

Judiciary and Law Enforcement Committee Agenda Kenosha County Administration Building 2nd Floor Committee Room Wednesday, January 3, 2018 at 6:30 p.m.

NOTE: UNDER THE KENOSHA COUNTY BOARD RULES OF PROCEDURE ANY REPORT, RESOLUTION, ORDINANCE OR MOTION APPEARING ON THIS AGENDA MAY BE AMENDED, WITHDRAWN, REMOVED FROM THE TABLE, RECONSIDERED OR RESCINDED IN WHOLE OR IN PART AT THIS OR AT FUTURE MEETINGS, NOTICE OF SUCH MOTIONS TO RECONSIDER OR RESCIND AT FUTURE MEETINGS SHALL BE GIVEN IN ACCORDANCE WITH SECTION 2 C OF THE COUNTY BOARD RULES. FURTHERMORE, ANY MATTER DEEMED BY A MAJORITY OF THE BOARD TO BE GERMANE TO AN AGENDA ITEM MAY BE DISCUSSED AND ACTED UPON DURING THE COURSE OF THIS MEETING AND ANY NEW MATTER NOT GERMANE TO AN AGENDA ITEM MAY BE REFERRED TO THE PROPER COMMITTEE. ANY PERSON WHO DESIRES THE PRIVILEGE OF THE FLOOR PRIOR TO AN AGENDA ITEM BEING DISCUSSED SHOULD REQUEST A COUNTY BOARD SUPERVISOR TO CALL SUCH REQUEST TO THE ATTENTION OF THE BOARD CHAIRMAN

- 1. CALL TO ORDER BY CHAIRWOMAN
- 2. ROLL CALL
- 3. CITIZEN COMMENTS
- 4. SUPERVISOR COMMENTS
- 5. CHAIRWOMAN COMMENTS
- 6. APPROVAL OF MINUTES FROM NOVEMBER 1, 2017
- 7. RESOLUTIONS FROM THE KENOSHA COUNTY SHERIFF'S DEPARTMENT
 - Cabaret License Rays Change-A-Pace
 - 2017 Equipment Grant Award WI Dept. of Military Affairs Homeland Security/Bomb Squad Portable X-Ray Device

Documents:

XRAY GRANT.PDF RAYS CAB.PDF

- 8. ANY OTHER BUSINESS ALLOWED BY LAW
- 9. ADJOURNMENT

A Quorum of Other Committees or of the County Board May be Present.

KENOSHA COUNTY BOARD OF SUPERVISORS

RESOLUTION	I NO.	

Subject: 2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ Bomb Squad Portable X-Ray Device							
Original 🗵	Corrected □	2 nd Correction □ Resubmitted □					
Date Submitted:	January 16, 2018	Date Resubmitted					
Submitted By:Judiciary & Law Enforcement Committee and Finance/Administration Committee							
Fiscal Note Atta	****	Legal Note Attached □					
Prepared By: Lt.	Horace J. Staples	Signature: St. HStaple					

WHEREAS, The Kenosha County Sheriff's Department, as the Agency in charge of the Kenosha County Sheriff's Bomb Squad, has been awarded \$80,000 from the State of Wisconsin through the Department of Military Affairs-Homeland Security/Bomb Squad to purchase a Portable X-Ray Device, and

WHEREAS, the Kenosha County Sheriff's Department Bomb Squad is a regional response team that responds to and processes Hazardous Device Incidents in Kenosha County and the Southeast Wisconsin Region, and

WHEREAS, the Portable X-Ray Device will be used to examine suspicious packages that could be a potential hazard, and

WHEREAS, the Portable X-Ray Device is only available sole source through SharpLogixx, LLC, and

WHEREAS, County Ordinance 3.11 (4)(d), Purchasing Policy, requires the County Board to authorize sole source for purchases exceeding \$25,000, and

WHEREAS, a Request for Sole Source had been submitted to and reviewed by the County Purchasing Director and is made part of this Resolution justifying to sole source the vendor, SharpLogixx, LLC, and

WHEREAS, the awarding agency is not requiring a hard match for this award, therefore, no additional tax levy dollars are requested to implement this grant award, and

WHEREAS, the project funding period, for this grant, expires March 31, 2018.

NOW, THEREFORE BE IT RESOLVED, that the Kenosha County Board of Supervisors accept this grant and approve the revenue and expenditure budget modifications, to the 2018 budget, as per the budget modification form, which is incorporated herein by reference, and

PAGE 2 of 3

	Subject: 2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ Bomb Squad Portable X-Ray Device						
Original 🗵	Corrected □	2 nd Correction □	Resubmitted □				
Date Submitted: Jan	uary 16, 2018	Date Resubmitted					

BE IT FURTHER RESOLVED, that the Kenosha County Board of Supervisors authorize the suspension of the competitive bidding process, in this project only, and allow SharpLogixx, LLC to be the sole source vendor for this purchase plan.

Note: This resolution requires NO funds from the general fund. It increases revenues by \$80,000.00 and increases expenditures by \$80,000.00.

PAGE 3 of 3

Original 🗵	Corrected □	2 nd C	orrection	on 🗆	Resubmitted □
Date Submitted:	January 16, 2018	Date	Resub	mitted	
	Respectf JUDICIARY AND LAW E	ully Submitte NFORCEME	∍d, NT COM	MITTEE	
		<u>Aye</u>	<u>No</u>	<u>Abstain</u>	Excused
Supervisor Leah Blougl	o Chair				
rupervisor Learr blougi	i, Orlan	-0			
Supervisor Boyd Frede	rick, Vice Chair	<u></u>		<u></u>	u
upervisor Greg Retzla	ff Secretary				
apolition oldg Notzia	ii, ooorotary				
upervisor Michael Ska	llitzky	}	ш	1f	E-court
upervisor Jeff Wambo	ldt				
aportioo. con vrainzo					
	FINANCE/ADMINIS	STRATION C	ONANAITTI	==	
	THA HOLD ISMITTED	<u>Aye</u>	<u>No</u>	 Abstain	Excused
upervisor Terry Rose,	Chair	_		-	
upervisor Ron Frederic	ck. Vice Chair				
upervisor Jeffrey Gent	Z				
upervisor Greg Retzlat	**************************************			D	
_					
upervisor Rick Dodge					
upervisor Edward Kubi		D			
upervisor Daniel Espos	oito				

Kenosha County Administrative Proposal Form

1. Proposal Overview	o de la companya de l
Division: Law Enforcement Department: SHERIFF/Emerg	g Mgmt
Proposal Summary (attach explanation and required documents):	
Resolution - to accept grant funds from the WI Dept of Military Affairs	- Homeland
Security Program - \$80,000, to purchase a Portable X-Ray device This	1
the Sheriff's Bomb Squad. No hard cash match is required.	•
La financia de la companya della companya della companya de la companya della com	, ,
Dept./Division Head Signature:	Date: 12/18/2017
2. Department Head Review	
Comments:	
Recommendation: Approval \(\square\) Non-Approval \(\square\)	
Trecommendation. Approval D Hon-Approval D	
Department Head Signature:	Date: 12-19-17
3. Finance Division Review	TOTAL TOTAL PROPERTY OF THE THE STATE OF THE
Comments:	
Recommendation: Approval Non-Approval	
Finance Signature: Patricia Merrill	Date: 19 links
rinance Signature: <u>Menucual Influent</u>	Date: 12/19/17
4. County Executive Review	tellisterationalet (linearies) situation (linearies) et ever experience et en experience et en experience et e
Comments:	
Commond.	22
	200
	11111111111111111111111111111111111111
Action: Approval Non-Approval	· .
	Date: / 4/19/17
Executive Signature:	Date/ <u>-////</u>
· · ·	

Revised 01/11/2001 (5/10/01) DISTRIBUTION

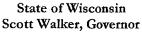
DIGITABOTION

• Original Returned to Requesting Dept.

KENOSHA COUNTY EXPENSE/REVENUE BUDGET MODIFICATION FORM

						DOCUMENT #	***************************************	G/L DATE	ATE .	***************************************	
DEPT/DIVISION:	*	S	FY2018			BATCH#		ENTR	ENTRY DATE	***************************************	
PURPOSE OF BUDGET MODIFICATION (REQUIRED):	FICATIO	N (REQUIRI		Modify She	riffs 2018 budget	Modify Sheriff's 2018 budget to recognize funding from WI Dept of Military Affairs - HLS for the Bomb Squad	from WI Dept of	Military Affair	s - HLS for the	e Bomb Squad	
Marketing - 1911 Angles Andrew Stevens and Angles A				for a Portab	for a Portable X-Ray Device.						
(1)	***************************************	Andre Salation and American Salation and Ame	and was the state of the state		BUDGET CHAN	BUDGET CHANGE REQUESTED				AFTER TRANSFER	ANSFER
ACCOUNT			(2)		(3)	(4)	(5)	(9)	(2)	(8)	(6)
DESCRIPTION EXPENSES	FUSNO	BUSINESS	OBJECT	sub- sídíary	EXPENSE INCREASE (+)	EXPENSE DECREASE (-)	ADOPTED BUDGET	CURRENT	ACTUAL EXPENSES	REVISED BUDGET	EXPENSE BAL AVAIL
Grant Program Payments	100	21130	571580		000'08		0	0	0	80,000	80,000
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			pyakiyatyot-vistoicron				-				
		- A COLOR OF THE C	EXPENSE T	TOTALS	80,000	0	0	0	0	80,000	80,000
REVENUES	FUND	BUSINESS	OBJECT	sub- sidiary	REVENUE DECREASE (+)	REVENUE INCREASE (-)	ADOPTED BUDGET	CURRENT BUDGET		REVISED BUDGET	
WI DMA-HLS Program	100	21130	442605			(80,000)	0	0		(80,000)	
			REVENUE TOTALS	TOTALS	0	(80,000)	0	0		0	
COLUMN TOTALS (EXP TOTAL + REV TOTAL)	TAL+R	EV TOTAL	,		80.000	/(000 00/8)			Ţ		
PREPARED BY: Cheryl McCrai	vleCrary		<	DIVISION HEAD:	HEAD: "	STANIA SIS	J DA	DATE: (2-19-	11/11/11		
DEPARTMENT HEAD:		73	$\sqrt{2}$	DATE	DATE: (2-19-1)		•	Please fill in all columns: (1) & (2) Account inform	Please fill in all columns: (1) & (2) Account information as required	as required	
FINANCE DIRECTOR:	275	10/10/10/10/10/10/10/10/10/10/10/10/10/1	ing			DATE: 12/194	71	(3) & (4) Budg (5) Original bu	(3) & (4) Budget change requested (5) Original budget as adopted by the board	ested by the board	
COUNTY EXECUERATE:		Start Start	a property of	DATE	121			(6) Current budget (original (7) Actual expenses to date	iget (original bunses to date	(6) Current budget (original budget w/past mods.)(7) Actual expenses to date	ds.)
ja L								(8) Budget after (9) Ralance ave	(8) Budget after requested modifications (9) Balance available after transfer (col 8)	(8) Budget after requested modifications (9) Balance available after transfer (col 8 - col 7).	7)
SEE BACK OF FORM FOR REQUIRED LEVELS OF APPROVAL FOR BUDGET MODIFICATION.	SQUIRED	LEVELS OF	* APPROVA	AL FOR BU	DGET MODIFIC,	ATION.					







Department of Military Affairs Donald P. Dunbar, Adjutant General

Office of the Adjutant General 2400 Wright Street · P.O. Box 14587 · Madison, WI 53708-0587

October 17, 2017

Horace Staples, Emergency Management Director Kenosha County Sheriff's Department 1000 55th Street Kenosha, WI 53140-3794

RE: Homeland Security - WEM/Portable X-ray Device 2017 DMA Grant Number: 2017-HSW-02A-10955

Dear Lieutenant Staples:

Congratulations! On behalf of General Dunbar, I have approved a grant award to Kenosha County in the amount of \$80,000. These funds are from DMA's Homeland Security - WEM Program available through the State of Wisconsin. This grant supports the Kenosha County Homeland Security - WEM/Portable X-ray Device 2017.

To accept this award, have the authorized official initial the bottom right corner of Attachments A and B, and sign the Signatory Page, Certified Assurances, and OMB Standard Form 424B (Attachment C). The Project Director should sign the Acknowledgement Notice. Two award packets are enclosed. Once signed, return one to WEM (attention: Rebecca Thompson) and keep the other for your records. Funds cannot be released until all signed documents are received.

As Project Director, you will be responsible for all reporting requirements outlined in the grant award and seeing that funds are administered according to the approved application materials and certifications enclosed. We look forward to a collaborative working relationship with you.

Sincerely,

Brian M. Satula, Administrator

Wisconsin Emergency Management



State of Wisconsin Scott Walker, Governor



Department of Military Affairs Donald P. Dunbar, Adjutant General

Office of the Adjutant General 2400 Wright Street · P.O. Box 14587 · Madison, WI 53708-0587

FY'17 HOMELAND SECURITY PROGRAM GRANT AWARD Homeland Security - WEM/Portable X-ray Device 2017 2017-HSW-02A-10955

The Department of Military Affairs (DMA), hereby awards to **Kenosha County**, (hereinafter referred to as the **Recipient**), the amount of \$80,000 for programs or projects pursuant to the federal Homeland Security Grant Program.

This grant may be used until March 31, 2018 for the programs consistent with the budget and general conditions in Attachment A, subject to any limitations or conditions set forth in Attachments B and/or C, if included.

The Recipient shall administer the programs or projects for which this grant is awarded in accordance with the applicable rules, regulations, and conditions of the Department of Military Affairs. The submitted application is hereby incorporated as reference into this award.

This grant shall become effective, and funds may be obligated (unless otherwise specified in Attachments A and/or B) when the Recipient signs and returns one copy of this grant award to the Department of Military Affairs.

DONALD P. DUNBAR

Major General Wisconsin National Guard The Adjutant General

RV.

BRIAN M. SATULA

Administrator Wisconsin Emergency Management

10/17/2017 Date

The Recipient, **Kenosha County**, hereby signifies its acceptance of the above-described grant on the terms and conditions set forth above or incorporated by reference therein.

RECIPIENT:

Kenosha County

BY:

Jim Kreuser

NAME: TITLE:

County Executive

/0/25/1/1 Date

DEPARTMENT OF MILITARY AFFAIRS ATTACHMENT A

APPROVED FY'17 HOMELAND SECURITY GRANT PROGRAM BUDGET

Recipient: K	enosha	County			
Project Title:	Homel	and Security - WEM/Po	rtable X-ray	Device 2017	CFDA #97.067
Grant Period:	From	November 1, 2017	То	March 31, 2018	Note ARES (1) (A) (1) (A) (1) (A) (1) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A
Grant Number:	2017-	HSW-02A-10955			
		APPROVE	D BUDGET		
Personnel Employee Ben Travel (Includ Equipment Supplies & Op Consultants Indirect Other	ing Traini			Federal	<u>\$80,000.00</u>
FEDERAL TO			\$80,000.00		
TOTAL APPI	ROVED I	BUDGET	\$80,000,00		\$80,000,00

AWARD GENERAL CONDITIONS

- Federal funds cannot be used to supplant local funds; they must increase the amount of funds that would otherwise be available from local resources.
- 2. To be allowable under a grant program, costs must be paid or obligated (purchase order issued) for services provided during the grant period. If obligated by the end of the grant period, payment must be made within 30 days of the grant period ending date.
- 3. Grant funds will be disbursed upon DMA receipt of copies of paid vendor invoices and requests for reimbursement (G-2) form. The G-2 form may be found at: http://emergencymanagement.wi.gov/egrants/forms.asp.
- 4. Recipients and subrecipients shall use their own procurement procedures and regulations, provided that the procurement conforms to applicable Federal law and the standards identified in the Procurement Standards Sections of 2 C.F.R. §§ 200.318-326.
- 5. Reimbursement for travel (i.e. mileage, meals, and lodging) is limited to applicable state rates and timeframes. DMA Grants staff are available to answer questions before costs are incurred.
- 6. All income generated as a direct result of a grant-funded project shall be deemed program income. Program income must be used for the purpose and under the conditions applicable to the award. Program income should be used as earned and must be expended within the grant performance period. If the cost is allowable under the Federal grant program, then the cost would be allowable using program income. All program income must be reported to DMA on the request for reimbursement (G-2) form.
- 7. The recipient agrees that all publications created with funding under this grant shall prominently contain the following statement: "This document was prepared under a grant from the U.S. Department of Homeland Security."
- 8. The recipient agrees that when practicable, any equipment purchased with grant funding shall be prominently marked as follows: "Purchased with funds provided by the U.S. Department of Homeland Security."
- To be eligible to receive Federal preparedness funding assistance, applicants must meet NIMS compliance requirements.
 Information on achieving compliance is available through Wisconsin Emergency Management at http://emergencymanagement.wi.gov/
- 10. The recipient agrees that all allocations and use of funds under this grant will be in accordance with the Federal Fiscal Year (FY) 2017 Homeland Security Grant Program (HSGP) Notice of Funding Opportunity.
- 11. The recipient and any sub-recipients must comply with the Grant Announcement used to announce the funding opportunity.
- 12. The recipient and any sub-recipients must comply with the Grant Award Documents.
- 13. The recipient and any sub-recipients must cooperate with the Homeland Security Compliance Monitors.



DEPARTMENT OF MILITARY AFFAIRS ATTACHMENT B

Award Special Conditions

1. The agency accepting the funding is responsible for all sustainment costs.

- 2. Equipment shall be maintained and available to use as intended by the grant for the duration of its useful life. Disposal of equipment must follow all applicable state, federal and local guidelines. The grantee must maintain records of any equipment disposal or transfer of ownership. Any proceeds from the sale of equipment at or near the end of useful life will be considered program revenue and must be reinvested into eligible homeland security expenses.
- 3. All personnel who utilize equipment purchased with funds from this grant must receive training either through the equipment vendor or other competent source specific to that piece of equipment and are responsible for the costs associated with it.
- 4. Grant modifications must be approved by the Wisconsin Emergency Management WEM agency responsible for the grant in order to be considered. The applicant must be current with WEM fiscal and program reports for this. Grant modifications will not be granted unless applicant provides a compelling reason.
- 5. Recipients and sub recipients shall use their own procurement standards and regulations, provided that the procurement conforms to applicable Federal law and the standards identified in the Procurement Standards Sections of 2 CFR §§ 200.318-326.
- 6. Agencies accepting funding understand that equipment is intended to support regional law enforcement response efforts with ALERT. In the event that an agency is separated from the ALERT program, all equipment must be surrendered or transferred as directed by the Wisconsin Emergency Management director





COUNTY OF KENOSHA

REQUEST FOR SOLE SOURCE - GRANT-FUNDED PURCHASES

То:	Matthew Flemming Purchasing Director		
From:	David G. Beth, Sheriff – Kenosha Cou	nty	
Date:	December 18, 2017		
Subject:	Sole Source Request for the Purcha	e of: SmartRay Vision System-portable X-ray system	n
Requested Supp	olier: SharpLogixx, LLC		
Requisition Nu	mber: Cost Estimat	e: <u>\$ 79,360.00</u>	
Name or Title	of Grant: HLS WEM ALERT Portabl	e X-Ray Device	
county purchase		nasing director shall make 'sole source' determinations for the purchases exceeding \$25,000shall be approved by hade."	or al
requested for a language auth Governmental	grant-funded project. Include a copy of orizing the sole-source purchase. A '	r, with the requisition, whenever a "sole source" purchas f the grant and award letter and highlight the specifical source" is defined by the National Institute of s the unique and singularly available capability to meet the	ic
	STATEMENT	OF COMPLIANCE	
and appears to lead to conflict of in relationship in a provider or any	be in the best interest of the County and terest, real or apparent, on my part with my of the provider's businesses. I have a member of his/her family. No gratuitie	sed upon an objective review of the product/service req is in strict compliance with all grant requirements. I knothis request. I have no financial or other business to family relationship or other personal relationship with s of any value, no offers of employment and no favors or ince, or give the appearance of influencing, this contract has	w o the
award, that this has clearly author	sole-source request is in strict compliance	d all administrative and financial provisions of the grant e with those provisions and that the grant awarding agen sals. I have attached a copy of the specific language in th	
products/servic	es and to my completed purchase requis		
Signatur	re of Department Head (or designee)	12-18-17 Date	
Signatu	on expariment read par designee)	Date	

SOLE SOURCE JUSTIFICATION

RI	EQUISITION NUMBER: <u>not completed yet.</u>					
ΡF	RIOR PURCHASE ORDER NUMBER					
	(if item has been previously approved):					
1.	Description of item and its function:					
	#SRVDUAL1 SRV DUAL Extreme					
	#1111130 Golden Generator XR150					
	This is the SmartRay Vision product offered by SharpLogixx, LLC .					
	This product (system) is a portable X-Ray system used as wireless or hard wired mode to deploy at a scene to examine evidence (packages/containers) for suspicious content that may require action by the Sheriff's Dept explosive ordinance disposal team. SharpLogixx maintains copyright privileges, their products must be purchased directly from them.					
2.	This is a sole source because: [X] The grant awarding agency has clearly authorized the use of noncompetitive proposals [X] Sole provider of a licensed or patented good or service [] Sole provider of items that are compatible with existing equipment, inventory, systems, programs of					
	services [] Sole provider of goods and services for which the County has established a standard [X] Sole provider of factory-authorized warranty service					
	[X] Sole provider of goods or services that will meet the specialized needs of the County or perform					
	the intended function (give detail below or in an attachment)					
	[] The vendor/distributor is a holder of a used item that would represent good value and is					
	advantageous to the County (attach supporting documentation)					
	[] Other:					
3.	What necessary features does this vendor provide which are not available from other vendors? Please be specific. The hardware and software is distributed exclusively by SharpLogixx, LLC. Portable wireless, real-time sharing x-ray system.					
4.	What steps were taken to verify that these features are not available elsewhere? Other brands/manufacturers were examined (please list phone numbers and names, and explain why these were not suitable). Logos Imaging, (866) 939-4044 – we have one of their systems. They do not have the capability we are looking for.					
	☐ Other vendors were contacted (please list phone numbers and names, and explain why these were not suitable).					
	Attach additional supporting documentation if necessary. X Approved [] Denied					
	Purchasing Director DATE					



Quote

Date 9/29/2017

Quote # 09

092917-W-KC

Quote Expiration Date

12/29/2017

For: Lt Steve Beranis
Kenosha County

Kenosha County Sheriff's Office

1000 55th Street Kenosha, WI 53140 Phone: 262-605-5100 Fax: 262-605-5130

If you have questions regarding this quotation, contact: Joel Riling, CDR USN (Ret.) | VP, Government Programs | 817-845-3463 | joel.riling@smartrayvision.com Thank you for your business!

Qty	Part#	Product.	Description	Govi	Line Total
1	SRVDUAL1	SRV DUAL Extreme	Complete Wired/Wireless 10"x12" and 14"x17" HD Panel System Including SmartTrigger ⁷³⁴ - WiFi and Wired, SmartComm ⁷⁴ , SRV Long Exposure ⁷³⁴ and Mil-Grade Controller. Software includes "Auto-Stitch" and 2-Year Warranty	\$ 86,000	86,000
1		SRV System Discount	14% Discount for the SmartRayVisions Dual Extreme System	\$ (12,040	(12,040)
4	1111130	Golden Generator XR150	XR150 Golden Generator X-Ray Kit inctudes: Source, (2) 12V Li-lon Batteries, 110V Charger, Cable and Case	\$ 6,000	6,000
4		Generator Discount	10% Discount for the XR150 Golden Generator	\$ (600)	(600)

Purchase Order should be sent to:

SharpLogbox, LLC Attn: Robin Pfaff rpfaff@sharplogbox.com 340 North Broadway, Suite 355 Green Bay, WI 54303 Subtotal

Ground Shipping & Handling

Total

5 79,360 Included \$ 79,360

KENOSHA COUNTY BOARD OF SUPERVISORS

RESOLUTION NO.

Subject: CABARET LICENSE – Rays Change-A-Pace								
Original ⊠	Corrected □	2 nd	Correcti	on 🗆	Resubm	itted □		
Date Submitted: Janua	ry 16th , 2018	Date	e Resub	mitted				
Submitted By: Judicia Enforce	ry & Law ment Committee							
Fiscal Note Attached [Leg	al Note	Attached [
Prepared By: Kenneth Captain	W. Weyker of Field Operation	11	nature:	16/Wa][-			
Rays Change-A-Pace 34814 Geneva Rd. New Munster WI, was made during the month of January 2017, was turned over to this office on February 1st, 2017, and WHEREAS, the establishment known as Rays Change-A-Pace was granted a Probationary Cabaret License per County Board Resolution on March. 7th, 2017, and WHEREAS, the establishment known as Rays Change-A-Pace was found to be in conformity with County Ordinance # 8.02 governing it's conduct for a probationary period of the last 6 months. NOW, THEREFORE BE IT RESOLVED, that a regular cabaret license, in lieu of a probationary cabaret license, be granted to Raymond N. Weis, for Rays Change-A-Pace.								
	Respect JUDICIARY AND LAW	ctfully Subm VENFORCE	itted, NENT COM	MITTEE				
		Aye	<u>No</u>	<u>Abstain</u>	Excused			
Supervisor Leah Blough, Chair	man							
Supervisor Boyd Frederick, Vic	e-Chairperson							
Supervisor Greg Retzlaff								
Supervisor Mike Skalitzky	,							
Supervisor Jef Wamboldt								
		0						

Business Ray's Change A Pace Address

34814 GENEVA RD

DATE / TIME

Incident Number 12/12/2017 23:54:00 2017-00339129

Type Service

Entries per Incident: 1

Total: 1

<u>Narrative</u>

On 12132017 at 2354 Hours Deputy Wilke #281and I, Deputy Kirwan #300 conducted a tavern check of Rays Change a Pace. The bartender that was on duty was the establishments co-owner Chad R Weis (Owners license #1513-0112, 2019 and liquor B license # 20172018-006 expiring June 30th 2018, and expired Cabaret License #1902 expired September 7th 2017.) There was no live entertainment going at the establishment at the time of our tavern check. Weis was informed of the expired cabaret license and advised that he would take care of the matter as soon as possible. No other violations were observed and we cleared the tavern check without further incident.