



Judiciary and Law Enforcement Committee Agenda
Kenosha County Administration Building
2nd Floor Committee Room
Wednesday, February 7, 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COUNTY BOARD RULES OF PROCEDURE ANY REPORT, RESOLUTION, ORDINANCE OR MOTION APPEARING ON THIS AGENDA MAY BE AMENDED, WITHDRAWN, REMOVED FROM THE TABLE, RECONSIDERED OR RESCINDED IN WHOLE OR IN PART AT THIS OR AT FUTURE MEETINGS.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
 - 2017 Equipment Grant Award - WI Dept. of Military Affairs - Homeland Security/ALERT EOD Ballistic Protection

Documents:

[RAYS CHANGE-A-PLACE.PDF](#)
[GRANT AWARD-HOMELAND SECURITY-BOMB SQUAD PORTABLE X-RAY
DEVICE.PDF](#)
[GRANT AWARD-HOMELAND SECURITY-ALERT EOD BALLISTIC
PROTECTION.PDF](#)

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

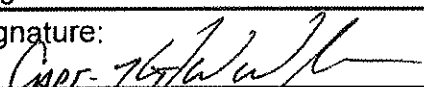
A Quorum of Other Committees or of the County Board May be Present.

KENOSHA COUNTY BOARD OF SUPERVISORS

RESOLUTION NO.

Subject: CABARET LICENSE –

Rays Change-A-Pace

Original <input checked="" type="checkbox"/>	Corrected <input type="checkbox"/>	2 nd Correction <input type="checkbox"/>	Resubmitted <input type="checkbox"/>
Date Submitted: January 16th , 2018		Date Resubmitted	
Submitted By: Judiciary & Law Enforcement Committee			
Fiscal Note Attached <input type="checkbox"/>		Legal Note Attached <input type="checkbox"/>	
Prepared By: Kenneth W. Weyker Captain of Field Operations		Signature: 	

WHEREAS, the application of Raymond N. Weis for a Probationary Cabaret License for 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.

Respectfully Submitted,
JUDICIARY AND LAW ENFORCEMENT COMMITTEE

	<u>Aye</u>	<u>No</u>	<u>Abstain</u>	<u>Excused</u>
_____ Supervisor Leah Blough, Chairman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Supervisor Boyd Frederick, Vice-Chairperson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Supervisor Greg Retzlaff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Supervisor Mike Skalitzky	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____ Supervisor Jef Wamboldt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<u>Business</u>	<u>Address</u>	<u>DATE / TIME</u>	<u>Incident Number</u>	<u>Type</u>
Ray's Change A Pace	34814 GENEVA RD	12/12/2017 23:54:00	2017-00339129	Service
		Entries per Incident: 1		
		Total: 1		


Narrative

On 12/13/2017 at 2354 Hours Deputy Wilke #281 and 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.

**KENOSHA COUNTY
BOARD OF SUPERVISORS**

RESOLUTION NO. _____

Subject: 2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ Bomb Squad Portable X-Ray Device

Original <input checked="" type="checkbox"/>	Corrected <input type="checkbox"/>	2 nd Correction <input type="checkbox"/>	Resubmitted <input type="checkbox"/>
Date Submitted: January 16, 2018		Date Resubmitted	
Submitted By: Judiciary & Law Enforcement Committee and Finance/Administration Committee			
Fiscal Note Attached X		Legal Note Attached <input type="checkbox"/>	
Prepared By: Lt. Horace J. Staples		Signature: 	

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

Subject: **2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ Bomb Squad Portable X-Ray Device**

Original ☒

Corrected ☐

2nd Correction ☐

Resubmitted ☐

Date Submitted: January 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.

Subject: **2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ Bomb Squad Portable X-Ray Device**

Original ☒

Corrected ☐

2nd Correction ☐

Resubmitted ☐

Date Submitted: January 16, 2018

Date Resubmitted

Respectfully Submitted,
JUDICIARY AND LAW ENFORCEMENT COMMITTEE

	<u>Aye</u>	<u>No</u>	<u>Abstain</u>	<u>Excused</u>
Supervisor Leah Blough, Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Boyd Frederick, Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Greg Retzlaff, Secretary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Michael Skalitzy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Jeff Wamboldt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FINANCE/ADMINISTRATION COMMITTEE

	<u>Aye</u>	<u>No</u>	<u>Abstain</u>	<u>Excused</u>
Supervisor Terry Rose, Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Ron Frederick, Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Jeffrey Gentz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Greg Retzlaff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Rick Dodge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Edward Kubicki	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Daniel Esposito	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

KENOSHA COUNTY EXPENSE/REVENUE BUDGET MODIFICATION FORM

DOCUMENT #	G/L DATE
BATCH #	ENTRY DATE

SHERIFF FY2018

DEPT/DIVISION:

PURPOSE OF BUDGET MODIFICATION (REQUIRED): Modify Sheriff's 2018 budget to recognize funding from WI Dept of Military Affairs - HLS for the Bomb Squad for a Portable X-Ray Device.

(1) ACCOUNT DESCRIPTION EXPENSES	(2)			BUDGET CHANGE REQUESTED		(5) ADOPTED BUDGET	(6) CURRENT BUDGET	(7) ACTUAL EXPENSES	AFTER TRANSFER	
	FUND	BUSINESS UNIT	OBJECT	sub- sidiary	(3) EXPENSE INCREASE (+)	(4) EXPENSE DECREASE (-)			(8) REVISED BUDGET	(9) EXPENSE BAL AVAIL
Grant Program Payments	100	21130	571580		80,000			0	80,000	80,000
				EXPENSE TOTALS	80,000	0		0	80,000	80,000

REVENUES	FUND	BUSINESS UNIT	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	0	(80,000)	0	0	0

COLUMN TOTALS (EXP TOTAL + REV TOTAL)

80,000 (80,000)

PREPARED BY: Cheryl McCarty

DIVISION HEAD: Capt. J. S. J.

DATE: 12-19-17

DEPARTMENT HEAD: W. J. B. J.

DATE: 12-19-17

Please fill in all columns:

- (1) & (2) Account information as required
- (3) & (4) Budget change requested
- (5) Original budget as adopted by the board
- (6) Current budget (original budget w/past mods.)
- (7) Actual expenses to date
- (8) Budget after requested modifications
- (9) Balance available after transfer (col 8 - col 7).

FINANCE DIRECTOR: Patricia Merrill

DATE: 12/19/17

COUNTY EXECUTIVE: J. J. J.

DATE: 12/19/17

SEE BACK OF FORM FOR REQUIRED LEVELS OF APPROVAL FOR BUDGET MODIFICATION.

Kenosha County Administrative Proposal Form

1. Proposal Overview

Division: Law Enforcement Department: SHERIFF/Emerg 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 is a tool used by the Sheriff's Bomb Squad. No hard cash match is required.

Dept./Division Head Signature: _____



Date: 12/18/2017

2. Department Head Review

Comments:

Recommendation: Approval ☒ Non-Approval ☐

Department Head Signature: _____




Date: 12-17

3. Finance Division Review

Comments:

Recommendation: Approval ☒ Non-Approval ☐

Finance Signature: _____



Date: 12/19/17

4. County Executive Review

Comments:

Action: Approval ☒ Non-Approval ☐

Executive Signature: _____



Date: 12/19/17

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

DISTRIBUTION

- Original Returned to Requesting Dept.



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

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

BY:

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:

NAME: **Jim Kreuser**

TITLE: **County Executive**

10/25/17
Date

**DEPARTMENT OF MILITARY AFFAIRS
ATTACHMENT A**

APPROVED FY'17 HOMELAND SECURITY GRANT PROGRAM BUDGET

Recipient: **Kenosha County**

Project Title: **Homeland Security - WEM/Portable X-ray Device 2017**

CFDA #97.067

Grant Period: From **November 1, 2017**

To **March 31, 2018**

Grant Number: **2017-HSW-02A-10955**

APPROVED BUDGET

	<u>Federal & Match</u>
Personnel	
Employee Benefits	
Travel (Including Training)	
Equipment	\$80,000.00
Supplies & Operating Expenses	
Consultants	
Indirect	
Other	
FEDERAL TOTAL	\$80,000.00
LOCAL CASH MATCH	
TOTAL APPROVED BUDGET	\$80,000.00

\$80,000.00

AWARD GENERAL CONDITIONS

1. 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."
9. 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

A handwritten signature in dark ink, consisting of stylized, overlapping loops and strokes, located in the bottom right corner of the page.



COUNTY OF KENOSHA

REQUEST FOR SOLE SOURCE - GRANT-FUNDED PURCHASES

To: Matthew Flemming
Purchasing Director

From: David G. Beth, Sheriff – Kenosha County

Date: December 18, 2017

Subject: **Sole Source Request for the Purchase of:** SmartRay Vision System-portable X-ray system

Requested Supplier: SharpLogixx, LLC

Requisition Number: _____ Cost Estimate: \$ 79,360.00

Name or Title of Grant: HLS WEM ALERT Portable X-Ray Device

Per Kenosha County Ordinance 3.11(4)(d), "...the purchasing director shall make 'sole source' determinations for all county purchases under his or her control..... Sole source purchases exceeding \$25,000....shall be approved by resolution of the county board, before the purchase is made."

This form must be submitted to the Purchasing Director, with the requisition, whenever a "sole source" purchase is requested for a grant-funded project. **Include a copy of the grant and award letter and highlight the specific language authorizing the sole-source purchase.** A "sole source" is defined by the National Institute of Governmental Purchasing as "only one vendor possesses the unique and singularly available capability to meet the requirement of the solicitation."

STATEMENT OF COMPLIANCE

This department's recommendation for sole source is based upon an objective review of the product/service required and appears to be in the best interest of the County and is in strict compliance with all grant requirements. I know of no conflict of interest, real or apparent, on my part with this request. I have no financial or other business relationship in any of the provider's businesses. I have no family relationship or other personal relationship with the provider or any member of his/her family. No gratuities of any value, no offers of employment and no favors or compromising action have taken place that would influence, or give the appearance of influencing, this contract have taken place.

By my signature, I certify that I have read and understand all administrative and financial provisions of the grant award, that this sole-source request is in strict compliance with those provisions and that the grant awarding agency has clearly authorized the use of non-competitive proposals. I have attached a copy of the specific language in the grant that authorizes this sole-source purchase.

Refer to the attached sole source justification as prepared by our department, the attached review of available products/services and to my completed purchase requisition.

Ch. et Deputy Mayor 12-18-17
Signature of Department Head (or designee) Date

SOLE SOURCE JUSTIFICATION

REQUISITION NUMBER: not completed yet.

PRIOR 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:

☒ The grant awarding agency has clearly authorized the use of noncompetitive proposals

☒ Sole provider of a licensed or patented good or service

☐ Sole provider of items that are compatible with existing equipment, inventory, systems, programs or services

☐ Sole provider of goods and services for which the County has established a standard

☒ Sole provider of factory-authorized warranty service

☒ 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.

☒ Approved ☐ Denied


Purchasing Director

12/19/17
DATE



Quote

For: Lt Steve Beranis
Kenosha County Sheriff's Office
1000 55th Street
Kenosha, WI 53140
Phone: 262-605-5100
Fax: 262-605-5130

Date 9/29/2017
Quote # 092917-W-KC
Quote Expiration Date 12/29/2017

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	Govt	Line Total
1	SRVDUAL1	SRV DUAL Extreme	Complete Wired/Wireless 10"x12" and 14"x17" HD Panel System including SmartTrigger™ - WiFi and Wired, SmartComm™, SRV Long Exposure™ 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)
1	1111130	Golden Generator XR150	XR150 Golden Generator X-Ray Kit includes: Source, (2) 12V Li-Ion Batteries, 110V Charger, Cable and Case	\$ 6,000	6,000
1		Generator Discount	10% Discount for the XR150 Golden Generator	\$ (600)	(600)

Purchase Order should be sent to:

SharpLogixx, LLC
Attn: Robin Pfaff
rpfaff@sharplogixx.com
340 North Broadway, Suite 355
Green Bay, WI 54303


Subtotal
Ground Shipping & Handling
Total

\$	79,360
Included	
\$	79,360

**KENOSHA COUNTY
BOARD OF SUPERVISORS**

RESOLUTION NO. _____

Subject: 2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ALERT EOD Ballistic Protection

Original <input checked="" type="checkbox"/>	Corrected <input type="checkbox"/>	2 nd Correction <input type="checkbox"/>	Resubmitted <input type="checkbox"/>
Date Submitted: February 20, 2018		Date Resubmitted	
Submitted By: Judiciary & Law Enforcement Committee and Finance/Administration Committee			
Fiscal Note Attached X		Legal Note Attached <input type="checkbox"/>	
Prepared By: Lt. Horace J. Staples		Signature: 	

WHEREAS, The Kenosha County Sheriff's Department, as the Agency in charge of the Kenosha County Sheriff's Bomb Squad, has been awarded \$2,400 from the State of Wisconsin through the Department of Military Affairs-Homeland Security to purchase 4 ALERT EOD Ballistic Protection Helmets, 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 Ballistic Helmets will be used for joint SWAT Responses and EOD Missions, 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 May 30, 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

Subject: 2017 Equipment Grant Award - WI Dept of Military Affairs- Homeland Security/ALERT EOD Ballistic Protection

Original ☒

Corrected ☐

2nd Correction ☐

Resubmitted ☐

Date Submitted: February 20, 2018

Date Resubmitted

Respectfully Submitted,
JUDICIARY AND LAW ENFORCEMENT COMMITTEE

	<u>Aye</u>	<u>No</u>	<u>Abstain</u>	<u>Excused</u>
Supervisor Leah Blough, Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Boyd Frederick, Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Greg Retzlaff, Secretary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Michael Skaltzky	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Jeff Wamboldt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FINANCE/ADMINISTRATION COMMITTEE

	<u>Aye</u>	<u>No</u>	<u>Abstain</u>	<u>Excused</u>
Supervisor Terry Rose, Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Ron Frederick, Vice Chair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Jeffrey Gentz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Greg Retzlaff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Rick Dodge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Edward Kubicki	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervisor Daniel Esposito	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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'15 HOMELAND SECURITY PROGRAM GRANT AWARD
Homeland Security - WEM/ALERT EOD Ballistic Protection
2015-HSW-02A-11027

The Department of Military Affairs (DMA), hereby awards to **Kenosha County**, (hereinafter referred to as the **Recipient**), the amount of **\$2,400** for programs or projects pursuant to the federal Homeland Security Grant Program.

This grant may be used until **May 30, 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

BY:

BRIAN M. SATULA

Administrator
Wisconsin Emergency Management

12/28/2017

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:

NAME: **Jim Kreuser**

TITLE: **County Executive**

Date

Kenosha County
Administrative Proposal Form

1. Proposal Overview

Division: Law Enforcement Department: SHERIFF/Emerg Mgmt

Proposal Summary (attach explanation and required documents):

Resolution - to accept grant funds from the WI Dept of Military Affairs - Homeland Security Program - \$2,400, to purchase 4 Ballistic Helmets. This is a tool used by the Sheriff's Bomb Squad. No hard cash match is required.

Dept./Division Head Signature: _____



Date: 01/10/2018

2. Department Head Review

Comments:

Recommendation: Approval ☒ Non-Approval ☐

Department Head Signature: _____



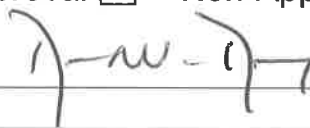
Date: 1-11-18

3. Finance Division Review

Comments:

Recommendation: Approval ☒ Non-Approval ☐

Finance Signature: _____



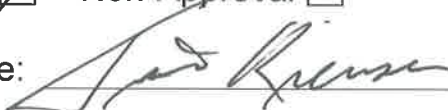
Date: 1/15/18

4. County Executive Review

Comments:

Action: Approval ☒ Non-Approval ☐

Executive Signature: _____



Date: 1/16/18

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

DISTRIBUTION

- Original Returned to Requesting Dept.