm

This is a revised version from last month's meeting information.

#### b. Retirement Letter - Jay Livingston

FYI

#### c. Request to Refill Behavioral Health Manager Position

Roy Englebert moved to fill this position and any open positions that may be created by filling from an internal applicant. Megan Lundahl seconded the motion. The vote was unanimous.

#### d. Recognition of Jean Severson's Service

The department recognized Jean's years of service with a certificate and flowers. Cori MacFarlane shared "Core Values/Principles of Human Services Work" (attached to these minutes) that represents all that Jean has given to her clients and her position. Joe Krebsbach shared Jean's level of creativity to get the job done. Jean never doubted that there was a solution. Cindy asked that Joe read a plaque created especially for Jean that represents what Jean stood for throughout her years of service with the county. Many of Jean's work teammates were in attendance. Introductions were made and comments shared on Jean's dedication and the rewards of working with her.

#### e. Structural Changes in Personal Care ( PC) Program

The state has taken a managed care approach for this program. A third party will conduct the initial and the 6 month follow-up assessments rather than our nurse and medical assistance will pay for care rather than tax levy funds.

#### f. Out-Sourcing Crisis Services

In 2018 the department is considering contracting for this 24/7 service. On June 1<sup>st</sup>, we began using our contracted crisis phone service to assist with triage before a Behavioral Health Program or Community Service Program (CSP) team member is called as part of crisis call rotation. Other counties have

contracted for this service in an effort to assist with attracting applicants to these particular positions and to help with work/life balance for current employees.

#### g. Lincoln Hills Update

In early 2016 there were abuse allegations at this facility. As a result there where turnovers in administrative personnel, additional staff hired with all participating in further training. Our county has used Lincoln Hills 2 times in the past 25 years. It is the last resort for the most grievous offenses. When our youth clients are placed there, case managers, the youth and our social worker all participate in regularly scheduled care meetings. Our staff have regular contract with the youth placed there to monitor for concerns.

#### h. Local Impact on the Potential Federal Government Changes for Veterans

These changes would not have much impact on our department and our service offerings

#### i. Year to Date Budget Update

j. 2017 1st Quarter Fiscal Update

Both New Business items i. & j. covered the same topic.

- More significant information will likely be shared with the 2nd and 3<sup>rd</sup> quarter comparisons rather than this 1<sup>st</sup> quarter. Inpatient costs are at 75% of the annual \$400,000 budget due to 3 longterm hospitalizations.
- The ADRC/Senior Resource Center budget has a \$15,000 shortfall with transportation grant funding and our transportation reserve fund. In 2018, there will no longer be a reserve for operating expenses.

#### j. Discussion on the Building Name/Signage for 916 North 14th Avenue

Ken Pabich brought concerns from the Property Committee on naming the building only the "ADRC". Joe was asked to bring back name options to the next meeting. This committee will then make a recommendation that Joe can offer to the Property Committee.

#### k. Aging & Disability Resource Center (ADRC) Fundraising Considerations

Consideration is being given to partnering with the Door County Community Foundation to manage possible donations and needs/wants of this program and building.

#### 11. Matters to Be Placed on a Future Agenda or Referred to a Committee, Official or Employee-

Other suggestions are welcome prior to the next meeting. Please notify the Chair of this Committee or the Director of the Human Services Department.

#### 12. Next Meeting Date:

The next regular meeting will be held Tuesday, July 11, 2017 immediately after the Public Participation Meeting scheduled for 8:30am in the Chambers Room of the Government Center, 421 Nebraska Street, Sturgeon Bay.

#### 13. Meeting Per Diem Code

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#### 14. Adjournment:

Joe Miller motioned and Laura Vlies Wotachek seconded to adjourn the meeting. The motion carried. The meeting adjourned at 11:34pm.

Respectfully submitted,

Shawn M. Barlament, Recording Secretary

## Core Values / Principles of Human Services Work

(Adapted from the Wisconsin Collaborative Systems of Care website, *CST Handbook (2014 update)* by White Pines Consulting,Inc. www.mwwb.net, and *Practice Guidelines: Core Elements for Responding to Mental Health Crisis*, Rockville, MD: Center for Mental Health Services, SAMHSA, 2009 for use by the Behavioral Health Training Partnership trainings)

- **Person Centered/Consumer Driven** -Consumer needs and goals are the central focus of treatment. The consumer is actively involved and takes ownership in all aspects of planning, which is empowering and increases the likelihood of success.
- **Strength-Based / Recovery-Focused** -Belief in growth and recovery and identification of consumer/family strengths that support strategies to meet their needs.
- Collaboration Across Systems-A cooperative process of providers working with consumer/families, where there is understanding of each other and a commitment and willingness to work together.
- **Team Approach** Team member (including consumer/families) strengths and skills are used to develop a plan that leads to success and positive outcomes for consumers/families.
- Builds on Natural Supports-In addition to formal supports, consumers/families identify their natural supports in the community and these resources are utilized creatively and flexibly, empowering them to develop a network of community supports.
- **Ensuring Safety**—When protective services are involved or when a consumer presents at risk to harm self or others, the plan involves keeping the person safe through least restrictive means possible while also protecting the community through good supervision and monitoring.
- **Culturally Responsive** Understanding of the issues specific to gender, age, ethnicity, disability and sexual orientation and making adjustments to address these unique circumstances.
- **Healthy Interdependence** -Developing resiliency so that consumers/families rely on others only to the extent necessary to learn and maintain new skills and behaviors.
- **Unconditional Care**-A commitment on the part of the system to be there when needed, and care is not dependent upon what the consumer/family does or does not do.
- Trauma Informed Approach -Understanding that past trauma has an impact on how the world is perceived, both as consumers and providers, and approaching each other in a manner that does not re-traumatize or compound the trauma.
- Outcome Oriented— Goals are identified, agreed upon and understood by all team members including identification of roles and responsibilities of each member of the team. Progress is monitored and success defined by all team members

## Human Services Board Written Agency Updates – July 2017

## I. Program Changes and Highlights

**A.** Through State grant funds and in partnership with Team Leadership Center, the **Child Protection/Juvenile Justice** team was once again able to provide a unique programming opportunity for youth. Funds are earmarked for interventions for juveniles at risk of offending and serious juvenile offenders. The program was developed to include both cognitive and physical endurance activities. Through the multi-faceted programming, the goals are to build leadership skills, self-esteem, respect and trust, positive peer relations, emotional regulation, conflict resolution, and physical agility. This programming occurs over multiple days with a recognition ceremony for participants in which family members, court officials, and school personnel are invited.

We currently have 14 voluntary Kinship cases. Kinship Care provides financial support for caregivers providing care for a relative child residing with them. We have 10 children placed in foster care and five placed in court ordered kinship care with a relative. One juvenile continues placement at Lincoln Hills.

- **B.** The **Community Support Program** staff treated 27 consumers to a guided tour of Lambeau Field and lunch at Golden Coral, followed by a visit to the new Packer Hall of Fame on June 22. After the group returned to Sturgeon Bay several of the CSP consumers called to report how much they enjoyed the interactive exhibits and to say thank you for the day trip.
- **C.** The **Economic Support Division** sent an informational mailing to 1044 Food Share households in June with information about the added Food Share dollars available when using Farmer's Markets. This is a collaborative effort between Door County Human Services, Sturgeon Bay Parks Department, and Door County Memorial Hospital.
- **D.** On Friday, June 23rd the **Aging and Disability Resource Center**, in partnership with Christine Anderson and the Washington Island Community Health Program (WICHP), held an Open House for residents on Washington Island to learn more about the programs and services we have to offer. The event went really well with roughly 40 individuals stopping by to learn more about what we do.
  - The Senior Farmer's Market Nutrition Program (SFMNP) is back! SFMNP vouchers offer our older adults an opportunity to purchase fresh, locally grown fruits and vegetables from local certified farmers. The SFMNP vouchers can be obtained from June 1st until October 31st. In addition to offering vouchers, every Thursday from 11am-1pm we have Charley Burdeau setting up his own farm stand.
- **E.** We are in need of **Meals on Wheels** (MOWs) volunteers. Please help us in our recruitment efforts. MOWs volunteers touch the lives of older adults with their time and service. They make a profound difference in our participants' lives by brightening their day, showing them that people care, and helping them feel in touch. Volunteers are essential in providing care and compassion to older

adults in need of nutrition assistance. With the help of dedicated volunteers, the Aging and Disability Resource Center of Door County is able to serve the many older adults in need of meal assistance throughout Door County. Our Meals on Wheels volunteers contribute primarily in the delivery of a hot or frozen meal. Volunteer drivers are greatly needed.

As a MOWs volunteer, you:

- Help older adults maintain an independent lifestyle;
- Brighten the days of isolated and lonely older adults;
- · Work directly with your community;
- Develop friendships with older adults and other kindhearted volunteers;
- Fulfill community service or internship hours for school; and to
- Make a difference, have fun, and be inspired!

If you are interested in volunteering or know someone who might be interested, please contact the Aging and Disability Resource Center of Door County at (920)746-2372 or email us at ADRC@co.door.wi.us.

- **F.** The focus of the **Birth to Three** early intervention program this month has been on review of our practices around parental cost share and updating some of our forms associated with this requirement and practice within the program. We've had a number of children transitioning and planning for their school early childhood program enrollment. Summer is a very busy time for families, so staff have been working diligently to schedule visits in accordance with family availability.
- **G.** In the other **Children and Families Support Services** programs (CST, CCS, CLTS and CCOP), new staff, Laura Hall and Danielle Nyman have been working really hard on their orientation to the various programs they will be involved with and the State required trainings which take over 40 hours of dedicated learning and testing. They've been successful in becoming officially certified in all aspects and are cleared for takeoff! Both will apprentice under another staff person, learning and shadowing what we believe to be best practice in service coordination. We are happy to have them here, and both are a great addition to the team! This team has seen a great deal of change over the last two months, and staff are to be commended for their tenacity and commitment to getting the tasks done that need to be done and rendering the work with a heart and spirit that emulates one more time Human Services mission and values.

Staff have been working with our Business Unit on the new guidelines and procedures associated with the Children's Community Options Program. This program, as shared in the past, is a rendition of the former Family Support Program, with some programmatic changes that require procedural changes and some revisions in the conversations we have with families on how to access support services. The team is continuing their work on standardizing forms and doing some file revisions that incorporate a self-audit process. We anticipate State program review in CLTS later this year.

As of July 1, 2017, Disability Determinations issued by the state Disability Determination Bureau are no longer required for children seeking entry into the Children's Long Term Support Waiver Program. This will streamline the eligibility determination process and reduce delays for families seeking supports to meet the needs of their children with disabilities. A disability determination will still be needed to access Katie Beckett Medicaid.

**H.** The **Behavioral Health** Program has witnessed a steady increase in crisis-related events this past month as the influx of summer residents continues. We have been working closely with our community partners, primarily law enforcement and medical facilities, in an attempt to coordinate access to the appropriate Behavioral Health services to those in need. This process has become

increasingly more difficult in recent years primarily due to changes in statutory requirements for hospitals and other treatment facilities, and the complexities inherent to our nation's ever-changing healthcare system.

## **II.** Noteworthy Events

- **A.** Come and visit the ADRC sometime in July for one or all of the following scheduled events:
  - Friday, July 7th at 12:45pm Alzheimer's Association presents: Understanding & Responding to Dementia
  - Tuesday, July 11th at 11:45am Brother Day Music
  - Thursday, July 13th from 11:30am-1:00pm Stroke Support Group facilitated by Christy W. from Door County Medical Center
  - Monday, July 17th Depart at 10am Day Trip to the Door County Historical Museum
  - Tuesday, July 18th at 12:45pm HELP of Door County presents Neglect and Financial Exploitation
  - Wednesday, July 19th at Noon Birch Creek Ambassadors Performance
  - Thursday, July 20th at 11am Music with Ken
  - Friday, July 21st at 12:45pm Learn About Amplified Phone Captel
  - Tuesday, July 25th at 12:45pm Public Health Nurses present: Starting the Conversation
  - Tuesday, July 25th at 1:45pm Ice Cream Social
  - Thursday, July 27th at 12:15pm Music with George
  - Friday, July 28th at 11:30am Tasty Tidbits: "Fruits" w/Dietician Carmen Schroeder
  - Friday, July 28th from 1-2:30pm Low Vision Support Group
  - "Ask the Athletic Trainer" is offered Thursday, July 13th & 27th from 1-2pm in the exercise room. Please call the front desk at 746-2372 for an appointment.

## III. High-Cost Placements & Other Fiscal Updates

**A.** The Wisconsin Department of Children and Families is making a change to the eWiSACWIS system in July that will prevent referrals from going over to the child support agency automatically as they do now for out of home care cases during the first 6 months a child is placed in foster care or another out of home setting. We budgeted \$43,000 in child support revenue for this year, so this change is likely to have a significant impact on our budget. The reason for the change is that research has shown that not charging parents child support during those early months, and keeping more financial resources in the home, can have an impact on returning children home more quickly to a more stable living situation.

## **IV.** Training & Staff Development

- **A.** Human Services hosted a training event, along with other community partners, provided to us through Write On Door County. This organization brought in author Zoe Zolbrod. Ms. Zolbrod has written a memoir that recounts her experience of being abused as a young child by an older cousin. (See more info on her website: <a href="https://zoezolbrod.com/">https://zoezolbrod.com/</a>.) She leads workshops on writing about trauma as a form of healing and building resilience. The workshop was held on Fri., June 30 in the Government Center's Peninsula Room.
- **B.** On July 28, we are bringing Dr. Ron Diamond to Door County to training our Comprehensive Community Services (CCS) consortium staff and providers on Ethics and Boundaries. While licensed therapists and social workers receive regular training on this topic, the paraprofessional staff employed in the CCS program frequently do not have access to training on this important topic. We are excited about the opportunity to have this training tailored to the unique needs of the CCS program and staff, and to address some of the specific challenges we have encountered in our area.

**C.** One Economic Support worker completed the New Worker Training for Child Care in Sheboygan held from 5/30 - 6/1.

## V. Agency & Community Collaboration

- **A.** The Deputy Director and ADRC Information and Assistance Specialist Anna Zahorik participated in another planning session of the **Northern Door Aging Network** on June 26. The group continued work on a mission and vision statement, priority goals and action planning under the facilitation of Barb Larson-Herber, a consultant with the Behavioral Health Training Partnership based out of UWGB. The focus of the group is to foster connections among provider agencies and community members for the sharing of ideas and resources in order to provide a holistic approach to meet the needs of the aging population in Northern Door County.
- **B.** The Assistant Corporation Counsel, Director, Deputy Director, CSP Manager, and Crisis Case Manager met with staff at the **Door County Medical Center** to debrief the handling of a particularly challenging crisis situation involving a senior citizen with dementia. The discussion was productive, with increased understanding on both sides about roles and legal limitations. It was decided that a community conversation should be scheduled with provider agencies to brainstorm solutions to the lack of appropriate placement resources for individuals with dementia, particularly those exhibiting challenging behaviors.
- C. Representatives from Human Services participated in a second community conversation around Mental Health in the Schools on June 27. The goal is to create a service model which will partner therapists from different agencies to provide their services directly in the schools for students with a variety of needs. Sturgeon Bay and Sevastopol Schools were represented at this meeting. Once again, they spoke of the significant need for mental health supports in the school, as students of all ages present with extreme behavioral outbursts, uncontrollable anger, difficulty coping with home and family stressors, depression and anxiety, suicidal ideation, etc. The hope is to have some school-based service in at least some of the schools by mid-fall 2017.

### VI. Sharing our Successes

**A.** Last year, in an effort to move toward our vision of becoming "the best human services agency in the state, with excellent customer service, where staff love coming to work," we implemented the "Shining Star Award" for excellence in customer service. Building off of a suggestion that Jean Severson made last month while being recognized by the board upon her retirement, that the board should recognize contributions of our staff while they are still working for us, we have decided it would be worthwhile to share with you the monthly Shining Star Award winner. The winner of this award is selected by staff. The team of one month's winner is charged with selecting the winner for the next month.

In May, Kirstin Foss awarded the Shining Star to Office Manager Shawn Barlament. Noting that our customers are internal as well as external, Kirstin complimented Shawn for her excellence in service to the support team and the rest of the Human Services Department. She noted that Shawn always gives "thoughtful answers to questions" that will benefit staff, our customers, and the agency in the long term. Shawn, thank you for all that you do to keep our Department running smoothly and providing excellent customer service. You are truly a Shining Star!

Providing help for today and hope for tomorrow By fostering a safe community that values Your Voice, Your Choice, Your Future.

## **HUMAN SERVICES STATISTICS**

Updated 07.01.17

| UNIT                                 | 2013          | 2014          | 2015          | 2016          | 2017 YTD     |
|--------------------------------------|---------------|---------------|---------------|---------------|--------------|
| ADRC                                 |               |               |               |               |              |
| I & A Consumers                      |               |               |               | 3064          | 1952         |
| Elderly Benefits Specialist (EBS)    |               |               |               |               |              |
| Consumers                            |               |               |               | 473           | 402          |
| Disability Benefits Specialist (DBS) |               |               |               |               |              |
| Consumers                            |               |               |               | 1820          | 904          |
| Adult Protective Service (APS)       |               |               |               |               |              |
| Referrals                            | 130           | 215           | 212           | 183           | 92           |
| Total Consumers                      | 3700+         | 3876          | 4971          | 5540          | 3350         |
| Behavioral Health (BH)               |               |               |               |               |              |
| Crisis                               | 176           | 238           | 192           | 165           | 81           |
| Inpatient Admissions                 | 67            | 85            | 93            | 67            | 35           |
| Inpatient Costs                      | \$ 193,017.00 | \$ 390,092.00 | \$ 434,021.00 | \$ 188,215.87 | \$ 39,231.00 |
| Children & Family Services           |               |               |               |               |              |
| Child Welfare Referrals              | 81            | 385           | 440           | 393           | 167          |
| Juvenile Justice Referrals           | 40            | 50            | 90            | 69            | 32           |
| Birth-Three Participants             | 67            | 77            | 70            | 73            | 50           |
| Case Management                      |               |               |               |               |              |
| (FS/CST/CCS/DD)                      |               | 578           | 233           | 143           | 174          |
| Community Support Program            |               |               |               |               |              |
| Consumers Enrolled                   | 55            | 57            | 62            | 53            | 50           |
| Economic Support                     |               |               |               |               |              |
| Badger Care (BC) Total               | 4523          | 4375          | 4333          | 4169          | 4187         |
| FoodShare (FS) Total                 | 2714          | 2529          | 2351          | 2007          | 1986         |
| Consortium Calls                     |               |               | 111044+       | 12972         | 55,328       |
| WI Home Energy Assistance            |               |               |               | 557           | 923          |
| Senior Resource Center               |               |               |               |               |              |
| Meals-Congregate                     | 14,295        | 15831         | 16092         | 17802         | 7145         |
| Meals on Wheels                      | 15047         | 15809         | 13718         | 14293         | 7417         |
| Meals-Frozen                         | 6260          | 5788          | 6276          | 6245          | 2394         |
| Transportation- SRC Bus &            |               |               |               |               |              |
| Door2Door                            | 34,254        | 39000+        | 42180         | 48503         | 19706        |



### DOOR COUNTY DEPARTMENT OF HUMAN SERVICES

421 Nebraska Street Sturgeon Bay WI 54235 Main Line: 920-746-7155

Joseph Krebsbach, Director 1st Floor Fax: 920-746-2355 2nd Floor Fax: 920-746-2349 dhs@co.door.wi.us

|            | 1                                                                                                                                                     |                  |                                                                              |                                          |             | MEMO      |            |           |          | -        | -  |          |   | - |
|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------------------------------------------------------------|------------------------------------------|-------------|-----------|------------|-----------|----------|----------|----|----------|---|---|
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| From:      |                                                                                                                                                       | LaLuzerne        | iiiiiiee                                                                     |                                          |             |           |            |           |          |          |    |          |   |   |
| Date:      | 07.12.2                                                                                                                                               |                  |                                                                              |                                          |             |           |            |           |          |          |    | -        |   |   |
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| Expendit   | tures sind                                                                                                                                            | ce the last com  | mittee me                                                                    | etina he                                 | ld 06.13.1  | 17:       |            |           |          |          |    |          |   |   |
|            |                                                                                                                                                       |                  |                                                                              |                                          |             |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 1,171.22         | Flor Cr                                                                      | odit Cor                                 | ed April N  | lov 2017  | ,          |           |          |          |    |          |   |   |
|            |                                                                                                                                                       |                  | 171.22 Elan Credit Card April-May 2017 347.08 Elan Credit Card May-June 2017 |                                          |             |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    |                  |                                                                              |                                          |             |           |            |           |          |          |    |          |   | + |
|            | \$ 14,004.72   May 2017 Foster / Kinship Care Payments #259362 & #259343   \$ 3,939.76   Invoices Paid Prior to July 12, 2017 not included in Batches |                  |                                                                              |                                          |             |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 3,939.76         | Invoice                                                                      | s Paid P                                 | rior to Ju  | ly 12, 20 | 17 not II  | rciuded   | n Batcr  | es       | _  |          |   |   |
|            | \$                                                                                                                                                    | 19,462.78        |                                                                              |                                          |             |           |            |           |          |          |    |          |   |   |
|            |                                                                                                                                                       |                  |                                                                              |                                          |             |           | <u> </u>   |           |          |          |    |          |   | - |
| Departme   |                                                                                                                                                       | rnal entries not | 1                                                                            |                                          |             |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 424.75           | Mainter                                                                      | nance D                                  | ept. May    | 2017 ga   | s usage    | - Fleet   |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 424.75           |                                                                              |                                          |             |           |            |           |          |          |    | <u> </u> |   |   |
| Total Ext  | penditure                                                                                                                                             | es and Voucher   | s for the l                                                                  | Human S                                  | Services s  | ince the  | last me    | eting are |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 71,455.19        |                                                                              |                                          | ers - Batc  |           |            |           |          | IX/CCS/  | CF |          |   |   |
|            | \$                                                                                                                                                    | 44,176.16        |                                                                              |                                          | ers - Batc  |           |            |           |          |          | Ţ  |          |   | - |
|            | \$                                                                                                                                                    | 19,462.78        |                                                                              |                                          | ince the la |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 424.75           | Amoun                                                                        | ts paid t                                | o other C   | ounty De  | epartme    | nts as pe | r above  | )        |    |          |   |   |
|            | \$                                                                                                                                                    | 135,518.88       |                                                                              |                                          |             |           |            |           |          |          |    |          |   |   |
| <u></u>    | 1                                                                                                                                                     |                  |                                                                              | <u> </u>                                 |             | 2 1 /4    | DD0 :      | 11 1      | <u> </u> |          | -  |          |   |   |
| I otal Exp | <del>`</del>                                                                                                                                          | es and Voucher   |                                                                              |                                          |             |           |            |           | ast mee  | ting are |    |          |   | - |
|            | \$                                                                                                                                                    | 64,406.62        |                                                                              | ·                                        | ers - Batc  | ·         | _ <u> </u> |           | -        |          |    |          |   |   |
|            | \$                                                                                                                                                    | 54,075.69        |                                                                              | onthly Vouchers - Batch 2 (June) #259370 |             |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 469.53           |                                                                              |                                          | May-June    |           |            |           |          |          |    |          |   |   |
|            | \$                                                                                                                                                    | 394.87           | Elan Cr                                                                      | edit Car                                 | d May-Ju    | ne 2017   |            |           |          |          |    |          |   | - |
| 1          |                                                                                                                                                       |                  |                                                                              |                                          |             |           |            |           |          | 1        | 1  | 1        | 1 | 1 |
|            | \$                                                                                                                                                    | 119,346.71       |                                                                              |                                          |             |           |            |           |          |          |    |          |   |   |

|      |                                                               |             |                   | vou      | ICHER                                                                                           |              |                                         | Submi                 | tted By:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
|------|---------------------------------------------------------------|-------------|-------------------|----------|-------------------------------------------------------------------------------------------------|--------------|-----------------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
|      |                                                               |             | ST                |          | WISCONSIN 2017                                                                                  |              |                                         | sbarlament            | 06.06.17                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
|      |                                                               | •           |                   | Door (   | County                                                                                          |              |                                         | Approved by:          | Department Head:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
| VEND | VEND                                                          | 'ENDOR N    | RESS: _           |          | N ew Vendor (Please One Time Vendor (P County Dept of Human Services THLY FOSTER/KINSHIP CARE F | lease Assign | New#)                                   |                       | by: Committee Chair /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |
|      |                                                               | OR ADDR     | _                 |          |                                                                                                 | AIRO         | LL_                                     | *                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      | VENDOR ADDRESS: 421 Nebraska Street  Added to Voucher Listing |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      | .ID BY<br>ECK#_                                               | Thi         |                   |          | ed by Finance Department                                                                        |              | <b>⇒</b> >                              | Meeting Date Hold For | Listing Signed / Approved  06.13.17  Approval / Documentation ter Processing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |
| Fund | Dept                                                          | Sub<br>Dept | Account<br>Number | Detail   | Description                                                                                     | @<br>Cost/Ea | Total<br>Amount                         | Invoice<br>Date       | Vendor<br>Invoice Number                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
| 240  | 47                                                            |             |                   |          | 2017 Foster/Kinship Care for<br>May-1st Batch                                                   | 1            | \$ 11,834.1                             | 06.06.17              | BATCH # 259343                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |
|      |                                                               |             |                   | <u> </u> |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| ann. |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
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|      |                                                               |             |                   |          | 1.0040000000000000000000000000000000000                                                         | ******       |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              | 202010000000000000000000000000000000000 |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               | İ           |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          | ·                                                                                               |              |                                         |                       | and the state of t |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
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|      |                                                               |             |                   |          |                                                                                                 |              | *****                                   |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               |             |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               | ļ           |                   |          |                                                                                                 |              |                                         |                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
|      |                                                               | VOUCHE      | ER TOTA           | \L       |                                                                                                 |              | \$ 11,834.1                             | 0                     | VOUCHER TOTAL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |

\* SUMMARY \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY

FOSTER CARE

CHECK DATE: JUNE 30, 2017

G/L DATE: 06/2017

Batch Nbr: 259343

| 7                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Vendor |              |                                   |          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------|-----------------------------------|----------|
| Vendor Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | No.    | Invoice #    | Invoice Description               | Amount   |
| s graden i de la companya de la comp | 21818  | 01719 060517 | EWISACWIS 06/05/2017 0008063756   | 917.32   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 8116   | 01719 060517 | EWISACWIS 06/05/2017 0008017407   | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 9479   | 01719 060517 | EWISACWIS 06/05/2017 0008000379   | 2,189.00 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13963  | 01719 060517 | EWISACWIS 06/05/2017 0006910123   | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 21744  | 01719 060517 | EWISACWIS 06/05/2017 0008063868   | 948.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 18813  | 01719 060517 | EWISACWIS 06/05/2017 0008043242   | 928.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13223  | 01719 060517 | . EWISACWIS 06/05/2017 0008034652 | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 21729  | 01719 060517 | EWISACWIS 06/05/2017 0008064158   | 384.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22265  | 01719 060517 | EWISACWIS 06/05/2017 0008039144   | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22022  | 01719 060517 | EWISACWIS 06/05/2017 0008067102   | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 20836  | 01719 060517 | EWISACWIS 06/05/2017 0008057128   | 232.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 17937  | 01719 060517 | EWISACWIS 06/05/2017 0008040115   | 464,00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 21964  | 01719 060517 | EWISACWIS 06/05/2017 0008048945   | 1,568.19 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22153  | 01719 060517 | EWISACWIS 06/05/2017 0008067949   | 464.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22150  | 01719 060517 | EWISACWIS 06/05/2017 0008067865   | 187.10   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 16915  | 01719 060517 | EWISACWIS 06/05/2017 0008042309   | 623.30   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 17043  | 01719 060517 | EWISACWIS 06/05/2017 0008059839   | 400.00   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 22152  | 01719 060517 | EWISACWIS 06/05/2017 0008067849   | 374.19   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 242    | 01719 060517 | EWISACWIS 06/05/2017 0008015044   | 995.00   |

Batch Total:

\$11,834.10 \*\*\*\*

## **VOUCHER** Submitted By: STATE OF WISCONSIN 2017 sbarlament 06.13.17 **Door County** Approved by: Department Head: N ew Vendor (Please Assign New#) One Time Vendor (Please Assign New#) VENDOR# VENDOR NAME: Door County Dept of Human Services Approved by: Committee Chair / VENDOR ADDRESS: County Administrator VENDOR ADDRESS: MONTHLY FOSTER/KINSHIP CARE PAYROLL VENDOR ADDRESS: 421 Nebraska Street Added to Voucher Listing This Area to be Completed by Finance Department Voucher Listing Signed / Approved PAID BY Meeting Date Ò6.13.17 CHECK# Hold For Approval / Documentation After Processing Fund Dept Account Description Total @ Invoice Vendor Dept Number Detail Cost/Ea Amount Date Invoice Number 2017 Foster/Kinship Care for 240 47 May-2nd Batch 1 \$ 2,170.62 | 06.13.17 **BATCH #259362** \$ 2,170.62 **VOUCHER TOTAL** VOUCHER TOTAL

\* SUMMARY \* SCHEDULE OF VOUCHERS Page DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY

FOSTER CARE

CHECK DATE: JUNE 30, 2017

G/L DATE: 06/2017

Batch Nbr: 259362

Vendor

Invoice Description Amount No. Invoice # Vendor Name EWISACWIS 06/12/2017 0008004685 2,170.62 AMERICAN FOUNDATION OF CNSLNG 01720 061217 7857

Batch Total:

\$2,170.62 

#### Submitted By: **VOUCHER** alaluzerne 2017 STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Please Assign New#) One Time Vendor (Please Assign New#) VENDOR# Door County Dept of Human Services VENDOR NAME: Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Invoice Vendor Total Description Fund Dept Sub Account Date Invoice Number Detail Dept Number SUBMITTED FOR PAYMENT, BATCH various - as attached \$17,075.50 51717CSP MAY 2017 - 2ND Batch Processing 240 47 SUBMITTED FOR PAYMENT, BATCH 51717CP various - as attached 3,230.00 MAY 2017 - 2ND Batch Processing 240 47 SUBMITTED FOR PAYMENT, BATCH 51717BH various - as attached MAY 2017 - 2ND Batch Processing \$1,177.30 240 47 SUBMITTED FOR PAYMENT, BATCH 51717MIX various - as attached \$1,967.46 MAY 2017 - 2ND Batch Processing 240 47 SUBMITTED FOR PAYMENT, BATCH 51717CCS MAY various - as attached \$ 30,550.00 2017 - 2ND Batch Processing 240 47 SUBMITTED FOR PAYMENT, BATCH 51717CF \$ 17,454.93 various - as attached MAY 2017 - 2ND Batch Processing 240 47

**VOUCHER TOTAL** 

|                                                                  |                          |             | STA               |              | CHER wisconsin 2017                                                     |              |                 | Submi           | itted By:<br>ne                                                                      |  |  |  |
|------------------------------------------------------------------|--------------------------|-------------|-------------------|--------------|-------------------------------------------------------------------------|--------------|-----------------|-----------------|--------------------------------------------------------------------------------------|--|--|--|
|                                                                  |                          |             |                   | Door C       |                                                                         |              |                 |                 |                                                                                      |  |  |  |
|                                                                  |                          |             |                   | D001 C       |                                                                         |              | Appr            | oved by:        | Department Head:                                                                     |  |  |  |
| VEND                                                             | •                        |             |                   |              | N ew Vendor (Please Assign New #) One Time Vendor (Please Assign New #) |              | 4               | by              | Me Jalan                                                                             |  |  |  |
| VENDOR NAME: Door County Dept of Human Services  Approved by: Co |                          |             |                   |              |                                                                         |              |                 |                 |                                                                                      |  |  |  |
|                                                                  | VEND                     | OR ADDI     | RESS:             | c/o De       | _                                                                       | County A     | dministrator    |                 |                                                                                      |  |  |  |
|                                                                  | VEND                     | OR ADDR     | ESS: _            | MONT         | HLY MEETING VOUCHERS                                                    |              | _               |                 |                                                                                      |  |  |  |
|                                                                  | VENE                     | OR ADD      | RESS:             | 421 N        | ebraska Street                                                          |              |                 |                 |                                                                                      |  |  |  |
|                                                                  | Added to Voucher Listing |             |                   |              |                                                                         |              |                 |                 |                                                                                      |  |  |  |
|                                                                  | AID BY<br>ECK#           | ∏ Th        |                   |              | ed by Finance Department                                                |              | <del></del>     | Meeting<br>Hole | cher Listing Signed / Approved  Date  for Approval / Documentation  After Processing |  |  |  |
| Fund                                                             | Dept                     | Sub<br>Dept | Account<br>Number | Detail       | Description                                                             | @<br>Cost/Ea | Total<br>Amount | Invoice<br>Date | Vendor<br>Invoice Number                                                             |  |  |  |
| 240                                                              | 47                       |             |                   |              | SUBMITTED FOR PAYMENT, BATCH 6717CS<br>JUNE 2017 - 1ST Batch Processing | Р            | \$17,075.50     |                 | various - as attached                                                                |  |  |  |
|                                                                  |                          |             |                   |              |                                                                         |              |                 |                 |                                                                                      |  |  |  |
|                                                                  |                          |             |                   |              |                                                                         |              |                 |                 |                                                                                      |  |  |  |
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\$ 17,075.50

VOUCHER TOTAL

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

Page 1 DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

- \*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*

G/L DATE: 06/2017

Batch Nbr:6717CSP

| Vendor Name .                  | Vendor<br>No. | Invoice #     | Invoice Description                     | Amount    |
|--------------------------------|---------------|---------------|-----------------------------------------|-----------|
| BROTOLOC HEALTH CARE SYSTEM IN | 3640          | 3640 MAY2017  | MAY 2017 CBRF 31 DAYS                   | 5,471.50  |
| EMPOWERMENT OPTIONS            | 15615         | 15615 MAY2017 | MAY 2017 CBRF 31 DAYS                   | 10,540.00 |
|                                | 8394          | 8394 MAY 2017 | MAY 2017 ADULT FAMILY HOME CARE         | 900.00    |
| SHERYL FLORES                  | 11392         | 11392 MA2017  | MAY 2017 MOVIE DAY TICKETS (20 CLIENTS) | 164.00    |

Batch Total:

\$17,075.50 \*\*\*\*

## Submitted By: **VOUCHER** 2017 alaluzerne STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Please Assign New#) One Time Vendor (Please Assign New #) VENDOR# Door County Dept of Human Services VENDOR NAME: Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Invoice Vendor Total @ Dept Description Account Fund Sub Invoice Number Date Cost/Ea Amount Number Detail Dept SUBMITTED FOR PAYMENT, BATCH 6717CP \$3,230.00 various - as attached JUNE 2017 - 1ST Batch Processing 240 47

3,230.00

VOUCHER TOTAL

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

Page 1 DC404RSUM

COUNTY OF DOOR SCHEDULE OF VOUC STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

DEPARTMENT \*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY

G/L DATE: 06/2017

Batch Nbr:6717CP

| Vendor Name                   | Vendor<br>No. | Invoice #     | Invoice Description              | Amount   |
|-------------------------------|---------------|---------------|----------------------------------|----------|
|                               | 21818         | 21818 052017  | RESPITE CARE 4 NIGHTS            | 70.00    |
| WI DEPT OF JUSTICE CRIME INFO | 4331          | 4331 MAY2017  | MARCH/MAY BACKGROUND CHECKS (16) | 160.00   |
| TEAM LEADERSHIP CENTER INC    | 9942          | 9942 JUN 2017 | JUNE 2017 TLC PERSONAL CHALLENGE | 3,000.00 |

Batch Total:

\$3,230.00 \*

20

|      |                                     |              |                                              | VOU          | CHER                                                           |         |               | Submi    | tted By:                           |  |  |
|------|-------------------------------------|--------------|----------------------------------------------|--------------|----------------------------------------------------------------|---------|---------------|----------|------------------------------------|--|--|
|      |                                     |              | STA                                          | TE OF        | VISCONSIN 20°                                                  | 17      |               | alaluzer | ne                                 |  |  |
|      |                                     |              |                                              | Door C       | ounty                                                          |         | Аррг          | oved by: | Department Head:                   |  |  |
| VEND | OR#_                                |              |                                              |              | N ew Vendor (Pleas                                             |         |               | hou      | Melan                              |  |  |
|      | v                                   | ENDOR N      | NAME:                                        | Door C       | County Dept of Human Services                                  |         | _   -         |          | d by: Committee Chair /            |  |  |
|      | VEND                                | OR ADDF      | RESS:                                        | c/o De       | pt Human Services                                              |         |               |          | dministrator                       |  |  |
|      | VENDO                               | OR ADDR      | ESS: _                                       | MONT         | HLY MEETING VOUCHERS                                           |         |               |          |                                    |  |  |
|      | vendor address: 421 Nebraska Street |              |                                              |              |                                                                |         |               |          |                                    |  |  |
|      |                                     |              |                                              |              |                                                                |         |               | Add      | ed to Voucher Listing              |  |  |
|      |                                     | Thi          | is Area to b                                 | e Complet    | ed by Finance Department                                       |         | $\Rightarrow$ | Vou      | cher Listing Signed / Approved     |  |  |
|      | NID BY<br>ECK#_                     | $\checkmark$ |                                              |              | $\checkmark$                                                   |         |               |          | Date  For Approval / Documentation |  |  |
|      |                                     | Sub          | Account                                      | l            | Description                                                    |         | Total         | Invoice  | After Processing<br>Vendor         |  |  |
| Fund | Dept                                | Dept         |                                              | Detail       | 2000.19.00                                                     | Cost/Ea | Amount        | Date     | Invoice Number                     |  |  |
| 240  | 47                                  |              |                                              |              | SUBMITTED FOR PAYMENT, BATO<br>JUNE 2017 - 1ST Batch Processin |         | \$1,177.30    |          | various - as attached              |  |  |
|      |                                     |              |                                              |              |                                                                |         |               |          |                                    |  |  |
|      |                                     |              |                                              |              |                                                                |         |               |          |                                    |  |  |
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\$ 1,177.30

VOUCHER TOTAL

Page 1 DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI \* S U M M A R Y \* SCHEDULE OF VOUCHERS

MEETING DATE

G/L DATE: 06/2017

Batch Nbr:6717BH

| Vendor Name     | Vendor<br>No. | Invoice #     | Invoice Description                      | Amount   |
|-----------------|---------------|---------------|------------------------------------------|----------|
| IPAT INC        | 13103         | 13103 MAY2017 | MAY 2017 PSYCH EVAL PERSONALITY TEST (3) | 124.50   |
| NCS PEARSON INC | 11760         | 11760 MAY2017 | MAY 2017 MMPI-2 EXTENDED PROF Q ADMIN    | 52.80    |
| TIMOTHY HICKEY  | 3823          | 3823 MAY2017  | MAY 2017 OWI ASSESSMENTS (20)            | 1,000.00 |

Batch Total:

\$1,177.30

|             |        |             |                   | VOL                                    | JCHER                                |                                                                 |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Subn            | nitted By:                                         |
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|             |        |             | ST                | ATE OF                                 | WISCONSIN                            | 2017                                                            |              | ļ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | alaluze         | erne                                               |
|             |        |             |                   | Door                                   | County                               |                                                                 |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                                                    |
|             |        |             |                   |                                        |                                      | N ew Vendor (Please Assign New#)                                | <b>.</b>     | Арр                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | roved by:       | Department Head:                                   |
| VEN         | OOR#   |             |                   |                                        |                                      | One Time Vendor (Piease Assign N                                |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | rock            | Mc Le Come                                         |
|             | •      | VENDOR      | NAME: _           | Door                                   | County Dept of Huma                  | an Services                                                     |              | _                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                                                    |
|             | VENI   | OOR ADD     | RESS:             | c/o De                                 | ept Human Services                   |                                                                 |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 | ed by: Committee Chair /<br>Administrator          |
|             | VEND   | OR ADDI     | RESS: _           | MON                                    | THLY MEETING VOL                     | JCHERS                                                          |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                                                    |
|             | VENI   | OOR ADD     | RESS.             |                                        | lebraska Street                      |                                                                 |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                                                    |
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|             |        | Пть         | is Area to        | he Comple                              | eted by Finance Department           | П                                                               |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | □ Voi           | ucher Listing Signed / Approved                    |
| PA          | AID BY | <b>☆</b>    | 1071104 10        | De Compie                              | ned by I marke Department            | 1                                                               |              | <b>v</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                 | Date                                               |
| СН          | ECK#   |             |                   | ······································ |                                      | <del></del>                                                     | ·····        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Hol             | d For Approval / Documentation<br>After Processing |
| Fund        | Dept   | Sub<br>Dept | Account<br>Number |                                        |                                      | Description                                                     | @<br>Cost/Ea | Total<br>Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Invoice<br>Date |                                                    |
| 240         | 47     |             |                   |                                        | SUBMITTED FOR F<br>JUNE 2017 - 1ST B | PAYMENT, BATCH 6717                                             | міх          | \$1,967.46                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 | various - as attached                              |
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|             |        |             |                   |                                        |                                      |                                                                 |              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                                                    |
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| <del></del> |        |             |                   |                                        |                                      | **************************************                          |              | <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                 |                                                    |
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\$ 1,967.46

VOUCHER TOTAL

\* SUMMARY \* SCHEDULE OF VOUCHERS Page DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

| Dept | Human | Services | 5 |
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|      | DEPA  | RTMENT   |   |

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY

G/L DATE: 06/2017

Batch Nbr:6717MIX

| T. L. Wana                 | Vendor<br>No. | Invoice #     | Invoice Description                | Amount |
|----------------------------|---------------|---------------|------------------------------------|--------|
| Vendor Name                | NO.           | 111/01/05     | Invoice Depoliperon                |        |
| AMY LEFEVRE                | 21173         | 21173 MAY2017 | MAY 2017 EMP MILEAGE/MEAL REIM     | 61.10  |
| BETH CHISHOLM              | 2435          | 2435 MAY2017  | MAY 2017 EMP MILEAGE REIM 62 MI    | 33.17  |
| DC PRINTING LLC            | 5245          | 101617 05/17  | MAY 2017 HS ENVELOPES              | 153.00 |
| DEBRA FEHRMAN              | 6876          | 6876 MAY2017  | MAY 2017 EMP MILEAGE REIM 303 MI   | 162.11 |
| EMILY SCHWARK              | 20081         | 20081 MAY2017 | MAY 2017 EMP MILEAGE REIM 45 MI    | 24.08  |
| ELIZABETH SECREST          | 22233         | 22233 MAY2017 | MAY 2017 EMP MILEAGE REIM 405 MI   | 216.68 |
| GANNETT WISCONSIN MEDIA    | 15904         | 15904 MAY 17  | HS 1ST FLOOR SUB 6/1/17 TO 5/31/18 | 56.35  |
| MARK HILL                  | 2006          | 2006 MAY 2017 | MAY 2017 EMP MILEAGE REIM 387 MI   | 207.05 |
| KATHY E SCHULTZ            | 22015         | 22015 MAY2017 | MAY 2017 EMP MILEAGE REIM 50 MI    | 26.75  |
| NICOLE KAHLER              | 22267         | 22267 JUN2017 | MAY/JUNE 2017 EMP MILEAGE REIM     | 31.57  |
| SHERYL FLORES              | 11392         | 11392 052017  | MAY 2017 EMP MILEAGE REIM 88.7 MI  | 47.45  |
| STAPLES ADVANTAGE          | 15069         | 15069 05/2017 | MAY 2017 HS OFFICE SUPPLIES        | 363.39 |
| TANYA KAVICKY-MELS         | 21550         | 21550 MA2017  | MAY 2017 EMP MILEAGE REIM 10 MI    | 10.35  |
| WISCONSIN DOCUMENT IMAGING | 5999          | 5999 MAY 17   | MAY 2017 HS BLACK TONER FOR ES     | 574.41 |

Batch Total:

\$1,967.46 

24

|      |       |             |                   | VOU    | CHER                                                                     |              |                 | Subm            | itted By:                                                                              |
|------|-------|-------------|-------------------|--------|--------------------------------------------------------------------------|--------------|-----------------|-----------------|----------------------------------------------------------------------------------------|
|      |       |             | STA               | ATE OF | WISCONSIN 2017                                                           |              |                 | alaluze         | rne                                                                                    |
|      |       |             |                   | Door 0 | County                                                                   |              | Appr            | oved by:        | Department Head:                                                                       |
| VEND | OR# _ |             |                   |        | N ew Vendor (Please Assign New #) One Time Vendor (Please Assign New #)  |              |                 | -               | 1 Harlan                                                                               |
|      | V     | ENDOR I     | NAME: _           | Door ( | County Dept of Human Services                                            |              |                 | Approve         | d by: Committee Chair /                                                                |
|      | VEND  | OR ADD      | RESS:             | c/o De | pt Human Services                                                        |              |                 | County A        | dministrator                                                                           |
|      | VEND  | OR ADDR     | ESS: _            | MONT   | HLY MEETING VOUCHERS                                                     |              |                 |                 |                                                                                        |
|      | VEND  | OR ADD      | RESS: _           | 421 N  | ebraska Street                                                           |              |                 |                 |                                                                                        |
|      |       |             |                   |        |                                                                          |              |                 | Add             | led to Voucher Listing                                                                 |
|      | ID BY | ∏ Th        |                   |        | red by Finance Department                                                |              | <b></b>         | Meeting Hole    | cher Listing Signed / Approved  Date  d For Approval / Documentation  After Processing |
| Fund | Dept  | Sub<br>Dept | Account<br>Number | Dotail | Description                                                              | @<br>Cost/Ea | Total<br>Amount | Invoice<br>Date | Vendor<br>Invoice Number                                                               |
| 240  | 47    |             |                   |        | SUBMITTED FOR PAYMENT, BATCH 6717CCS<br>JUNE 2017 - 1ST Batch Processing |              | \$30,550.00     | -               | various - as attached                                                                  |
|      |       |             |                   |        |                                                                          |              |                 |                 |                                                                                        |
|      |       |             |                   |        |                                                                          |              |                 |                 |                                                                                        |
|      |       |             |                   |        |                                                                          |              |                 |                 |                                                                                        |
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|      |       |             |                   |        | ·                                                                        |              |                 |                 | 17                                                                                     |
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| ,    |       |             | l                 | l      | l                                                                        | 1 1          |                 |                 |                                                                                        |

\$ 30,550.00

VOUCHER TOTAL

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

DEPARTMENT \*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*

G/L DATE: 06/2017

Batch Nbr:6717CCS

| Vendor Name                    | Vendor<br>No. | Invoice #     | Invoice Description             | Amount   |
|--------------------------------|---------------|---------------|---------------------------------|----------|
| ADVOCATES-INDEPENDENT LIVINGII | 13325         | 13325 MAY2017 | MAY 2017 CCS ADMIN 28.25 HRS    | 644.10   |
| ADVOCATES FOR HEALTHY          | 17929         | 17929 AP2017  | JAN-APRIL 2017 CCS SERVICES     | 3,486.40 |
| BAY COUNSELING CLINIC, LLP     | 21177         | 21177 AP2017  | FEB/APRIL 2017 CCS SERVICES     | 918.00   |
| BOYS & GIRLS CLUB OF DOOR CNTY | 2571          | 2571 AP2017   | APRIL 2017 CCS SERVICES         | 1,407.60 |
| DYNAMIC FAMILY SOLUTIONS       | 21410         | 21410 AP2017  | APRIL 2017 CCS SERVICES 2.9 HRS | 238.00   |
| FAMILY SERVICES                | 3841          | 3841 AP2017   | APRIL 2017 CCS SERVICES         | 3,350.60 |
| INNOVATIVE SERVICES, INC.      | 5078          | 5078 APRI2017 | APRIL 2017 CCS SERVICES         | 5,120.70 |
| PHOENIX BEHAVIORAL HEALTH SVC  | 17442         | 17442 AP2017  | MARCH/APRIL 2017 CCS SERVICES   | 9,424.80 |
| SPECIALIZED SERVICES LLC       | 7694          | 7694 AP2017   | APRIL 2017 CCS SERVICES         | 5,959.80 |

Batch Total:

\$30,550.00 \*\*\*

## Submitted By: **VOUCHER** 2017 alaluzerne STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Please Assign New #) One Time Vendor (Please Assign New#) VENDOR# Door County Dept of Human Services VENDOR NAME: Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Invoice Vendor Total Description Fund Dept Account Sub Invoice Number Cost/Ea Amount Date Number Detail Dept SUBMITTED FOR PAYMENT, BATCH 6717CF various - as attached \$17,454.93 JUNE 2017 - 1ST Batch Processing 240 47

\$ 17,454.93

**VOUCHER TOTAL** 

\* SUMMARY \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

SUMMARY FOR COMMITTEE REVIEW оигу

G/L DATE: 06/2017

Batch Nbr:6717CF

| Vendor Name                    | Vendor<br>No. | Invoice #     | Invoice Description                  | Amount   |
|--------------------------------|---------------|---------------|--------------------------------------|----------|
|                                | 8870          | 8870 MAY 2017 | MAY 2017 403.01 REC/ALT ACTIVITES    | 400.00   |
| BOYS & GIRLS CLUB OF DOOR CNTY | 2571          | 2571 MAY2017  | MAY 2017 MEMBERSHIP/SUMMER CAMP REG  | 865.00   |
| KALAHARI RESORT & CONVENTION C | 14317         | 14317 052017  | APRIL 2017 AUTISM CONFERENCE LODGING | 6,482.99 |
|                                | 6447          | 6447 MAY2017  | MAY 2017 REC/ALTERNATIVE ACTIVITIES  | 600.00   |
| P.A.T.H.                       | 9779          | 9779 MAY2017  | MAY 2017 P.A.T.H. CAMP               | 550.00   |
| WENDY RAY                      | 13022         | 13022 MAY2017 | MAY 2017 B3 THERAPY/MILES            | 6,846.94 |
|                                | 22245         | 22245 MAY2017 | APRIL/MAY OVERNIGHT RESPITE CARE     | 910.00   |
|                                | 21046         | 21046 MAY2017 | MAY 2017 CCOP RESPITE/TRANS/TRAINING | 800.00   |

\$17,454.93 Batch Total:

#### VOUCHER

## STATE OF WISCONSIN **Door County**

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**VOUCHER TOTAL** 

2017

alaluzerne 06.21.2017

| Approved by: | Department Head: |
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| 7 | $\neg \tau$ | •      |     |          |                |  |
|   |             |        |     |          | nittee Chair / |  |
|   | County /    | Admin  | ist | rato     | r              |  |

Added to Voucher Listing

Voucher Listing Signed / Approved

| VENDOR#         | N ew Vendor (Please Assign New#)  One Time Vendor (Please Assign New#) |
|-----------------|------------------------------------------------------------------------|
| VENDOR NAME:    | Door County Dept of Human Services                                     |
| VENDOR ADDRESS: | c/o Dept Human Services                                                |
| VENDOR ADDRESS: | MONTHLY MEETING VOUCHERS                                               |
| VENDOR ADDRESS: | 421 Nebraska Street                                                    |

|      | ID BY        | ∏ Th        | is Area to b      | e Complet | ed by Finance Department | Û           |            | <b>⇒</b>        | Meet        |
|------|--------------|-------------|-------------------|-----------|--------------------------|-------------|------------|-----------------|-------------|
| Fund | CK#_<br>Dept | Sub<br>Dept | Account<br>Number | Detail    |                          | Description | @<br>st/Ea | Total<br>Amount | invo<br>Dat |

| d by Finance Department                                                   |              | >  |                 |                 | Date                                                 |
|---------------------------------------------------------------------------|--------------|----|-----------------|-----------------|------------------------------------------------------|
| <del></del>                                                               |              |    | [               | Meeting<br>Hold | Date  For Approval / Documentation  After Processing |
| Description                                                               | @<br>Cost/Ea |    | Total<br>Amount | invoice<br>Date | Vendor<br>Invoice Number                             |
| SUBMITTED FOR PAYMENT, BATCH 62117CF<br>June 2017- 2ND Batch Processing   |              | \$ | 17,858.89       |                 | various - as attached                                |
| SUBMITTED FOR PAYMENT, BATCH 062117MX June<br>2017 - 2ND Batch Processing |              | \$ | 1,327.19        |                 | various - as attached                                |
| SUBMITTED FOR PAYMENT, BATCH 062117CP June 2017 - 2ND Batch Processing    |              |    | \$1,763.45      |                 | various - as attached                                |
| SUBMITTED FOR PAYMENT, BATCH 062117CC June 2017 - 2ND Batch Processing    |              | 5  | 14,340.00       |                 | various - as attached                                |
| SUBMITTED FOR PAYMENT, BATCH 062117BH June 2017 - 2ND Batch Processing    |              | \$ | 7,401.25        |                 | various - as attached                                |
| SUBMITTED FOR PAYMENT, BATCH 062117CS June 2017 - 2ND Batch Processing    |              | \$ | 1,485.38        |                 | various - as attached                                |
|                                                                           |              |    |                 |                 |                                                      |
|                                                                           |              |    |                 |                 | -                                                    |
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| -                                                                         |              |    | \$44,176.16     | 3 ←             | VOUCHER TOTAL                                        |

|      |              |              |                   | VOU        | CHER                                  |                                                  |               | Submi           | tted By:                                       |
|------|--------------|--------------|-------------------|------------|---------------------------------------|--------------------------------------------------|---------------|-----------------|------------------------------------------------|
|      |              |              | STA               | TE OF      | WISCONSIN 2017                        |                                                  |               | alaluzer        | ne 06.21.2017                                  |
|      |              |              |                   | Door C     | County                                |                                                  | Appro         | oved by:        | Department Head:                               |
| •    |              |              |                   |            | N ew Vendor (Please Assign New #)     |                                                  |               | 1               |                                                |
| VEND | OR#          |              |                   |            | One Time Vendor (Please Assign New #) |                                                  | 6             | 15015           | 2 Letano                                       |
|      | ν            | ENDOR I      | NAME:             | Door C     | County Dept of Human Services         |                                                  | _  -//-       | Approve         | d by: Committee Chair /                        |
|      |              | OR ADDI      |                   |            | pt Human Services                     |                                                  |               | County A        | dministrator                                   |
|      |              | OR ADDR      |                   |            | HLY MEETING VOUCHERS                  |                                                  | _             |                 |                                                |
|      |              | OR ADD       |                   |            | ebraska Street                        |                                                  |               |                 |                                                |
|      | VENE         | OK ADD       | _                 |            |                                       |                                                  |               | Add             | ed to Voucher Listing                          |
|      |              |              | in Arna ta l      | ne Complet | ed by Finance Department              |                                                  | $\Rightarrow$ | Vou             | cher Listing Signed / Approved                 |
| PA   | UD BY        | <b>↑</b> ''' | 15 A Ca 10        | be complet | 1,                                    |                                                  |               | Meeting<br>Hole | Dat <u>e</u><br>d For Approval / Documentation |
| CHE  | ECK#         |              |                   |            |                                       |                                                  | Total         | Invoice         | After Processing  Vendor                       |
| Fund | Dept         | Sub<br>Dept  | Account<br>Number | Detail     | Description                           | @<br>Cost/Ea                                     | Amount        | Date            | Invoice Number                                 |
|      |              |              |                   |            | SUBMITTED FOR PAYMENT, BATCH 62117CF  |                                                  |               |                 |                                                |
| 240  | 47           |              |                   |            | JUNE 2017 - 2nd Batch Processing      |                                                  | \$17,858.89   |                 | various - as attached                          |
|      |              |              |                   |            |                                       |                                                  |               |                 |                                                |
|      |              |              | -                 |            |                                       |                                                  |               | <u> </u>        |                                                |
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|      | <del> </del> |              |                   | +          |                                       |                                                  |               |                 |                                                |

\$ 17,858.89

VOUCHER TOTAL

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\* SUMMARY \* SCHEDULE OF VOUCHERS

MEETING DATE

Dept Human Services
DEPARTMENT

STATE OF WISCONSIN STURGEON BAY, WI

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY

G/L DATE: 06/2017

Batch Nbr:62117CF

| II NDI.UZII/CI |                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
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| Vendor<br>No.  | Invoice #                                                                                                                           | Invoice Description                                                                                                                                                                                                                                                                                                                                    | Amount                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 8870           | 8870 JUN2017                                                                                                                        | JUNE 2017 403.01 RECREATION #2                                                                                                                                                                                                                                                                                                                         | 400.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5012           | 5012 JUNE2017                                                                                                                       | APRIL/MAY 2017 513.00 MENTORING                                                                                                                                                                                                                                                                                                                        | 264.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| CNTY 2571      | 2571 JUN2017                                                                                                                        | JUNE 2017 SUMMER CAMP FEE/REG                                                                                                                                                                                                                                                                                                                          | 2,210.75                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 13320          | 13320 JUN2017                                                                                                                       | JUNE 2017 403.01 RECREATION/LEISURE                                                                                                                                                                                                                                                                                                                    | 200.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 39472          | 39472 JUN2017                                                                                                                       | JUNE 2017 12 MO ANNUAL MEMBERSHIP                                                                                                                                                                                                                                                                                                                      | 216.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 21312          | 21312 JUN2017                                                                                                                       | JUNE 2017 CCOP PURCHASE                                                                                                                                                                                                                                                                                                                                | 51.50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 21062          | 21062 MAY2017                                                                                                                       | MAY 2017 403.01 REC ACTIV                                                                                                                                                                                                                                                                                                                              | 126.46                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 18129          | 18129 JUN2017                                                                                                                       | JUNE 2017 403.01 RECREATION                                                                                                                                                                                                                                                                                                                            | 500.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 22317          | 22317 JUN2017                                                                                                                       | JUNE 2017 CCOP PURCHASE                                                                                                                                                                                                                                                                                                                                | 4,083.11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 12361          | 12361 MAR2017                                                                                                                       | MAR 2017 NUTRITION EDUCATION                                                                                                                                                                                                                                                                                                                           | 165.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 4143           | 4143 MAY 2017                                                                                                                       | MAY/JUNE 2017 112.5,112.52,112.55,403.01                                                                                                                                                                                                                                                                                                               | 878.91                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 6447           | 6447 JUNE2017                                                                                                                       | JUNE 2017 403.01 RECREATION                                                                                                                                                                                                                                                                                                                            | 425.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 21507          | 21507 JUN2017                                                                                                                       | JUNE 2017 403.01 RECREATION                                                                                                                                                                                                                                                                                                                            | 200.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| INC 5008       | 5008 MAY2017                                                                                                                        | MAY 2017 GUARDIANSHIP SERVICES                                                                                                                                                                                                                                                                                                                         | 218.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 2569           | 2569 MAY2017                                                                                                                        | MAY 2017 101,113,112.99                                                                                                                                                                                                                                                                                                                                | 1,086.77                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 7694           | 7694 MAY2017                                                                                                                        | MAY 2017 PCW SERVICES 176 HRS                                                                                                                                                                                                                                                                                                                          | 2,830.08                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 16594          | 16594 JUN2017                                                                                                                       | JUNE 2017 403.01 RECREATION                                                                                                                                                                                                                                                                                                                            | 200.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 5555           | 5555 MAY2017                                                                                                                        | MAY 2017 B3 HOURS, MILES, SUPPLIES                                                                                                                                                                                                                                                                                                                     | 3,803.31                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                | Vendor No.  8870  5012  CNTY 2571  13320  39472  21312  21062  18129  22317  12361  4143  6447  21507  SINC 5008  2569  7694  16594 | Vendor No. Tnvoice #  8870 8870 JUN2017  5012 5012 JUNE2017  2571 2571 JUN2017  13320 13320 JUN2017  39472 39472 JUN2017  21312 21312 JUN2017  21062 21062 MAY2017  18129 18129 JUN2017  22317 22317 JUN2017  12361 12361 MAR2017  4143 4143 MAY 2017  4143 4143 MAY 2017  51NC 5008 5008 MAY2017  2569 2569 MAY2017  7694 7694 MAY2017  16594 JUN2017 | Vendor No.   Invoice #   Invoice Description   8870   8870   JUN2017   JUNE 2017 403.01 RECREATION #2   5012   5012   JUNE2017   APRIL/MAY 2017 513.00   MENTORING   2571   2571   JUN2017   JUNE 2017 SUMMER CAMP FEE/REG   13320   13320   JUN2017   JUNE 2017 403.01 RECREATION/LEISURE   39472   39472   JUN2017   JUNE 2017 12   MO ANNUAL MEMBERSHIP   21312   21312   JUN2017   JUNE 2017 CCOP PURCHASE   21062   ANY2017   MAY 2017 403.01 RECREATION   18129   JUN2017   JUNE 2017 403.01 RECREATION   22317   22317   JUN2017   JUNE 2017 CCOP PURCHASE   12361   12361   MAR2017   MAR 2017 NUTRITION EDUCATION   4143   4143   MAY 2017   MAY/JUNE 2017 112.5,112.52,112.55,403.01   6447   6447   JUNE2017   JUNE 2017 403.01 RECREATION   21507   21507   JUN2017   JUNE 2017 403.01 RECREATION   21507   JUNE2017   JUNE 2017 403.01 RECREATION   5008   MAY2017   MAY 2017 GUARDIANSHIP SERVICES   2569   2569   MAY2017   MAY 2017 GUARDIANSHIP SERVICES   17694   7694   MAY2017   MAY 2017 PCW SERVICES 176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   MAY 2017 PCW SERVICES   7694   7694   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY 2017 PCW SERVICES   176   HRS   16594   JUNE2017   JUNE 2017 403.01 RECREATION   3000   MAY2017   MAY2 |

Batch Total:

\$17,858.89 \*\*\*\* ==========

## Submitted By: **VOUCHER** alaluzerne 06.21.2017 2017 STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Please Assign New#) One Time Vendor (Please Assign New#) VENDOR# VENDOR NAME: Door County Dept of Human Services Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: \_\_ 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Invoice Total Description Fund Dept Sub Account Date Invoice Number Amount Dept Number Detail SUBMITTED FOR PAYMENT, BATCH 62117MX various - as attached \$1,327.19 JUNE 2017 - 2nd Batch Processing 240 47

1,327.19

VOUCHER TOTAL

Page 1 DC404RSUM

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*\*

G/L DATE: 06/2017

Batch Nbr:62117MX

| Vendor Name                    | Vendor<br>No. | Invoice #     | Invoice Description                     | Amount |
|--------------------------------|---------------|---------------|-----------------------------------------|--------|
| JODI ALSTEEN                   | 6222          | 6222 MAY2017  | MAY 2017 EMP MILEAGE REIM 37 MI         | 19.80  |
| CELLCOM WISCONSIN RSA 10       | 4818          | 4818 JUN2017  | JUNE 2017 CCS/WHEAP/HS CELL PHONES      | 658.71 |
| LANGUAGE LINE SERVICES         | 14606         | 14606 MAY2017 | MAY 2017 HS INTERPRETER SERVICES 281 MI | 203.96 |
| NAOMI SPRITKA                  | 18398         | 18398 MAY2017 | MAY 2017 EMP MILEAGE REIM 287 MI        | 153.55 |
| JEAN SEVERSON                  | 28575         | 28575 JUN2017 | JUNE 2017 EMP MILEAGE REIM 94 MI        | 50.29  |
| STAPLES ADVANTAGE              | 15069         | 15069 JUN2017 | JUNE 2017 HS OFFICE SUPPLIES            | 109.19 |
| TANYA KAVICKY-MELS             | 21550         | 21550 JUN2017 | JUNE 2017 EMP MILEAGE REIM 8 MI         | 4.28   |
| UNITEDHEALTH GROUP RECOVERY SE | 17798         | 17798 JUN2017 | 2016 OVERPAYMENT NF, JK, RM             | 85.92  |
| UW GREEN BAY                   | 11832         | 11832 APR2017 | APRIL 2017 YOUTH DIVERSION MEETING      | 10.00  |
| WISCONSIN MEDIA                | 13278         | 13278 MAY2017 | MAY 2017 HS PUBLIC MEETING NOTICE AD    | 31.49  |

Batch Total: \$1,327.19

|                                                                                          |                                                               |             |                   | VOU                    | CHER                                                                     |                                |              |                                                | Submi                          | itted By:                      |  |
|------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------|-------------------|------------------------|--------------------------------------------------------------------------|--------------------------------|--------------|------------------------------------------------|--------------------------------|--------------------------------|--|
|                                                                                          | •                                                             |             | STA               | TATE OF WISCONSIN 2017 |                                                                          |                                |              |                                                | alaluzerne 06.22.2017          |                                |  |
| Door County                                                                              |                                                               |             |                   |                        |                                                                          |                                |              | Appro                                          | oved by:                       | Department Head:               |  |
|                                                                                          |                                                               |             |                   |                        | N                                                                        | ew Vendor (Piease Assign New#) |              |                                                |                                | 111                            |  |
| VENE                                                                                     | OR#                                                           |             |                   |                        | One Time Vendor (Please Assign New#)  Door County Dept of Human Services |                                |              |                                                | Approved by: Committee Chair / |                                |  |
|                                                                                          | v                                                             | ENDOR       | NAME: _           | Door C                 |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          | VEND                                                          | OR ADDI     | RESS:             | c/o De                 | Dept Human Services County Administrator                                 |                                |              |                                                |                                |                                |  |
|                                                                                          | VEND                                                          | OR ADDR     | RESS:             | MONT                   | THLY MEETING VOUCHERS                                                    |                                |              |                                                |                                |                                |  |
|                                                                                          |                                                               |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          | VENDOR ADDRESS: 421 Nebraska Street  Added to Voucher Listing |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          |                                                               | Пть         | is Area to b      | e Complet              | ed by Finance Department                                                 | Π                              |              | <b>⇒</b>                                       | Vou                            | cher Listing Signed / Approved |  |
| This Area to be Completed by Finance Department  Meeting Date  Hold For Approval / Docum |                                                               |             |                   |                        |                                                                          |                                |              | Dat <u>e</u><br>d For Approval / Documentation |                                |                                |  |
| CH                                                                                       | CHECK#                                                        |             |                   |                        |                                                                          |                                |              |                                                | Invoice                        | After Processing  Vendor       |  |
| Fund                                                                                     | Dept                                                          | Sub<br>Dept | Account<br>Number | Detail                 | Desc                                                                     | ription                        | @<br>Cost/Ea | Total<br>Amount                                | Date                           | Invoice Number                 |  |
|                                                                                          |                                                               |             |                   |                        | SUBMITTED FOR PAYM<br>JUNE 2017 - 2nd Batch                              | MENT, BATCH 62117CP            |              | \$1,763.45                                     |                                | various - as attached          |  |
| 240                                                                                      | 47                                                            |             | ļ                 |                        | JUNE 2017 - 2110 Batch                                                   | Frocessing                     | 1            |                                                |                                |                                |  |
| <u></u> -                                                                                |                                                               |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          |                                                               |             | ļ                 |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          | 1                                                             |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          | <del> </del>                                                  |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
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|                                                                                          | · .                                                           |             |                   |                        |                                                                          |                                |              |                                                | <del> </del>                   |                                |  |
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|                                                                                          |                                                               |             |                   |                        |                                                                          |                                | 1            |                                                |                                |                                |  |
|                                                                                          |                                                               |             |                   |                        |                                                                          |                                |              | ····· · · · · · · · · · · · · · · · ·          |                                |                                |  |
|                                                                                          |                                                               |             | <u> </u>          |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          |                                                               |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
|                                                                                          |                                                               |             |                   |                        |                                                                          |                                |              |                                                |                                |                                |  |
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|                                                                                          | <del> </del>                                                  |             | -                 |                        |                                                                          |                                |              |                                                |                                |                                |  |

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VOUCHER TOTAL

\$ 1,763.45

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

| Dept Human Services DEPARTMENT |                | *** SUMMARY   | FOR COMMITTEE REVIEW                  | O N L Y *** |  |
|--------------------------------|----------------|---------------|---------------------------------------|-------------|--|
| G/L DATE: 06/2017 Bat          | ch Nbr:62117CP |               |                                       |             |  |
| Vendor Name                    | Vendor<br>No.  | Invoice #     | Invoice Description                   | Amount      |  |
| JUSTICEPOINT, INC              | 21360          | 21360 MAY2017 | MAY 2017 ELECTRONIC MONITOR 31 DAYS   | 153.45      |  |
| RMR SERVICES, TRANSLATING      | & 8409         | 8409 MAY2017  | MAY 2017 INTERPRETING SERVICES        | 35.00       |  |
| SHEBOYGAN COUNTY TREASURER     | 29071          | 29071 MAY2017 | MAY 2017 JUV DETENTION                | 1,045.00    |  |
|                                | 242            | 242 JUN2017   | JUNE 2017 RESPITE 6/1-6/4 & 6/16-6/29 | 480.00      |  |
| UW-MADISON                     | 19282          | 19282 MAY2017 | MAY 2017 EMP TRAINING                 | 50.00       |  |

Batch Total:

\$1,763.45 \*\*\*\*

| VOUCHER                                         |                          |         |                   |                          |                                                                       |              |                 | Submitted By:                 |                                                    |  |  |
|-------------------------------------------------|--------------------------|---------|-------------------|--------------------------|-----------------------------------------------------------------------|--------------|-----------------|-------------------------------|----------------------------------------------------|--|--|
| STATE OF WISCONSIN 2017                         |                          |         |                   |                          |                                                                       |              |                 | alaluzerne 06.21.2017         |                                                    |  |  |
| Door County                                     |                          |         |                   |                          |                                                                       |              |                 | Approved by: Department Head: |                                                    |  |  |
|                                                 |                          |         |                   |                          | N ew Vendor (Please Assign New #)                                     |              |                 | 7                             |                                                    |  |  |
| VENDOR# One Time Vendor (Please Assign New#)    |                          |         |                   |                          |                                                                       |              |                 | Trotal                        |                                                    |  |  |
|                                                 | ٧                        | ENDOR I | NAME:             | Door (                   | Door County Dept of Human Services                                    |              |                 |                               | d by: Committee Chair /                            |  |  |
|                                                 | VEND                     | OR ADDF | RESS:             | c/o Dept Human Services  |                                                                       |              |                 | County A                      | dministrator                                       |  |  |
|                                                 | VENDO                    | OR ADDR | ESS: _            | MONTHLY MEETING VOUCHERS |                                                                       |              |                 |                               |                                                    |  |  |
| vendor address: 421 Nebraska Street             |                          |         |                   |                          |                                                                       |              |                 | ·                             |                                                    |  |  |
|                                                 | Added to Voucher Listing |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
| Inis Area to be Completed by Finance Department |                          |         |                   |                          |                                                                       |              |                 | _                             | cher Listing Signed / Approved  Date               |  |  |
|                                                 | ECK#_                    |         |                   |                          | <u> </u>                                                              |              |                 |                               | d For Approval / Documentation<br>After Processing |  |  |
| Fund                                            | Dept                     |         | Account<br>Number | Detail                   | . Description                                                         | @<br>Cost/Ea | Total<br>Amount | Invoice<br>Date               | Vendor<br>Invoice Number                           |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
| 240                                             | 47                       |         |                   |                          | SUBMITTED FOR PAYMENT, BATCH 62117CC JUNE 2017 - 2nd Batch Processing |              | \$14,340.00     |                               | various - as attached                              |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          | la to                                                                 |              |                 |                               |                                                    |  |  |
| ***                                             |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 | <u> </u>                      |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
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|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 |                               |                                                    |  |  |
|                                                 |                          |         |                   |                          |                                                                       |              |                 | <b></b>                       |                                                    |  |  |
| I                                               | 1                        |         |                   | 1                        | l l                                                                   | 1            |                 | 1                             | 1                                                  |  |  |

\$ 14,340.00

VOUCHER TOTAL

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

Page 1 DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*\*

G/L DATE: 06/2017

Batch Nbr:62117CC

| Vendor Name                    | Vendor<br>No. | Invoice #     | Invoice Description   | Amount   |
|--------------------------------|---------------|---------------|-----------------------|----------|
| BOYS & GIRLS CLUB OF DOOR CNTY | 2571          | 2571 052017   | MAY 2017 CCS SERVICES | 1,111.80 |
| PHOENIX BEHAVIORAL HEALTH SVC  | 17442         | 17442 MAY2017 | MAY 2017 CCS SERVICES | 7,854.00 |
| SPECIALIZED SERVICES LLC       | 7694          | 7694 MAY2017  | MAY 2017 CCS SERVICES | 5,374.20 |

Batch Total:

\$14,340.00 \*\*\*\*

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#### Submitted By: **VOUCHER** alaluzerne 06.21.2017 2017 STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Please Assign New #) One Time Vendor (Please Assign New#) VENDOR# Door County Dept of Human Services VENDOR NAME: Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: 421 Nebraska Street VENDOR ADDRESS: \_ Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Vendor Total Invoice 0 Description Invoice Number Date Fund Dept Account Amount Cost/Ea Number Detail SUBMITTED FOR PAYMENT, BATCH 62117BH various - as attached \$7,401.25 JUNE 2017 - 2nd Batch Processing 240 47

\$ 7,401.25

VOUCHER TOTAL

**VOUCHER TOTAL** 

\* S U M M A R Y \* SCHEDULE OF VOUCHERS

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

Dept Human Services
DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*\*

G/L DATE: 06/2017

Batch Nbr:62117BH

| Vendor Name                    | Vendor<br>No. | Invoice #     | Invoice Description                | Amount   |
|--------------------------------|---------------|---------------|------------------------------------|----------|
| BROWN CO COMUNITY TREATMNT CNT | 16015         | 16015 JUN2017 | APRIL/MAY 2017 INPATIENT CARE      | 754.00   |
| FAMILY SERVICES                | 3841          | 3841 MAY2017  | MAY 2017 CRISIS CENTER             | 1,167.00 |
| HIRN MENTAL HEALTH COUNSELING  | 17401         | 17401 MAY2017 | MAY/JUNE 2017 AODA/WASH ISL OUTPAT | 2,130.00 |
| OPTIONS LAB, INC               | 17788         | 17788 MAY2017 | MAY 2017 AODA/IDP/YA DRUG SCREENS  | 144.00   |
| MICHAEL P SAYERS PHD           | 8169          | 8169 MAY2017  | MAY 2017 PSYCH SERVICES 45 HRS     | 3,206.25 |

Batch Total:

\$7,401.25

### Submitted By: VOUCHER alaluzerne 06.21.2017 2017 STATE OF WISCONSIN Approved by: Department Head: **Door County** New Vendor (Please Assign New#) One Time Vendor (Please Assign New#) VENDOR# VENDOR NAME: Door County Dept of Human Services Approved by: Committee Chair I County Administrator `c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: \_ 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation After Processing CHECK# Vendor Invoice Total @ Cost/Ea Description Invoice Number Date Dept Account Amount Fund Number Detail SUBMITTED FOR PAYMENT, BATCH 62117CS various - as attached \$1,485.38 JUNE 2017 - 2nd Batch Processing 240 47

1,485.38

**VOUCHER TOTAL** 

**VOUCHER TOTAL** 

Page 1 DC404RSUM

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COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

MEETING DATE

| Dept Human Services<br>DEPARTMENT |                   | *** SUMMARY   | FOR COMMITTEE REVIEW                  | O N L Y ***     |
|-----------------------------------|-------------------|---------------|---------------------------------------|-----------------|
| G/L DATE: 06/2017                 | Batch Nbr:62117CS |               |                                       |                 |
| Vendor Name                       | Vendor<br>No.     | Invoice #     | Invoice Description                   | Amount          |
| LAKESHORE CAP, INC.               | 17200             | 17200 MAY2017 | MAY 2017 CSP TECH/PEER SPECIALIST     | 430.35          |
| SHERRY PESCH                      | 3394              | 3394 MAY2017  | MAY 2017 REP PAYEE BK SERVICES 50 HRS | 1,050.00        |
| STREUS PHARMACY INC               | 9617              | 9617 MAY2017  | MAY 2017 MEDICAL SUPPLIES             | 5.03            |
| DIKIOD ZIZZZZZZ                   |                   |               | Batch Total:                          | \$1,485.38 **** |

### Submitted By: **VOUCHER** 2017 rmark STATE OF WISCONSIN **Door County** Approved by: Department Head: New Vendor (Piease Assign New #) One Time Vendor (Please Assign New#) **VENDOR#** Door County Dept of Human Services VENDOR NAME: Approved by: Committee Chair / County Administrator c/o Dept Human Services VENDOR ADDRESS: MONTHLY MEETING VOUCHERS VENDOR ADDRESS: 421 Nebraska Street VENDOR ADDRESS: Added to Voucher Listing Voucher Listing Signed / Approved This Area to be Completed by Finance Department Meeting Date PAID BY Hold For Approval / Documentation CHECK# After Processing Vendor Invoice Description @ Total Fund Dept Sub Account Invoice Number Date Amount Number Detail Cost/Ea Dept SUBMITTED FOR PAYMENT, BATCH #259337 - 2017 Human Services various - as attached \$ 64,406.62 23 vouchers to date. June processing 204 **VOUCHER TOTAL** \$ 64,406.62

**VOUCHER TOTAL** 

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

### \* SUMMARY \* SCHEDULE OF VOUCHERS

ADRCISEC, 1st batch, JUNE 2017

MEETING DATE

HS Resource Center

DEPARTMENT \*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*

| G/         | L DA | ATE: | 06/ | /2017 | В |
|------------|------|------|-----|-------|---|
| $\cup$ / . | -    | ***  | ~~/ | 2011  |   |

Batch Nbr: 259337

| Vendor Name                    | Vendor |               | Toursday Downst 11                |           |
|--------------------------------|--------|---------------|-----------------------------------|-----------|
| Vendor Name                    | No.    | Invoice #     | Invoice Description               | Amount    |
|                                | 18248  | 18248 MAY2017 | 49.80 MAY MOW MILEAGE REIMB       | 26.65     |
| ABBY VANS INC                  | 16735  | 16735 18664   | APR D2D TAXI                      | 49,670.06 |
| ADVOCATES-INDEPENDENT LIVINGII | 13325  | INV 2919 ADRC | SHC-18 HRS-HL                     | 356.22    |
| BROTHERS DAIRY                 | 257    | 257 MAY2017   | RAW FOOD                          | 726.10    |
| CHRISTINE ANDERSEN             | 19077  | 19077 JUN2017 | JUN CAREGIVER SUPPORT             | 37.50     |
| CARMEN SCHROEDER               | 18153  | 18153 MAY2017 | MAY NEWSLETTER                    | 255.00    |
|                                | 19268  | 19268 MAY2017 | 26 MAY MOW MILEAGE REIMB          | 13.91     |
| NELVIE CAULDWELL               | 4168   | 4168 MAY2017  | 24.20 MAY EMPLY MILEAGE REIMB     | 12.98     |
| OOOR-TRAN                      | 16496  | 16496 385 SRC | MAY STAFF HOURS                   | 750.00    |
| CONO FOODS                     | 9674   | 9674 MAY2017  | RAW FOOD                          | 941.46    |
|                                | 17474  | 17474 MAY2017 | 25 MAY MOW MILEAGE REIMB          | 13.40     |
|                                | 19080  | 19080 MAY2017 | 31 MAY MOW MILEAGE REIMB          | 16.59     |
| GORDON FOOD SERVICE, INC       | 22145  | 22145 MAY2017 | MAY RAW FOOD/NUTRITIONAL SUPPLIES | 6,277.46  |
|                                | 17282  | 17282 MAY2017 | 85.30 MAY MOW MILEAGE REIMB       | 45.63     |
|                                | 5354   | 5354 MAY2017  | 24 MAY MOW MILEAGE REIMB          | 12.84     |
| JENNIFER BENDER                | 20934  | 20934 MAY2017 | 89 MAY EMPLY MILEAGE REIMB        | 47.62     |
| JENNIFER FITZGERALD            | 21883  | 21883 MAY2017 | EMPLY REIMB FOR ACTIVITIES        | 4.00      |
| JESSICA HOLLAND                | 19650  | 19650 MAY2017 | 194 MAY EMPLY MILEAGE REIMB       | 133.07    |
|                                | 18116  | 18116 MAY2017 | 44.20 MAY MOW MILEAGE REIMB       | 23.64     |
| JAMIE STEPHAN                  | 17906  | 17906 MAY2017 | 650 MAY MEALSITE MILEAGE REIMB    | 347.76    |
|                                | 19378  | 19378 APRMAY  | 72.30 APR/MAY MOW MILEAGE REIMB   | 38.66     |
| JANDRIN REFRIGERATION          | 22278  | 22278 093354  | SRC COOLER REPAIR                 | 999.00    |
|                                |        |               |                                   | 222.0     |

Page

Batch Nbr: 259337

| Vendor Name                     | Vendor<br>No. | Invoice #     | Invoice Description            | Amount |
|---------------------------------|---------------|---------------|--------------------------------|--------|
| KATHLEEN ASH                    | 19673         | 19673 MAY2017 | 9.10 MAY EMPLY MILEAGE REIMB   | 4.87   |
|                                 | 7092          | 7092 MAY2017  | 61 MAY MOW MILEAGE REIMB       | 32.64  |
| LISA VANALSTINE                 | 20119         | 20119 MAY2017 | 213 MAY EMPLY MILEAGE REIMB    | 113.99 |
| TOWN OF LIBERTY GROVE           | 33170         | 33170 MAY2017 | MAY MEALSITE 13 DAYS @ \$9/DAY | 117.00 |
| MANNS STORE                     | 18770         | 18770 MAY2017 | MAY RAW FOOD                   | 633.74 |
| MEAT PROCESSORS INC             | 6544          | 6544 MAY2017  | RAW FOOD                       | 255.95 |
| ROBIN MARK                      | 20044         | 20044 MAY2017 | 79.80 MAY EMPLY MILEAGE REIMB  | 42.69  |
|                                 | 21501         | 21501 MAY2017 | MAY MEALSITE 7 DAYS @ \$8/DAY  | 56.00  |
| S & R TRUCK CENTER              | 694           | 17490 SRCVAN  | A/C REPAIR SRC VAN             | 339.92 |
| STEVEN W SCHULTZ                | 20863         | 20863 JUN2017 | JUN ENTERTAINIMENT-SRC         | 130.00 |
|                                 | 14091         | 14091 MAY2017 | 601 MAY MEALSITE MILEAGE REIMB | 321.54 |
| GOOD SAMARITAN, SCANDIA VILLAGE | 27395         | 27395 MAY2017 | MAY MEALS                      | 440.00 |
| STAPLES ADVANTAGE               | 15069         | 15069 MAY2017 | ADRC/SRC OFFICE SUPPLIES       | 153.59 |
| TIP TOP CLEANERS                | 10942         | 796387 MAYSRC | MAY LAUNDRY/KITCHEN            | 111.75 |
| WARNER-WEXEL WHOLESALE & POOL   | 36120         | 36120 MAY2017 | NUTRITIONAL SUPPLIES           | 432.33 |
| TOWN OF WASHINGTON              | 33570         | 33570 MAY2017 | MAY MEALSITE-11 DAYS @ \$8/DAY | 88.00  |
| WDOR AM & F'M                   | 129           | 129 25410 SRC | MAY ADVERT-SRC                 | 162.00 |
| WISCONSIN DOCUMENT IMAGING      | 5999          | 98782A-APS    | APS/HS PRINTER                 | 83.26  |
| WISCONSIN PUBLIC SERVICE        | 11363         | 11363 MAY SRC | MAY UTILITIES-SRC              | 101.05 |
| WIL KIL PEST CONTROL            | 6359          | 6359 MAY2017  | MAY PEST CONTROL-SRC           | 36.75  |

Batch Total: \$64,406.62 \*\*\*\*

\_\_\_\_\_

| VOUCHER  STATE OF WISCONSIN Door County  N ew Vendor (Please Assign New #) One Time Vendor (Please Assign New #) VENDOR NAME: Door County Dept of Human Services  VENDOR ADDRESS: C/o Dept Human Services  VENDOR ADDRESS: MONTHLY MEETING VOUCHERS  VENDOR ADDRESS: 421 Nebraska Street  Submitted By:  mark  Approved by: Department Head:  Approved by: Committee Chair / County Administrator |       |             |                   |        |                                                                                              |              |            | by: Committee Chair / ministrator |                 |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-------------|-------------------|--------|----------------------------------------------------------------------------------------------|--------------|------------|-----------------------------------|-----------------|---------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                                                   | ID BY | ∏ Th        |                   |        | ted by Finance Department                                                                    |              |            |                                   | Meeting Date    | Listing Signed / Approved  Approval / Documentation  ter Processing |
| Fund                                                                                                                                                                                                                                                                                                                                                                                              | Dept  | Sub<br>Dept | Account<br>Number | Detail | Description                                                                                  | @<br>Cost/Ea | Tot<br>Amo |                                   | Invoice<br>Date | Vendor<br>Invoice Number                                            |
| 204                                                                                                                                                                                                                                                                                                                                                                                               | 23    |             |                   |        | SUBMITTED FOR PAYMENT, BATCH #259370 - 2017 Human Services vouchers to date. June processing |              | \$ 54,0    | 075.69                            |                 | various - as attached                                               |
|                                                                                                                                                                                                                                                                                                                                                                                                   |       | /OUCHE      | R TOTA            | <br>L  |                                                                                              |              | \$ 54,07   | 75.69                             | 4               | VOUCHER TOTAL                                                       |

Page 1 DC404RSUM

COUNTY OF DOOR STATE OF WISCONSIN STURGEON BAY, WI

### \* S U M M A R Y \* SCHEDULE OF VOUCHERS

ADRC/SRC, 2nd batch, Jone, 2017

MEETING DATE

HS Resource Center DEPARTMENT

\*\*\* SUMMARY FOR COMMITTEE REVIEW ONLY \*\*\*

G/L DATE: 06/2017

Batch Nbr: 259370

| Vendor Name                   | Vendor<br>No. | Invoice #     | Invoice Description                 | Amount    |
|-------------------------------|---------------|---------------|-------------------------------------|-----------|
|                               | 18248         | 18248 JUN2017 | 24.5 JUN MOW MILEAGE REIMB          | 13.11     |
| ANNA ZAHORIK                  | 20950         | 20950 MAY2017 | 101 MAY EMPLY MILEAGE REIMB         | 54.04     |
| ABBY VANS INC                 | 16735         | 16735 MAY2017 | MAY D2D TAXI                        | 51,985.52 |
| ADVANCED DISPOSAL SERVICES    | 18928         | 18928 MAY2017 | MAY DISPOSAL SVCS-SRC               | 200.67    |
| BAY HOMETOWN PHARMACY LLC     | 21036         | 21036 JUN2017 | MED PYMT-KP                         | 210.75    |
| BIRCH CREEK MUSIC PERFORMANCE | 22275         | 22275 MAY2017 | JULY ENTERTAINMENT                  | 200.00    |
| CELLCOM WISCONSIN RSA 10      | 4818          | 4818 JUL2017  | ADRC/SRC CELL CHARGES (06/06-07/05) | 202.01    |
| STURGEON BAY UTILITIES        | 30820         | 30820 JUN2017 | JUN UTILITIES-SRC                   | 800.36    |
| SUNSHINE HOUSE INC            | 31820         | 31820 MAYJUN  | RSP-WT                              | 367.50    |
| ARNE THOMPSON                 | 13154         | 13154 JUN2017 | 78 EMPLY MILEAGE REIMB              | 41.73     |

Batch Total:

\$54,075.69 \*\*\*

46

#### Resolution 2017-05-74

| Dist | Supervisor    | Υ  | N    | Abs |
|------|---------------|----|------|-----|
| 19   | Allen         | х  |      |     |
| 10   | Baughan       | х  |      |     |
| 1    | Bialecki      | Х  |      |     |
| 11   | Breitenmoser  | Х  | 0.11 |     |
| 13   | Crosby        | Х  |      |     |
| 12   | Gilk          | Х  |      |     |
| 14   | Hafeman       |    |      |     |
| 8    | Heller        | Х  |      |     |
| 17   | Koth          | Х  |      |     |
| 15   | Lee           | Х  |      |     |
| 16   | Loka          | Х  | 138  |     |
| 3    | Mueller       | Х  |      |     |
| 4    |               |    |      |     |
| 21   | Pike          | Х  |      |     |
| 22   | Reichelt      | X  |      |     |
| 7    | Rusch         | Х  |      |     |
| 5    | Saal          | Х  |      |     |
| 20   | Vander Sanden | Х  |      | _   |
| 18   | Voermans      | Х  |      |     |
| 2    | Weaver        | Х  |      | _   |
| 6    | Woller        | Х  |      |     |
| 9    | Zeitz         |    | X    | _   |
|      | Totals        | 19 | 1    |     |
|      | Carried       |    |      |     |
|      | Defeated      |    |      |     |
|      | Amended       |    |      |     |

STATE OF WISCONSIN )
) SS:
COUNTY OF LINCOLN )

I hereby certify that this resolution/ordinance is a true and correct copy of a resolution/ordinance adopted by Lincoln County Board of Supervisors on:

May 16, 2017

Roll call

Christopher J. Marlowe County Clerk

#### REQUEST FOR STAFF LEGISLATURE TO INCREASE NURSING HOME MEDICAID FUNDING

WHEREAS, approximately 65% of nursing home residents in Wisconsin are Medicaid recipients,

WHEREAS, there is an overall Medicaid deficit of \$331.8 million between the costs incurred by Wisconsin nursing homes to provide services and what they actually receive in payment for those services,

WHEREAS, the average nursing home in Wisconsin loses \$55.89 each day for each Medicaid resident cared for,

WHEREAS, after the Supplemental Payment funding Pine Crest Nursing Home lost \$51.62 per day for each Medicaid resident for total loss of \$2,333,275 in fiscal year 2016.

WHEREAS, Wisconsin nursing homes and assisted living facilities are in major workforce crisis with one out of every seven positions vacant,

WHEREAS, the large number of Medicaid residents our facility serves makes it tremendously difficult to compete in the current tight labor market,

WHEREAS, there is a direct correlation between quality staffing and quality care,

NOW, THEREFORE BE IT RESOLVED, that Lincoln County Board of Supervisors urges Governor Scott Walker and the Wisconsin Legislature to provide sufficient Medicaid funding for nursing homes and assisted living facilities in the 2017-2019 state budget to help address the Medicaid deficit so these facilities have the financial resources available to compete for caregiver staff to ensure continued quality care to our residents and tenants,

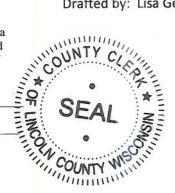
BE IT FURTHER RESOLVED, that a copy of this resolution to be forwarded by the Lincoln County Clerk to the Wisconsin Counties Association, all Lincoln County State Representatives and Senators, the State Joint Finance Committee and Governor Scott Walker.

Dated: 05/16/2017

Introduced by: Pine Crest Board of Trustees

Date Passed: 5/15/2017 Committee Vote: All Ayes
Fiscal Impact: Increased Funding for Pine Crest Nursing Home

Drafted by: Lisa Gervais RN, BSN, NHA



|                      | Resolution 2017-0   | 5-74 Ame | endmei | nt 1      | 100          |
|----------------------|---------------------|----------|--------|-----------|--------------|
| Motion by:           | Gilk                |          |        |           |              |
|                      | D                   |          |        |           |              |
| Second by:           | Baughan             |          |        |           | P 00 110 000 |
|                      | strike "Staff" from |          |        |           |              |
| Resolved pa          | aragraph include "t |          | consin | Counites' | atter        |
|                      |                     | iation.  |        | A ! 4 - ! | A la 4       |
| District:            | Supervisor          | Yes      | No     | Abstain   | Absent       |
|                      | Allen               |          |        |           |              |
|                      | Baughan             |          |        |           |              |
|                      | Bialecki            |          |        |           |              |
|                      | Breitenmoser        |          |        |           |              |
|                      | Crosby              |          |        |           |              |
|                      | Gilk                |          |        |           |              |
|                      | Hafeman             |          |        |           |              |
|                      | Heller              |          |        |           |              |
|                      | Koth                |          |        |           |              |
|                      | Lee                 |          |        |           |              |
|                      | Loka                |          |        |           |              |
| 3                    | Mueller             |          |        |           |              |
| 4                    |                     |          |        |           |              |
|                      | Pike                |          |        |           |              |
|                      | Reichelt            |          |        |           |              |
|                      | Rusch               |          |        |           |              |
|                      | Saal                |          |        |           |              |
| 20                   | Vander Sanden       |          |        |           |              |
| 18                   | Voermans            |          |        |           |              |
| 2                    | Weaver              |          |        |           |              |
| 6                    | Woller              |          |        |           |              |
| 9                    | Zeitz               |          |        |           |              |
|                      | Totals              |          |        |           |              |
| ſ                    | Carried             |          |        |           |              |
|                      | Defeated            |          |        |           |              |
| a                    | Amended             |          |        |           |              |
| Voice Vote           |                     |          |        |           |              |
| Voice Vote Roll Call |                     |          |        |           |              |

June 12, 2017

Joe Krebsbach, Director Door County Department of Human Services 421 Nebraska Street Sturgeon Bay, WI 54235

Dear Mr. Krebsbach,

This letter is written to provide formal notice of my resignation from my position as an Adult Protective Services Social Worker. I have accepted an offer from Door County Medical Center to join their team as a Social Worker – Care Navigator. My last day of employment will be July 13<sup>th</sup>.

It has been a privilege to work for the County of Door over the past 15 years. In that time, I have learned a great deal and was lucky enough to work with many amazingly skilled and dedicated colleagues. I hope, too, that I have made a positive impact on behalf of my clients, the agency and our community.

Thank you for the opportunity to be a part of this organization. I wish you all the best as you continue to fulfill its mission.

Sincerely,

Erin M. Szakala, MSW

Request to Refill Position

Must follow the process in the Administrative Manual, Section 2.04 – Creation and Classification of Positions.

| Position Status:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | DEPT. HEAD TO COM                   | PLETE:                    |                        |                      |                     |                       |                 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|---------------------------|------------------------|----------------------|---------------------|-----------------------|-----------------|
| Reason for Vacancy: Separation Transfer Retirement Resignation Death    Reason for Vacancy: Separation Transfer Retirement Resignation Death   Discuss turnover with the department in the previous 18-24 months: Steady                                                                                                                                                                                                                                                                                                                                                                                                                      | Department Hum                      | an Services               | Po                     | sition Title: Socia  | l Work Case Manage  | r                     |                 |
| Reason for Vacancy: Separation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Position Status:                    | Currently vacant          | ⊠ Will be v            | vacant               | Date Vacant:        | 7-17-17               |                 |
| Discuss turnover with the department in the previous 18-24 months: Steady  Transfer: why is the new position more attractive to employee than current one?  Name of Current / Most Recent incumbent:                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                     | ☐ Part Time               | Limited Term           | Project              | Hours pe            | er week: 40           |                 |
| Transfer: why is the new position more altractive to employee than current one?  Name of Current / Most Recent Incumbent:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Reason for Vacancy:                 | Separation                | Transfer F             | Retirement           | Resignation         | ☐ Death               |                 |
| Name of Current / Most Recent Incumbent: Erin Szakala  Is office space, furniture, and office equipment available?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Discuss turnover with the           | ie department in the pr   | evious 18-24 months:   | Steady               |                     |                       |                 |
| Is office space, furniture, and office equipment available?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Transfer: why is the ne             | w position more attract   | ive to employee than c | urrent one?          |                     |                       |                 |
| If not, explain plan to obtain:    Reviewed, updated, and submitted to Human Resources:   Job Analysis Questionnaire   Job Description   Completed by: Joe Krebsbach   Date 7-29-17                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Name of Current / Most              | Recent Incumbent:         | Erin Szakala           |                      |                     |                       |                 |
| Reviewed, updated, and submitted to Human Resources:    Job Analysis Questionnaire   Job Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Is office space, furniture          | e, and office equipment   | available?             | ∑ Yes □              | No                  |                       |                 |
| Job Analysis Questionnaire   Job Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | If not, explain plan to ob          | otain:                    |                        |                      |                     |                       |                 |
| Financial Information:  Salary Range: H\$22.56 - \$29.65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Job Analysis Qu                     | uestionnaire              | Resources:             |                      |                     |                       |                 |
| Salary Range: H\$22.56 - \$29.65                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Completed by: Joe K                 | rebsbach                  |                        |                      | Date <u>7-29-17</u> |                       | -               |
| Human Resources has performed a position review?   Human Resources has performed a position review?   Human Resources has performed a position review?   HR initial)                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Salary Range: H \$2 Funding Source: | Levy %                    | Grant Funded % _       | Oth                  | •                   |                       | %               |
| Human Resources has performed a position review?   Human Resources has performed a position review?   Human Resources has performed a position review?   HR initial)                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | UD TO COMPLETE                      |                           |                        |                      |                     |                       |                 |
| Approvals:  County Administrator  Oversight Committee Chair  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.  Administrative Committee Chair  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate Date  Administrative Committee Chair  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04. | $\Gamma$                            | al estron                 | a P                    | El CA Status         | EVEMI               | 1                     |                 |
| The Job Analysis and Job Description have both been updated and signed?    Approvals:   County Administrator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     | equirces has performed    | a nosition review?     | LISA Status_         | (HR initial)        |                       |                 |
| Approvals:  County Administrator  Date  Oversight Committee Chair  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.  I want to participate  I do not wish to participate  Administrative Committee Chair  Date  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.                                                                                                                    |                                     | ·                         |                        | odated and signed    | 141                 | (HP initial)          |                 |
| County Administrator                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | The Job All                         |                           | lion have both been up |                      | 11: 440             | (Fire initial)        |                 |
| Oversight Committee Chair Date  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.  I want to participate                                                                                                                                                                                                                                                                                                                                                                                                          | Approvals:                          |                           |                        |                      |                     |                       |                 |
| <ul> <li>☐ I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.</li> <li>☐ I want to participate</li> <li>☐ I do not wish to participate</li> <li>☐ Administrative Committee Chair</li> <li>☐ Date</li> <li>☐ I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.</li> </ul>                                                                                                               | County Administra                   | ator                      |                        |                      | Date                |                       |                 |
| <ul> <li>☐ I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.</li> <li>☐ I want to participate</li> <li>☐ I do not wish to participate</li> <li>☐ Administrative Committee Chair</li> <li>☐ Date</li> <li>☐ I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.</li> </ul>                                                                                                               |                                     |                           |                        |                      |                     |                       |                 |
| participate per Admin. Manual section 2.04.  I want to participate  I do not wish to participate  Administrative Committee Chair Date  I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.                                                                                                                                                                                                                                                                                                                          |                                     |                           |                        |                      |                     |                       |                 |
| Administrative Committee Chair Date Date I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                           |                        | ig joi ward (postiii | gradvertisemenvsele | CHOIT IOI IIILGI VICW | 370ffer and may |
| I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ☐ I want to par                     | ticipate                  | I do not wish to p     | articipate           |                     |                       |                 |
| I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Administrative Co.                  | mmittae Chair             |                        |                      | Data                |                       |                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | I am aware a                        | and approve of the refill |                        | ng forward (postin   |                     | ction for interviews  | s/offer and may |
| l l                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                           |                        | articipate           |                     |                       |                 |

## County of Door Adult Case Manager

| Job Title  | Adult Case Manager | Last Revision         | 7-3-17                     |
|------------|--------------------|-----------------------|----------------------------|
| Department | Human Services     | HR Reviewed           |                            |
| Division   | Behavioral Health  | <b>Employee Group</b> | General Municipal Employee |
| Report To  | TBD                | FLSA Status           | Exempt                     |
| Pay Grade  | Н                  | EEO Code              | 02 – Professionals         |

#### **General Summary**

Responsible for a wide range of Case management activities with adults who are affected by mental health, or alcohol/drug problems. The case worker will assist these individuals in remaining independent in the least restrictive environment as possible and to prevent or delay institutionalization. The primary focus will be adding support to individuals with the Adult Protective Service System.

#### Duties and Responsibilities Essential Job Functions

- 1. Provide outreach in the community to individuals identified as "at risk" and connect individual to agency and community resources to meet immediate and ongoing needs.
- 2. Conducts assessments to determine program eligibility, client needs and services available.
- 3. Develop comprehensive care plans.
- 4. Provide support, crisis intervention, assist in development of natural supports, and make necessary referrals for services.
- 5. Monitor client's day to day functioning, and effectiveness of services.
- 6. Works in partnership with the ADRC to address waiting list and potential candidates for long term care supports.
- 7. Provide outreach, short term case management, and community based services to those individuals who are outside the frame work of Adult Protective Services, coming out of the jail or those with long term care needs.
- 8. Complete all documentation as required by Department of Human Services/Behavioral Health Program, consistent with Targeted Case Management. To include: daily documentation of all face to face contacts, collateral contacts and updating treatment plans and crisis plans every 6 months.
- 9. Assist as necessary clients applying for Disability Benefits, Medicaid Applications and Reviews, Rental Assistance / Housing Authority, Energy Assistance, Payee Services, etc.
- 10. Provides coordination, including transportation as necessary, to ensure client attendance at clinical/medical appointments and other services necessary in the clients' case plans and/or for the client's well being.

#### General Job Functions

- 1. Monitors Commitments and WATTS Reviews as needed.
- 2. Provides after hours emergency "On-call" services on rotating basis with other clinical staff.
- 3. Performs other related duties as assigned by the Program Director which may involve CCS case facilitation.

# County of Door Adult Case Manager

#### Requirements

#### Training and Experience

- 1. Graduate of a certified college or university with a Bachelors Degree in Social Work or related field required. MSW degree preferred.
- 3. Complete State on-line training to be approved as screener for MH/AODA functional screen within six months.
- 4. Complete 40 hours of Crisis Services training to meet HFS 34 Crisis Orientation within 3 months of hire.
- 5. Current valid Wisconsin drivers license required and automobile in good working condition.

#### Knowledge, Skills and Abilities Required

- 1. Demonstrate knowledge of the principles and practice of targeted case management and case facilitation for qualified clients.
- 2. Working knowledge of Wisconsin Statutes, Chapters 54, 55, and 36.
- 3. Ability to work on a team, to effectively communicate in writing and verbally, and to maintain good working relationships within the unit and in the community.
- 4. Ability to organize and prepare reports in a timely fashion.
- 5. Ability to provide empathy and support to vulnerable populations and their families.
- 6. Ability to respect individual choice, a diversity of lifestyles, and the individual's right to self-determination.
- 7. Knowledge of individual medical information privacy, confidentiality, and security statutes, regulations, policies and procedures.

#### **Physical & Working Conditions**

Aproximatly 50% of time work is performed in a normal office setting with little or no discomfort from temperature, dust or noise. Interacting with other employees, general public, whether walking in or on the telephone may be encountered.

Only 50% of work is performed seated at a desk, working on a computer keyboard and/or telephone with about 10% of work performed standing and walking. Over 75% of the work is performed by talking, hearing, and using both far and near vision. Occasional lifting is required up to 10 lbs. (i.e. paper and equipment).

Client's residences may have varying degrees of limits and potential harm or injury to self. Driving vehicle at all times of the day in varying climates.

In an effort to provide for continuity of County government and to cope with the problems of the emergency, you may be required to work during a proclaimed state of emergency, consistent with Sec. 323.14, Wis. Stats. and County emergency management plans and programs.

The above is intended to describe the general content of the requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or requirements. They may be subject to change at any time due to reasonable accommodation or other reasons.

| Approvals:                                   |           |
|----------------------------------------------|-----------|
| and and a                                    | 7/5/2017  |
| Joseph A. Krebsbach, Human Services Director | /Date / / |
| Kelly Holy all                               | 7/5/17    |
| Kelly A. Hendee, Human Resources Director    | Date ' '  |

#### REQUEST FOR FISCAL IMPACT INFORMATION

|                                            |                                             | RECLASSIFICATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ON                      |                        |                                          | CHANGE FTE                | /Hours                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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|--------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------|------------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------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| , a                                        | FTE/Hours                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             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Disclaimer: This Fiscal Impact does not include Step 2 \$23.20, Step 3 \$23.85, Step 4 \$24.49, or Step 5 \$25.14.

This Fiscal Impact is an example illustration of what the costs would be for this position/position change. It is based on estimates and assumptions provided by the Human Resources Department and/or the department in which this position works. Because these estimates and assumptions may change, or may be different than the actual circumstances at the time that this position is filled or this position change takes place, there may be a difference between the costs projected in this Fiscal Impact and the actual costs.

M:\Budget County 2017\2017 Fiscal Impacts\2017 Fiscal Impact - Case Manager Behavioral Hith

Request to Refill Position

Must follow the process in the Administrative Manual, Section 2.04 – Creation and Classification of Positions.

AGISTANT

| DEPT. HEAD TO COMPLETE:                                                                                                                                                       |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| Department Human Services Position Title: Aging Manager with title change to ADRC Deputy Director                                                                             |  |  |  |  |  |  |  |
| Position Status:                                                                                                                                                              |  |  |  |  |  |  |  |
|                                                                                                                                                                               |  |  |  |  |  |  |  |
| Reason for Vacancy: Separation Transfer Retirement Death                                                                                                                      |  |  |  |  |  |  |  |
| Discuss turnover with the department in the previous 18-24 months: Steady                                                                                                     |  |  |  |  |  |  |  |
| Transfer: why is the new position more attractive to employee than current one? Promotion with increased responsibility and compensation                                      |  |  |  |  |  |  |  |
| Name of Current / Most Recent Incumbent: Jake Erickson                                                                                                                        |  |  |  |  |  |  |  |
| Is office space, furniture, and office equipment available?                                                                                                                   |  |  |  |  |  |  |  |
| If not, explain plan to obtain:                                                                                                                                               |  |  |  |  |  |  |  |
| Reviewed, updated, and submitted to Human Resources:  Job Analysis Questionnaire  Job Description                                                                             |  |  |  |  |  |  |  |
| Completed by: Joe Krebsbach Date 76-29-17                                                                                                                                     |  |  |  |  |  |  |  |
| Financial Information:                                                                                                                                                        |  |  |  |  |  |  |  |
| Salary Range: J \$26.22 -\$34.45                                                                                                                                              |  |  |  |  |  |  |  |
| Funding Source:  Levy % Grant Funded % Other %                                                                                                                                |  |  |  |  |  |  |  |
| Fiscal Impact, from Finance Department, completed and attached                                                                                                                |  |  |  |  |  |  |  |
|                                                                                                                                                                               |  |  |  |  |  |  |  |
| HR TO COMPLETE:                                                                                                                                                               |  |  |  |  |  |  |  |
| EEO protessional FLSA Status Exempt                                                                                                                                           |  |  |  |  |  |  |  |
| Human Resources has performed a position review? (HR initial)                                                                                                                 |  |  |  |  |  |  |  |
| The Job Analysis and Job Description have both been updated and signed? (HR initial)                                                                                          |  |  |  |  |  |  |  |
|                                                                                                                                                                               |  |  |  |  |  |  |  |
| Approvals:                                                                                                                                                                    |  |  |  |  |  |  |  |
| County Administrator Date Jone 30, 2017                                                                                                                                       |  |  |  |  |  |  |  |
| Oversight Committee Chair Date                                                                                                                                                |  |  |  |  |  |  |  |
| I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04. |  |  |  |  |  |  |  |
| ☐ I want to participate ☐ I do not wish to participate                                                                                                                        |  |  |  |  |  |  |  |
| Administrative Committee Chair Date                                                                                                                                           |  |  |  |  |  |  |  |
| I am aware and approve of the refill and the process moving forward (posting/advertisement/selection for interviews/offer and may participate per Admin. Manual section 2.04. |  |  |  |  |  |  |  |
| ☐ I want to participate ☐ I do not wish to participate                                                                                                                        |  |  |  |  |  |  |  |

## County of Door Assistant ADRC Director

| Job Title  | Assistant ADRC Director | Last Revision  | 10/12/2015                 |
|------------|-------------------------|----------------|----------------------------|
| Department | Human Services          | HR Reviewed    | 01/01/2017                 |
| Division   | ADRC                    | Employee Group | General Municipal Employee |
| Report To  | ADRC/Aging Program      | FLSA Status    | Exempt                     |
|            | Director or designee    |                |                            |
| Pay Grade  | J                       | EEO Code       | 02 – Professionals         |

#### **General Summary**

This position works in conjunction with the Aging and Disability Resource Center (ADRC) Director to provide administration and leadership of the programs provided at the ADRC. This position assists the ADRC Director with the development and implementation of short and long range planning, operations, programming, and supervision of staff related to ADRC Services and Older Americans Act services. Acts on behalf of the Director on all matters in his/her absence.

#### Duties and Responsibilities Essential Job Functions

- 1. Works with the Director to provide leadership and oversight that promotes and enhances the operation of the ADRC
- 2. Participates in the writing of the Business Plan, Aging Plan, and required updates.
- 3. Participates in the development and oversight of the ADRC budget.
- 4. Serves as the designated Nutrition Director to meet the requirements for funding under the Older Americans Act. This includes oversight of multiple meal sites located throughout the county, as well as home delivered Meals (Meals on Wheels and frozen meals).
- 5. Performs meal site visits at regular intervals and interacts with seniors to get feedback on programming.
- 6. Supervises assigned staff as determined with the Director.
- 7. Provides support to all units including case consultation, consumer issues, complaints by consumers, or response to employee needs.
- 8. Participates in the interpretation of program and policy to the community and in community planning and education efforts, via media outlets, public hearings, committee meetings, and the monthly Senior Resource Center newsletter.
- 9. Promotes, markets, and conducts health, prevention and wellness education and activities.
- 10. Participates in goal development and oversight of quality of services

#### General Job Functions

- 1. Advocates for the elderly and disabled adult population and works in collaboration with community organizations to identify and maximize services to meet identified needs.
- 2. Promotes interagency cooperation and represents the agency in meetings related to assigned agency programs.
- 3. Coordinates the Door County Caregivers Coalition and provides oversight to these services.
- 4. Participates in research programs (as assigned) and in the review and development of agency programs, policies and procedures.
- 5. Provides assistance in grant writing.

# County of Door Aging Program Manager

## Requirements Training and Experience

- 1. Graduate of an accredited college or university with at least a Bachelor's Degree in social work, gerontology, or a related human services field preferred, or equivalent experience.
- 2. Four (4) years of progressive, professional work experience directly with seniors and / or adults with disabilities.
- 3. At least 1 year of progressive experience with organizational management, budget development and monitoring, and public / media relations or equivalent experience.
- 4. The County of Door reserves the right to consider candidates whose education and work experience provides comparable knowledge, skills and abilities.

#### Knowledge, Skills, Abilities Required

- 1. Strong leadership qualities, and ability to develop and effectively lead a well-functioning team.
- 2. Applicant to successfully pass the "Safe Serve" exam (in order to supervise the Nutrition Program).
- 3. Ability to market/outreach the program in the community.
- 4. Ability to direct and supervise the work of others.
- 5. Ability to read, comprehend, and communicate, both verbally and in writing as well as effectively administer by written, and verbal communications.
- 6. Ability to communicate effectively with consumers who use our services, including ability to deal with challenging behavior when necessary.
- 7. Ability to use tact and courtesy in maintaining an effective working relationship with department employees, county supervisors, county officials, and general public.

#### **Physical and Working Conditions**

Nearly 100% of time work is performed in a normal office setting with little or no discomfort from temperature, dust or noise. Interacting with other employees, general public, whether walking in or on the telephone may be encountered.

Over 75% of work is performed seated at a desk, working on a computer keyboard and/or telephone with about 10% of work performed standing and walking. Over 75% of the work is performed by talking, hearing, and using both far and near vision. Occasional lifting is required up to 10 lbs. (i.e. paper and equipment).

Potential for physical harm exists during contacts with angry or irate members of the public. Limited office space may cause some distraction.

In an effort to provide for continuity of County government and to cope with the problems of the emergency, you may be required to work during a proclaimed state of emergency, consistent with Sec 323.14 Wis. Stats. and County emergency management plans and programs.

The above is intended to describe the general content of the requirements for the performance of this job. It is not to be construed as an exhaustive statement of duties, responsibilities or requirements. They may be subject to change at any time due to reasonable accommodation or other reasons.

| Approvals:                                | , ,      |
|-------------------------------------------|----------|
| North retains                             | 7/5/2017 |
| Seph A Krebsbach, Human Services Director | Date , , |
| Killy A. Hundll                           | 7/5/17   |
| Kelly A. Hendee, Human Resources Director | Date     |

#### REQUEST FOR FISCAL IMPACT INFORMATION

| _                                                                                 |                  | RECLASSIFICATIO | DN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |              |             | CHANGE FTE        | /Hours                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                         |                           |
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| 1.00                                                                              | \$26.22          | 54,538          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             | 33,344            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | 87,882                    |
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| Vacant, Erickson                                                                  |                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             |                   | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |                           |
| 1.00                                                                              | \$25.53          | 53,102          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             | 33,071            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | 86,173                    |
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| FTE/Hrs                                                                           | @ Rate           | 2017<br>TOTAL   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             | 2017<br>TOTAL     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | TOTAL SALARY              |
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| ADRC Deputy Di                                                                    | rector-Control F | oint            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             |                   | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         |                           |
| 1.00                                                                              | \$29.96          | 62,317          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             | 34,822            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                         | 97,139                    |
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| Vacant, Erickson                                                                  |                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             |                   | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         | 201100                    |
| 1.00                                                                              | \$25.53          | 53,102          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              |             | 33,071            | j                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                         | 86,173                    |
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|                                                                                   |                  |                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |              | Date        | 7/5/20            | 177                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | _                                       |                           |

Disclaimer: This Fiscal Impact does not include Step 2 \$26.96, Step 3 \$27.71, Step 4 \$28.46, or Step 5 \$29.21.

This Fiscal Impact is an example illustration of what the costs would be for this position/position change. It is based on estimates and assumptions provided by the Human Resources Department and/or the department in which this position works. Because these estimates and assumptions may change, or may be different than the actual circumstances at the time that this position is filled or this position change takes place, there may be a difference between the costs projected in this Fiscal Impact and the actual costs.

57



## County of Door DEPARTMENT OF COMMUNITY PROGRAMS

County Government Center 421 Nebraska Street Sturgeon Bay, WI 54235

Joseph Krebsbach

Program Director (920) 746-2345

Fax: (920) 746-2439

July 5, 2017

Human Services Board Chairman: Mark Moeller 421 Nebraska St. Sturgeon Bay WI 54235

Re: Completion of Introductory Period

Name: Kirsten Foss

Start Date: January 3, 2017

Kirsten has acquired the skills necessary to complete her position's responsibilities efficiently and effectively as the Human Services Department Receptionist. She functions independently and contributes to the Support Team's efforts. She always maintains a positive demeanor to support our external and internal customers and the department's vision and mission statements.

She has completed her introductory period successfully and without reservation I recommend that Kirsten progress to regular employee status as of July 3, 2017.

Sincerely.

Shawn M. Barlament

Cc: Administrative Committee Human Resources Department.

