

**SERVICE AGREEMENT  
BETWEEN  
MARATHON COUNTY  
AND  
NORTH CENTRAL HEALTH CARE AND THE WAUSAU AREA TRANSIT SYSTEM  
FOR  
SPECIALIZED TRANSPORTATION ASSISTANCE  
FOR THE ELDERLY AND DISABLED  
2024-2028**

This Service Agreement hereinafter referred to as the "AGREEMENT" is made and entered into between Marathon County, hereinafter referred to as the "COUNTY" and the North Central Health Care, hereinafter referred to as "NCHC" and the Wausau Area Transit System, d/b/a Metro Ride, hereinafter referred to as "METRO RIDE."

**RECITALS**

WHEREAS, s.85.21 Wis. Stats., authorizes a program of state financial assistance to counties for specialized transportation; and,

WHEREAS, s.20.395(1) (cr), Wis. Stats., appropriates funds for this assistance program; and,

WHEREAS, such funds are made available to each county of Wisconsin based upon the ratio of the number of elderly and disabled persons residing in each county bears to the total number of elderly and disabled persons residing in the state, but limited so that no county receives less than a minimum base amount; and,

WHEREAS, the COUNTY has applied to the Wisconsin Department of Transportation (WisDOT) for its proportionate share; and,

WHEREAS, 1983 Wisconsin Act 27 amended s.85.21(3)(c), Wis. Stats., to permit a county to hold state aid in trust beyond the end of a program year for future expenses or the acquisition or maintenance of transportation equipment; and

WHEREAS, Recipient has by resolution of its Board of Supervisors dated 5/22/1984 authorized state aid to be held in trust according to administrative rules promulgated by the WisDOT under TRANS 1.05(2), Wis. Admin. Code (January 1984) and has submitted a plan, approved by the WisDOT, for using the aid to be held in trust.

NOW THEREFORE, the parties agree as follows:

**SECTION I: TERM**

Except for the trust conditions established under Section VI, the term of this AGREEMENT shall extend from January 1, 2024, through December 31, 2028. The trust conditions established under Section VI shall remain in effect until they are terminated or amended.

## **SECTION II: PAYMENT BY THE COUNTY**

Upon successfully applying for the WisDOT grant funds, The COUNTY will receive the funds from the WisDOT and will provide the appropriate 20% of the Grant as the local match, the total program funds available will be used for the delivery of the Program. The funds will be distributed as follows:

- Annually the NCHC will receive 72% of the total program funds to implement its portion of the elderly and disabled County Transportation Program within the entire county.
- METRO RIDE will receive 20% of the total program funds to implement its portion of elderly and disabled transportation in the City of Wausau area.
- The County Conservation, Planning and Zoning (CPZ) Department will receive 8% of the total program funds for administering the grant program for Marathon County.

Every year when WisDOT provides the allocation of funds to the counties for the subsequent year, the actual dollar amounts will be provided to NCHC and METRO RIDE for their annual budgeting processes.

## **SECTION III: RESPONSIBILITIES**

- A. NCHC and METRO RIDE agree to undertake and complete the transportation project(s) as described in the annual 85.21 grant application to WisDOT, which will hereby be incorporated by reference into this AGREEMENT as ATTACHMENT I. The COUNTY may amend its application during the effective period of this AGREEMENT with the WisDOT's and NCHC's and METRO RIDE's concurrence, however the COUNTY agrees that the allocated aids will address the issue of the need for transportation services that are accessible to the developmentally and physically disabled population of the county and shall go towards efforts of making accessible transportation available to all seniors and individuals with a disability for the entire year.
- B. NCHC and METRO RIDE agree that it will comply with the Americans with Disabilities Act (ADA) of 1990 and all U.S. Department of Transportation regulations relating to enforcement of that Act.
- C. The COUNTY assures the WisDOT that at least 20% of the annual grant amount will be available to match the state assistance it receives under this AGREEMENT. The City of Wausau will assume their 20% match amount for the METRO RIDE portion of the Grant. No in-kind services, no federal or state categorical financial aid and no passenger revenue shall be allowed as part of the COUNTY match.
- D. NCHC and METRO RIDE agree to expend the grant funds on the projects described in the annual COUNTY 85.21 grant application in accordance with the 85.21 specialized transportation program guidance determined by WisDOT incorporated by reference into this AGREEMENT as ATTACHMENT II. NCHC and METRO RIDE agree to expend the required 20% local match amount within the term of this AGREEMENT before expending any grant dollars on the projects described in the application approved by the WisDOT. No portion of the local match amount may be placed or held in Trust.

- E. NCHC and METRO RIDE will submit to the COUNTY an estimated, proposed line-item budget for each upcoming program year, by December 31<sup>st</sup>. This budget will outline all expense and revenue categories and will list specific administrative costs to be expected for the year. Each employee position to be covered under administrative expense shall be listed/identified in the budget.
- F. NCHC and METRO RIDE assure that it will use the state assistance granted under this AGREEMENT and its appropriated match only to assist specialized transportation services outlined in the 85.21 grant application. These services should be designed to primarily serve elderly and disabled individuals. If excess capacity is available on these services, NCHC and METRO RIDE may make this capacity available to persons who are neither elderly nor disabled.
- G. Equipment purchased with state assistance under this AGREEMENT must be used in the performance of specialized transportation services for the duration of its useful life. NCHC and METRO RIDE shall reimburse the COUNTY for the state's share of the value of such equipment, if it is sold or removed from specialized transportation service prior to the end of its useful life, unless the proceeds are spent for replacement equipment or for transportation services described in the COUNTY'S current, future or amended application.

#### **SECTION IV: PROGRAM INCOME**

Program income is the gross income earned from the transportation services receiving assistance under this Agreement. Program income includes passenger donations, fares and co-payments. Program income earned must be used to offset expenses incurred in transportation activities receiving assistance under this Agreement. If revenue for other purposes is solicited from passengers in the course of transportation activities, the solicitation must explicitly state the intended use of the revenue.

#### **SECTION V: ALLOWABLE COSTS FOR CURRENT COUNTY POLICY**

Expenditures shall be reimbursable from the assistance under this AGREEMENT if they meet all the requirements set forth below. They must:

- A. Be made in conformance with the COUNTY's 85.21 grant application, WisDOT's Specialized Transportation program, and all other provisions of this AGREEMENT.
- B. Be necessary to accomplish the projects described in the COUNTY's 85.21 grant application.
- C. Be reasonable in amounts for the goods or services purchased.
- D. Be actual net costs (i.e., the price paid minus any refunds, rebates, or other items of value which have the effect of reducing the cost actually incurred).
- E. Be made for work performed or materials, supplies or equipment acquired during the effective period of this AGREEMENT.
- F. Be in conformance with the cost standards set forth in APPENDIX B OF ATTACHMENT II to this AGREEMENT and.
- G. Be satisfactorily documented and be treated uniformly and consistently.

## **SECTION VI: STATE AID HELD IN TRUST**

- A. The COUNTY may hold in trust, according to s.85.21(3)(c), Wis. Stats. (1983), aid received under this AGREEMENT for future expenses, or the purchase or maintenance of transportation equipment used for specialized transportation.
- B. The balance and any expenditures of aids, allocated under this and previous AGREEMENTS, held in trust shall be subject to the trust conditions that are attached to this AGREEMENT in APPENDIX C of ATTACHMENT II. The balance and expenditures of aid held in trust shall be consistent with the COUNTY's plan for using aid held in trust in which the plan has been reviewed and approved by the WisDOT Program Manager.
- C. The COUNTY agrees that the balance of aid held in trust may not exceed, on a quarterly basis, an average daily balance of \$80,000 as per state Administrative Rule Trans. 1.05(2)(b). Any balance exceeding this allowance shall be refunded to the WisDOT 30 days after the end of the quarter.

## **SECTION VII: STATE AID BALANCE**

NCHC and METRO RIDE agree to refund to the COUNTY the balance of state aid received in any year under Section II that has not been expended in that year. Such a refund shall be made no later than March 31<sup>st</sup> of the following year.

## **SECTION VIII: RECORDS AND AUDITS**

- A. The COUNTY and any organizations (i.e., NCHC and METRO RIDE) to which it gives its financial assistance under this AGREEMENT shall establish and maintain accounts for the specialized transportation services receiving assistance under this AGREEMENT. The accounts may be separate or parts of current accounting systems. If the transportation services are integrated with non-transportation activities, the accounts shall distinguish the costs and revenues attributable to the transportation activity from those of other activities. Such accounts shall cover the transportation activity throughout the effective period of this AGREEMENT.
- B. All costs charged to the assistance covered by this AGREEMENT shall be supported by properly executed payrolls, time records, invoices, contracts or vouchers indicating the nature and propriety of the charges.
- C. The accounts and records as required above shall be retained for a period of three years and shall be available upon request to the COUNTY, its officials, employees or designees for inspection and audit purposes.
- D. NCHC and METRO RIDE shall have a single, organization-wide financial and compliance audit performed by a qualified independent auditor if required to do so under federal law and regulations. (See Code of Federal Regulations 2 CFR Part 200).
- E. This audit shall be performed in accordance with federal regulations 2 CFR Part 200, subparts A-F issued by the federal Office of Management and Budget (OMB) and the State Single Audit Guidelines issued by the Wisconsin Department of Administration (DOA). Selected state programs will be included in the scope of the single organization-wide financial and compliance audit.

## **SECTION IX: REPORTING REQUIREMENTS**

- A. NCHC and METRO RIDE shall submit quarterly financial and ridership reports to the COUNTY using forms supplied by the WisDOT. The reports shall be submitted within the first month following the end of each quarter as follows:
  - a. The first period shall cover January 1 – March 30; due no later than April 21.
  - b. The second period of April 1 – June 30; due no later than July 21.
  - c. The third period of July 1 – September 30; due no later than October 20.
  - d. The final period shall cover October 1 – December 31; due no later than January 19.
- B. Quarterly reports submitted by NCHC and METRO RIDE shall include a list of expenses and revenue incurred and collected by each provider and shall be placed under the appropriate category as illustrated in the 85.21 annual report form as described in ATTACHMENT III.
- C. NCHC and METRO RIDE shall also submit an annual report for each of the transportation projects receiving assistance under this AGREEMENT using forms supplied by the WisDOT. The annual report shall be due no later than March 22.

## **SECTION X: THIRD-PARTY CONTRACTS**

- A. NCHC and METRO RIDE may not use the aids under this AGREEMENT to purchase service from, or make grants to, any third party without a contract, agreement, purchase-of-service order or other legal equivalent.
- B. A third-party contract for transportation services purchased with allocated aids shall, at least once every 5 years, be awarded through a competitive procurement process when the total amount of the contract is \$10,000 or more.
- C. Third-party contracts, agreements or purchase-of-service orders shall be available for inspection by the COUNTY, its officials, employees, or designees upon request.

## **SECTION XI: TERMINATION**

- A. Voluntary Termination. NCHC and METRO RIDE may terminate aid allocated under this AGREEMENT for any reason pursuant to the notice provisions set forth below.
- B. Involuntary Termination. The COUNTY may terminate the aid allocated under this AGREEMENT at any time that it determines that the purpose of the assistance program, as expressed in s.85.21(1), Wis. Stats., is not being fulfilled. Failure of NCHC and METRO RIDE to comply with the terms and conditions of this AGREEMENT or with the provisions of s.85.21, Wis. Stats. and Chapter TRANS 1, Wis. Admin. Code shall be considered evidence of failure to fulfill the purpose of the assistance program. The COUNTY may also terminate the aid allocated under this AGREEMENT by formal action of its Board of Supervisors.
- C. In the event that the aid allocated under this AGREEMENT is terminated by any party, the COUNTY agrees to reimburse NCHC and/or METRO RIDE for the state share of eligible costs incurred prior to the termination date. The COUNTY shall reallocate the balance of state aid allocated under this AGREEMENT that has not been spent to the other party. Notwithstanding

any other provision of this AGREEMENT, NCHC and/or METRO RIDE shall refund any state assistance received under this Agreement that has not been spent or retained in full accordance with this AGREEMENT; s.85.21 Wis. Stats.; and any applicable administrative rule.

- D. In the event that any party terminates the arrangement by which COUNTY holds unspent state aid in trust, COUNTY shall refund to the WisDOT the balance of aid held in trust as well as any accumulated interest.
- E. All parties agree that a notice of intent to terminate shall be made by "return- receipt certified mail" at least 90 days prior to the proposed termination date.

## **SECTION XII: COUNTY TRANSPORTATION PROGRAM**

Under the terms of this AGREEMENT, NCHC and METRO RIDE agrees to act as the COUNTY's agent in providing demand responsive transportation services for the COUNTY. NCHC and METRO RIDE will provide demand responsive transportation services in conformance and compliance with all items set forth in this AGREEMENT.

## **SECTION XIII: INSURANCE/INDEMNITY**


- A. NCHC and METRO RIDE agree to provide insurance for workers' compensation, general liability, and property damage for claims or losses which may arise as a result of the provision of specialized transportation services outlined in this agreement.
- B. NCHC and METRO RIDE hereby agree to release, indemnify, defend and hold harmless Marathon County, its officials, officers, employees and agents from and against all judgments, damages, penalties, losses, costs, claims, expenses, suits, demands, debts, actions and/or causes of action of any type or nature whatsoever, including actual and reasonable attorney's fees, which may be sustained or to which they may be exposed, directly or indirectly, by reason of personal injury, death, property damage, or other liability, alleged or proven, resulting from or arising out of the provision of specialized transportation services under this agreement by NCHC and METRO RIDE, its officers, officials, employees, agents, subcontractors or assigns. Marathon County does not waive, and specifically reserves, its right to assert any and all affirmative defenses and limitations of liability as specifically set forth in Wisconsin Statutes, Chapter 893 and related statutes.

**SECTION XIV: EXECUTION**

IN WITNESS WHEREOF this AGREEMENT shall become effective upon its complete execution by the COUNTY, NCHC and METRO RIDE.

METRO RIDE/CITY OF WAUSAU


By Katie Rosenberg  
Mayor, City of Wausau

Name 

Date Jan 26, 2024

COUNTY OF MARATHON

By Lance Leonhard  
Marathon County Administrator

Name 

Date Dec 18, 2023

NORTH CENTRAL HEALTH CARE

By Gary D. Olsen  
NCHC Executive Director

Name   
Gary D. Olsen (Jan 26, 2024 12:29 CST)

Date Jan 26, 2024



ATTACHMENT I

December 4, 2023

85.21 Program Manager  
Bureau of Transit, Local Roads, Railroads & Harbors  
Wisconsin Department of Transportation  
PO Box 7913  
Madison, WI 53707-7913

**MARATHON COUNTY 2024 SPECIALIZED TRANSPORTATION ASSISTANCE  
PROGRAM APPLICATION**

Marathon County hereby makes an application for \$368,408.00 in state assistance under Section s.85.21 of the Wisconsin Statutes to provide specialized transportation services for the seniors and individuals with disabilities in 2024. The County assures that \$73,682.00 in local funds have been budgeted and will be available as the share required to match the 85.21 grant.

The applicant affirms that the information submitted in this application is true and correct.

Sincerely,

A handwritten signature in black ink, appearing to read "Kurt Gibbs", is positioned below the word "Sincerely,".

Kurt Gibbs, Chairperson  
Marathon County Board of Supervisors

Enclosure: 2024 Specialized Transportation Application



# 2024 APPLICANT INFORMATION FORM

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For additional information on this Application Workbook,  
please refer to the §85.21 Application Guidelines for CY2024

**County of** MARATHON

**Primary Contact for this Grant Program**

**Name** Dave Mack

**Telephone Number** 715-261-6043 **Extension**

**Email Address** [dave.mack@co.marathon.wi.us](mailto:dave.mack@co.marathon.wi.us)

**Application Preparer** (if different than primary contact)

**Name** same as above

**Organization**

**Telephone Number**  **Extension**

**Email Address**

**Applicant Status** Place your initials in box to the right to certify your eligibility - You are certifying that the applicant is a county government or an agency of the county department. Private non-profits or Aging Units organized as a non-profit under Wis. Stat. 46.82(1)(a)3 are not eligible to apply for this grant. DM

**Organization Info** Place your initials in the box certifying all organization information, including contacts and titles, have been updated in the BlackCat Online Grant Management System (GMS) and are true and correct to the best of your knowledge. DM

**Federal Grant Match** Please place an "X" next to any federal grant that will be using §85.21 funds as local match.

<b>5310</b> <input style="width: 50px; height: 20px;" type="text"/>	<b>5307</b> <input style="width: 50px; height: 20px;" type="text"/>	<b>5311</b> <input style="width: 50px; height: 20px;" type="text"/>
<b>Other</b> (Please explain) <span style="background-color: #cccccc; padding: 2px 10px;">None</span>		

**Coordination** Please identify the county's coordinated plan name, goal(s) and page number(s) in which your §85.21 project(s) is/are derived.

<b>Title of Coordinated Plan:</b>	Marathon County Locally Developed, Coordinated Public Transit - Human Service Transportation Plan 2019-2023
<b>The goal(s) and/or strategies from which your project is included:</b>	Strategy #3, Update County-wide human service transit needs assessment to gain better understanding of the current unmet needs for transportation services and how to better focus efforts to meet those needs. Expand study to include employment related needs. Actions: Utilize 85.21 grant funding for match to apply for 5304 discretionary planning funds. Strategy #8, Maintain and expand existing services through support of program operations, maintenance, repair and scheduled replacement of vehicle fleet as appropriate. Actions: Continue to make use fo 85.21 grants to maintain and expand the level of transportation service within the County. Continue to apply for 5310 capital grants to maintain and expand the human service transportation vehicle fleet within Marathon County, and explore ways to increase the number of volunteer drivers available to the program.
<b>Page number(s) of the Coordinated plan in which the goals may be referenced:</b>	Pages 9 and 10.

**Assessibility** Please indicate whether or not §85.21 state aid will be used for the transportation of persons who cannot walk or persons who walk with assistance during the calendar year.

<b>YES</b>	<input checked="" type="checkbox"/>	
<b>NO</b>	<input type="checkbox"/>	(If no, please explain how the Americans with Disabilities Act (ADA) requirements for equivalency of service between ambulatory and non-ambulatory passengers will be met.)

# APPLICANT CHECKLIST

County of **MARATHON**

<b>Required Components</b>	<b>Complete</b>
Update Contact Information in BlackCat Online Grant Management System	X
Upload completed application workbook:	X
Application Information Form	X
Complete Vehicle Inventory ( <i>regardless of funding source</i> )	X
Third Party Contracts	X
Trust Fund Plan (for counties with a signed board resolution)	X
Project Descriptions and Budgets	X
Review Summary Tab	X
Upload Transmittal Letter	X
Upload Public Hearing and Notice	X
Upload Local Review Form	X
<u><i>If applicable</i></u> : Upload Third Party Contracts &/or Leases to the <b>Resources</b> Tab	

## VEHICLE INVENTORY

County of **MARATHON**

**Instructions:** Please provide your **entire** specialized transit vehicle inventory.  
 (Include all vehicles used to transport seniors or individuals with disabilities.)

Vehicle Type <i>(Minivan, Medium Bus, etc.)</i>	Full VIN Number	Model Year	Current Mileage	No. of Ambulatory / Wheelchair Positions  <i>(Ambulatory/Non- Ambulatory)</i>	Funding Source (mark with X)				Place "X" in box to indicate if vehicle is leased to another party.
					5310	85.21	Trust	Other	
<b>Chevrolet/Glavel</b>	1GB6G5BL3C1125202	<b>2012</b>	<b>60,163</b>	<b>8/2</b>			<b>X</b>	<input type="checkbox"/>	
<b>Chevrolet/Glavel</b>	1GB6G5BL0C1124718	<b>2012</b>	<b>58,555</b>	<b>8/2</b>			<b>X</b>	<input type="checkbox"/>	
<b>Chevrolet/Glavel</b>	1GB6G5BL8C1124272	<b>2012</b>	<b>64,803</b>	<b>8/2</b>			<b>X</b>	<input type="checkbox"/>	
<b>Chevrolet/Glavel</b>	1GB6G5BL1C1124999	<b>2012</b>	<b>55,925</b>	<b>8/2</b>			<b>X</b>	<input type="checkbox"/>	
								<input type="checkbox"/>	
<b>3 Ford Starcraft</b>	1FD4E4FS7FDA08699	<b>2015</b>	<b>85,555</b>	<b>8/3</b>	<b>X</b>			<input type="checkbox"/>	
<b>62 Ford Starcraft</b>	1FD3E35L28DB51845	<b>2008</b>	<b>66,609</b>	<b>4/2</b>	<b>X</b>			<input type="checkbox"/>	
<b>65 Ford Starcraft</b>	1FD4E35LX9DA92666	<b>2010</b>	<b>95,607</b>	<b>12 amb</b>	<b>X</b>			<input type="checkbox"/>	
<b>66 Ford Starcraft</b>	1FD4E35LX9DA90920	<b>2010</b>	<b>75,459</b>	<b>7/1</b>	<b>X</b>			<input type="checkbox"/>	
<b>67 Ford Starcraft</b>	1FD4E35L19DA92684	<b>2010</b>	<b>80,558</b>	<b>7/1</b>	<b>X</b>			<input type="checkbox"/>	
<b>5 Ford Starcraft</b>	1FD4E4FS4HDC35528	<b>2017</b>	<b>72,781</b>	<b>8/3</b>	<b>X</b>			<input type="checkbox"/>	
<b>57 Ford Transit</b>	1FDZX2CM6KKA70912	<b>2019</b>	<b>17,078</b>	<b>7/1</b>	<b>X</b>			<input type="checkbox"/>	
<b>100 Ford Starcraft</b>	1FD4E3FS2KDC26212	<b>2019</b>	<b>32,765</b>	<b>12</b>	<b>X</b>			<input type="checkbox"/>	
<b>101 Ford Starcraft</b>	1FD4E8PV6KKA50050	<b>2019</b>	<b>34,145</b>	<b>6/2</b>	<b>X</b>			<input type="checkbox"/>	
<b>20 Ford Strcraft</b>	1FD4E4FSXKDC65608	<b>2017</b>	<b>42,443</b>	<b>10/2</b>	<b>x</b>			<input type="checkbox"/>	
								<input type="checkbox"/>	



## TRUST FUND SPENDING PLAN

County of **MARATHON**

Instructions: Please record your plan on how your county will spend down their trust fund over the next three years. Be as specific as possible. Do NOT include 2023 purchases made with trust funds.

Expenditure Item <i>If non-vehicle capital purchase, please provide description on second page below.</i>	Planned year of purchase (YYYY)	Amt of Trust Used for Project
Purchase 2 - 13 Passenger Buses, 1 for Metro Ride (\$135,448) and 1 for NCHC (\$129,435)	<b>2024</b>	<b>\$264,883.00</b>
<b>Total projected cost of 3-year plan</b>		<b>\$ 264,883.00</b>

Estimated amount of state aid to be held in trust on 12/31/2023	<b>\$294,219.43</b>
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<i>Will auto calculate based on year entered above</i>	<i>Enter the amount of funds to be added for the next three years. If none, enter 0.</i>	
Spending plan for 2024 =	<b>\$264,883.00</b>	Funds added for 2024 = <input type="text"/> Estimated balance on 12/31/24 = <b>\$29,336.43</b>
Spending plan for 2025 =	<b>\$ -</b>	Funds added for 2025 = <input type="text"/> Estimated balance on 12/31/25 = <b>\$29,336.43</b>
Spending plan for 2026 =	<b>\$ -</b>	Funds added for 2026 = <input type="text"/> Estimated balance on 12/31/26 = <b>\$29,336.43</b>

**Date complete** **December 1, 2023**

**Prepared by** *David Mack*

**Narrative for non-vehicle equipment purchases.** *\*Please explain why you are requesting WisDOT approval for an exception. If already received WisDOT approval, please list date approval received. (Hint: Use ALT and Enter to start a new paragraph.)*

Purchase orders were submitted to A & J Mobility for 2 buses in 2023 using the State Procurement List. The buses will not be delivered until 2024, so these purchases are being placed in the 2024 grant application. This will be reflected in the 2023 year end financial report.

For additional space to complete your narrative, please scroll down to second page.

# PROJECT 1 DESCRIPTION

County of **MARATHON**

**Instructions**

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name **North Central Health Care (NCHC)**

Third Party Provider North Central Health Care

Date contract last updated 6/28/23

**Type of Service** *(Place an "x" next to the type of service you will be providing for this project.)*

Volunteer Driver	<b>X</b>	Voucher Program	
Vehicle Purchase		Management Study	
Planning Study		<i>Brief description of Study</i>	
Other <i>(provide explanation)</i>	Paid staff drivers may be used to provide rides to clients if no volunteer drivers are available. There is currently a shortage of volunteer drivers in the county.		

**General Project Summary** *(Provide a brief description of this project. Use ALT and Enter to start a new paragraph.)*

NCHC paratransit services is public transportation for persons over 60 or persons with disabilities. Access to this service is limited to persons whose physical and mental disability prevents them from riding the Metro Ride buses or the Metro Ride Paratransit Program within the City of Wausau. NCHC services are designed to meet the needs of clients that live outside the Metro Ride Paratransit service area or those that are in need of door-through-door services who do not have other resources for transportation. The NCHC service area is all part of Marathon County including the service area of Metro Ride Paratransit service. The overlap in service is based on NCHC providing door-through-door services county wide and Metro Ride providing curb-to-curb service in their area only.

**PROJECT DESCRIPTION, Continued**

**Geography of Service**

*(List the counties, as well as cities/areas that are serviced through this project. Use ALT and Enter to start a new line.)*

Entire County

**Service Hours** *(Indicate your general hours of service for this project.)*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<b>Start Time</b>	based on volunteer availability	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	based on volunteer availability
<b>End Time</b>	based on volunteer availability	based on volunteer availability	based on volunteer availability	based on volunteer availability	based on volunteer availability	based on volunteer availability	based on volunteer availability

Additional description *(if applicable)* If no volunteer drivers are available, paid staff drivers may be used or NCHC may contract with taxi services for the desired trips.

**Service Requests** *(Briefly describe how your service is requested for this project.)*

Clients, healthcare providers, advocates, and families can call in advance of the appointments for services Monday through Friday, 7:00 am to 5:00 pm.

**Passenger Eligibility** *(Briefly indicate passenger eligibility requirements for this project.)*

Marathon County residents 60 years old or older or developmentally disabled go through an application process

**Passenger Revenue** *(Briefly describe passenger revenue requirements for this project.)*

Marathon County Transportation Program through NCHC has a range of copay costs based on mileage from the pickup location (costs are one way).

# PROJECT BUDGET

Section Description	Amount
---------------------	--------

## Annual Expenditures

Enter the amount of **total** expenditures for this project.

**Total Expenses** \$447,739.00

*\*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the **Annual Financial Report** that you will submit at the end of the calendar year.*

## Annual Revenue

Enter the amount for **each** funding source that will be used for this project.

*\*When complete, please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.*

**A. \$85.21 funds from annual allocation** **Total from A.** 265,253

**B. \$85.21 funds from trust fund** **Total from B.** 129,435

**C. County Match Funds** **Total from C.** 53,051

**D. Passenger Revenue** **Total from D.**

**E. Older American Act (OAA) funding** **Total from E.**

**F. \$5310 Operating or Mobility Management funds** **Total from F.**

**G. Other funds** **Total from G.**

*(Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)*

1.   Total

2.   Total

3.   Total

4.   Total

5.   Total

6.   Total

**Revenue Total** \$447,739.00

<b>Expenditures should equal revenue</b>	<span style="background-color: #e0ffff; border: 1px solid black; padding: 2px 10px;">\$0.00</span>
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## PROJECT 2 DESCRIPTION

County of **MARATHON**

**Instructions**

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name

**Metro Ride**

Third Party Provider

Wausau Area Transit System, dba, Metro Ride

Date contract last updated

6/28/23

**Type of Service**

*(Place an "x" next to the type of service you will be providing for this project.)*

Volunteer Driver		Voucher Program	
Vehicle Purchase		Management Study	
Planning Study		<i>Brief description of Study</i>	
Other <i>(provide explanation)</i>	ADA Paratransit Services		

**General Project Summary** *(Provide a brief description of this project. Use ALT and Enter to start a new paragraph.)*

Metro Ride Paratransit service is an origin-destination service provided pursuant to the Americans with Disabilities Act (ADA). It is available to persons who are unable, because of a physical or mental disability, to access the Metro Ride fixed route bus service. The service area includes all areas within 3/4 of a mile from a Metro Ride regular fixed route within the City of Wausau. Paratransit service hours are the same as the fixed route bus service hours, from 6:30 am to 6:30 pm. Metro Ride provides curb-to-curb service in their area.

**PROJECT DESCRIPTION, Continued**

**Geography of Service**

*(List the counties, as well as cities/areas that are serviced through this project. Use ALT and Enter to start a new line.)*

Within 3/4 of a mile from the Metro Ride fixed route bus service in the City of Wausau.

**Service Hours** *(Indicate your general hours of service for this project.)*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time	N/A	6:30 am	6:30 am	6:30 am	6:30 am	6:30 am	N/A
End Time	N/A	6:30 pm	6:30 pm	6:30 pm	6:30 pm	6:30 pm	N/A

Additional description **None**  
*(if applicable)*

**Service Requests** *(Briefly describe how your service is requested for this project.)*

Ride requests must be made no later than 4:30 pm on the day prior to the desired trip. Requests are taken via telephone by Metro Ride staff. Requests on Holidays and weekends may be made via email.

**Passenger Eligibility** *(Briefly indicate passenger eligibility requirements for this project.)*

The program is available to persons who are unable, because of a physical or mental disability, to navigate to and from Metro Ride bus stops or to board, alight or ride a Metro Ride bus. Applying for the program involves the completion of a paper application, which includes a verification from a medical professional. Eligibility determinations are made by Metro Ride staff.

**Passenger Revenue** *(Briefly describe passenger revenue requirements for this project.)*

ADA paratransit fares cannot exceed twice the regular adult fare for the fixed route bus service. The Metro Ride adult fare is \$1.75 and the paratransit fare is \$2.50.

# PROJECT BUDGET

Section Description	Amount
---------------------	--------

## Annual Expenditures

Enter the amount of **total** expenditures for this project.

Total Expenses \$223,866.00

*\*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the **Annual Financial Report** that you will submit at the end of the calendar year.*

## Annual Revenue

Enter the amount for **each** funding source that will be used for this project.

*\*When complete, please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.*

A. \$85.21 funds from annual allocation Total from A. \$73,682

B. \$85.21 funds from trust fund Total from B. \$135,448

C. County Match Funds Total from C. \$14,736

D. Passenger Revenue Total from D.

E. Older American Act (OAA) funding Total from E.

F. \$5310 Operating or Mobility Management funds Total from F.

G. Other funds Total from G.

*(Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)*

1.   Total

2.   Total

3.   Total

4.   Total

5.   Total

6.   Total

Revenue Total \$223,866.00

C

<b>Expenditures should equal revenue</b>	<b>\$0.00</b>
--	---------------

## PROJECT 3 DESCRIPTION

County of **MARATHON**

**Instructions**

- Use this section to describe a specific project that will use s.85.21 funds.
- Hint: Alt and Enter will go to the next line.
- Be sure to complete all three pages for each project.

Project Name

**Marathon County Conservation, Planning, and Zoning (CPZ)**

Third Party Provider

N/A

Date contract last updated

1/1/23

**Type of Service**

*(Place an "x" next to the type of service you will be providing for this project.)*

Volunteer Driver		Voucher Program	
Vehicle Purchase		Management Study	
Planning Study		<i>Brief description of Study</i>	
Other <i>(provide explanation)</i>	Grant Administration by Recipient		

**General Project Summary** *(Provide a brief description of this project. Use ALT and Enter to start a new paragraph.)*

Marathon County CPZ Department provides grant administration services for the County and the two project components of this entire program, Metro Ride and NCHC. CPZ staff is also the staff to the County's Transportation Coordinating Committee that oversees the County Program. Funds will be used for salaries of participating staff.

**PROJECT DESCRIPTION, Continued**

**Geography of Service**

*(List the counties, as well as cities/areas that are serviced through this project. Use ALT and Enter to start a new line.)*

N/A

**Service Hours** *(Indicate your general hours of service for this project.)*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time	N/A	8:00 am	8:00 am	8:00 am	8:00 am	8:00 am	N/A
End Time	N/A	4:30 pm	4:30 pm	4:30 pm	4:30 pm	4:30 pm	N/A

Additional description  
*(if applicable)*

**Service Requests** *(Briefly describe how your service is requested for this project.)*

Not Applicable

**Passenger Eligibility** *(Briefly indicate passenger eligibility requirements for this project.)*

Not Applicable

**Passenger Revenue** *(Briefly describe passenger revenue requirements for this project.)*

Not Applicable

# PROJECT BUDGET

Section Description	Amount
---------------------	--------

## Annual Expenditures

Enter the amount of **total** expenditures for this project.

**Total Expenses** \$35,368.00

*\*Please note: Breakdown of expenses is not required at this time. You will provide the breakdown of actual expenses in the **Annual Financial Report** that you will submit at the end of the calendar year.*

## Annual Revenue

Enter the amount for **each** funding source that will be used for this project.

*\*When complete, please scroll to bottom of this page to ensure the Expenditures minus Revenue equals \$0.*

**A. \$85.21 funds from annual allocation** **Total from A.** \$29,473.00

**B. \$85.21 funds from trust fund** **Total from B.**

**C. County Match Funds** **Total from C.** \$5,895.00

**D. Passenger Revenue** **Total from D.**

**E. Older American Act (OAA) funding** **Total from E.**

**F. \$5310 Operating or Mobility Management funds** **Total from F.**

**G. Other funds** **Total from G.** \$0.00

*(Provide name and/or description and record total amount in the box to the right of the description. Include sources such as other grants and/or programs.)*

1.   **Total**

2.   **Total**

3.   **Total**

4.   **Total**

5.   **Total**

6.   **Total**

**Revenue Total** \$35,368.00

<b>Expenditures should equal revenue</b>	<b>\$0</b>
--	------------

**COUNTY ELDERLY TRANSPORTATION  
2024 PROJECT BUDGET SUMMARY**

County of

**MARATHON**

Project Name

North Central Health Care (NCHC)	Metro Ride	Marathon County Conservation, Planning, and Zoning (CPZ)	0	0	0	0	0	Totals
----------------------------------	------------	--	---	---	---	---	---	--------

**Project Expenses**

Total Project Expenses	\$447,739.00	\$223,866.00	\$35,368.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$706,973.00</b>
------------------------	--------------	--------------	-------------	--------	--------	--------	--------	--------	---------------------

**Project Revenue by Funding Source**

\$85.21 Annual Allocation	\$265,253.00	\$73,682.00	\$29,473.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$368,408.00</b>
\$85.21 Trust Fund	\$129,435.00	\$135,448.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$264,883.00</b>
County funds	\$53,051.00	\$14,736.00	\$5,895.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$73,682.00</b>
Passenger Revenue	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>
Older American Act (OAA)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>
\$5310 grant funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>
Total from other funds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>
1.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

<b>Expenses - revenue =</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	<b>\$0.00</b>
-----------------------------	--------	--------	--------	--------	--------	--------	--------	--------	---------------

## LOCAL REVIEW FORM

Are the committees or commissions on aging, county aging unit and boards (created under ss. 51.42 and 51.437, Stats.) part of the county's Transportation Coordination Committee or equivalent?

Yes

No

If you selected No, you **MUST** include evidence of their review of this application and upload it to the Online Grant Management section for "Local Review" with this form.

Such evidence may include:

- Written endorsements
- Recommendations or criticism
- Minutes of meetings attended by the above organizations at which the application was discussed

### Marathon County's Transportation Coordinating Committee (TCC)

Membership: Per Tran 2.10, membership must include representation from at least the following:

- County Board, County Aging Unit (ADRC), County Department of Social Services, 51.42 Board Member
  - Transportation Providers (public, proprietary, and nonprofit), Elderly and Disabled Citizen Advocates and
  - Consumer and Agency Advocates. The following is the current member list on the TCC.
- 
- Supervisor Bruce Lamont
  - Supervisor Donna Krause
  - Supervisor Gayle Marshall
  - David Oberbeck - 51.42 Board Member - Vice-Chair



- Yee Leng Xiong - Social Services Board Member, Chair
- Chris Dickinson, ADRC Board Member
- Metro Ride Director, Transportation Provider
- Kathi Zoern, Elderly and Disabled Advocate
- Dean Verhein, Consumer and Agencies Advocate

Other Organizational Relationships: TCC reports to the Health and Human Services Committee of the County Board. This is for approval of the 85.21 Elderly and Disabled grant application. Spending of the trust fund dollars doesn't need to go to H&HS for approval.

## PUBLIC NOTICE AND HEARING FORMS

Be sure to complete the following components:

1. Publication Notice (Page 1)
  - a. Date of publication.
  - b. Copy of publication in the paper.
2. Public Hearing (Page 2)
  - a. Date of public hearing.
  - b. Provide a summary of comments made during the public hearing as they relate to the application. If none, type **None**.
3. Attach **a copy of the meeting minutes** during which the approval for the application was granted.

Date of notice publication:

October 20, 2023 and October 24, 2023

### 2024 SPECIALIZED TRANSPORTATION PROGRAM FOR THE ELDERLY AND DISABLED

#### PUBLIC HEARING NOTICE

Notice is hereby given that a public hearing will be held by Marathon County on **October 25, 2023 at 2:00 p.m.** in **Conservation, Planning and Zoning Large Conference Room, 210 River Drive, Wausau, WI** for the purpose of considering an application for financial assistance from the State of Wisconsin pursuant to Section 85.21 of the Wisconsin Statutes, "2024 Specialized Transportation Program for the Elderly and Disabled." Project elements under consideration include the following:

- A) Transportation services for the elderly provided by Metro Ride and North Central Health Care on behalf of Marathon County.
- B) Transportation services for the developmentally disabled also provided by Metro Ride and North Central Health Care on behalf of Marathon County.

- C) Transportation services for persons who reside within the Metro Ride regular bus route but are unable to ride a regular transit bus provided by Metro Ride Paratransit System.
- D) Marathon County is eligible to receive \$368,408 from the State with a local match requirement of \$73,682 paid by Marathon County.

At the hearing, interested persons will have an opportunity to be heard with respect to the proposed project. Interested persons may submit oral or written comments regarding the project at the hearing, or may submit written comments to David Mack, Conservation, Planning and Zoning Planning Manager, 210 River Drive, Wausau, Wisconsin, 54403.

A draft copy of the application is available for public inspection at the offices of the Conservation, Planning & Zoning Department at 210 River Drive Wausau WI 54403, the Marathon County Clerk's Office, Courthouse, 500 Forest Street, Wausau, WI, 54403 or on the Marathon County Website [www.co.marathon.wi.us](http://www.co.marathon.wi.us). Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk's Office at 715-261-1500 or e-mail [infomarathon@mail.co.marathon.wi.us](mailto:infomarathon@mail.co.marathon.wi.us) one business day before the meeting.

David Mack, Planning Manager

Marathon County Conservation, Planning, and Zoning

Published on October 20, 2023, and October 24, 2023



Wisconsin  
GANNETT

PO Box 630848 Cincinnati, OH 45263-0848

**PROOF OF PUBLICATION**

MARATHON COUNTY  
Debbie  
Marathon County  
500 Forest ST  
Wausau WI 54403-5554

STATE OF WISCONSIN, COUNTY OF BROWN

I being duly sworn, doth depose and say that I am an authorized representative of The Wausau Daily Herald, a newspaper at Wausau Wisconsin and that an advertisement of which the annexed is a true copy, taken from said paper, has been published in said newspaper in the issues dated:

10/20/2023, 10/24/2023

That said newspaper was regularly issued and circulated on those dates and that the fees charged are legal.

Sworn to and subscribed before on 10/24/2023

Legal Clerk

Notary, State of WI, County of Brown

10-6-23

My commission expires

Publication Cost: \$89.96  
Order No: 9421458 # of Copies:  
Customer No: 1012783 1  
PO #: 2024 Transportation

**THIS IS NOT AN INVOICE!**

Please do not use this form for payment remittance.

DENISE ROBERTS  
Notary Public  
State of Wisconsin

**2024 SPECIALIZED  
TRANSPORTATION PROGRAM  
FOR THE ELDERLY AND DISABLED  
PUBLIC HEARING NOTICE**

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Date of public hearing:

October 25, 2022

*No Public Comments were obtained or given at the Public Hearing.*



**Transportation Coordinating Committee  
Minutes  
Wednesday, October 25, 2023  
Large Conference Room  
212 River Drive, Wausau, WI**

<u>Attendance:</u>	<u>Present</u>	<u>Absent</u>
Yee Leng Xiong – Chair	X	
David Oberbeck – Vice-chair		X
Chris Dickinson		X
Matthew Rosenbloom-Jones		X
Ben Lee		X
Kathi Zoern	X	
Bruce Lamont	X	
Gayle Marshall	X	
Donna Krause		X
Dean Verhein	X	

**Also Present in person or Webex:** Dave Mack, Lance Mueller – CPZ; Jenny McKenzie – NCHC

**1. Call to Order**

The agenda being properly signed and posted, and the presence of a quorum, the meeting was called to order at 2:00 pm by Chair Xiong in the large conference room, 210 River Drive, Wausau, WI 54403.

**2. Public Comments – None.**

**3. Approve Minutes of the June 28, 2023 Meeting**

Action: **MOTION / SECOND BY VERHEIN/ MARSHALL TO APPROVE THE MINUTES OF THE JUNE 28, 2023 MEETING AS DISTRIBUTED. MOTION CARRIED BY VOICE VOTE, NO DISSENT.**

**4. Public Hearing for the 2024 85.21 Elderly and Disabled Transportation Application**

This is a required public hearing for the public to be able to provide input on the County's Elderly and Disabled Transportation (85.21) grant application. Chairman Xiong opened the Hearing by reading the notice and asked multiple times if anyone was present that would like to address this committee as part of the Public Hearing. With no one coming forward to address the Committee, the Chairman closed the Public Hearing. No comments on the application were received.

**5. Educational Presentations/Outcome Monitoring Reports and Possible Action**

**A. Financial Service Delivery Report – North Central Health Care (NCHC)**

Discussion: McKenzie discussed the financial reports provided for NCHC's service during the months of June, July, and August. Costs were up significantly, and they are down to only 5 volunteer drivers. Part of the barriers for volunteers to drive is the cost of insurance as rates can go up by as much as 40% if they become a volunteer driver. The Chairman discussed that this committee may need to create a letter to provide to the state legislature that would support legislation addressing the increased cost in insurance. The Chairman will follow up with Mack and McKenzie to draft this letter.

Action: FOR INFORMATIONAL PURPOSES ONLY.

Follow through: NCHC STAFF WILL CONTINUE TO INFORM THE COMMITTEE REGARDING ITS SERVICES AND FINANCIAL INFORMATION. DRAFT A LETTER REGARDING THE INCREASED INSURANCE COSTS.

B. Financial and Service Delivery Report – Metro Ride

Discussion: Mack provided an update on Metro Ride as Rosenbloom-Jones was not present. Rosenbloom-Jones is resigning from the Director position at Metro Ride, and they are currently looking for a new director.

Action: FOR INFORMATIONAL PURPOSES ONLY.

Follow through: METRO RIDE STAFF WILL CONTINUE TO INFORM THE COMMITTEE REGARDING ITS SERVICES AND FINANCIAL INFORMATION.

C. Elderly and Disabled Transportation Needs Assessment Status Report

Discussion: Mack explained the County had hired the North Central Wisconsin Regional Planning Commission to perform a transportation needs assessment for Marathon County. This involved having several public meetings over the summer to obtain public input. A meeting was also held in October with transportation professionals. Regional Planning has developed a survey and they will be sending it out shortly.

Action: FOR INFORMATIONAL PURPOSES ONLY.

Follow through: ONCE THE SURVEY IS READY, MACK WILL DISTRIBUTE THE SURVEY TO THE GROUP.

6. Policy Issues Discussion and Committee Determination to the Health and Human Services Committee for its Consideration and Possible Action

A. 2024 85.21 Elderly & Disabled Transportation Application

Discussion: Mack discussed how this is an annual grant application. Marshall asked if staff time counted towards the match. Mack shared the match must be a cash match, so staff time does not contribute to it. Marshall also asked if the ¾ mile radius from the metro ride route for paratransit service left any of the population out of service. Mack explained that NCHC covers all of the county and any area not served by Metro Ride in the City of Wausau.

Action: **MOTION / SECOND BY LAMONT / ZOERN TO APPROVE THE 2024 85.21 ELDERLY AND DISABLED TRANSPORTATION APPLICATION. MOTION CARRIED BY VOICE VOTE, NO DISSENT.**

Follow through: THE DRAFT APPLICATION WILL GO TO THE HEALTH AND HUMAN SERVICES COMMITTEE FOR APPROVAL THEN ON TO THE COUNTY BOARD FOR FINAL APPROVAL.

7. Meeting Time, Location, Agenda Items:

To Be Determined by the Chairman

8. Adjourn

Action: There being no further business to discuss, **MOTION / SECOND BY ZOERN / MARSHALL TO ADJOURN THE MEETING AT 2:30 PM. MOTION CARRIED BY VOICE VOTE, NO DISSENT.**

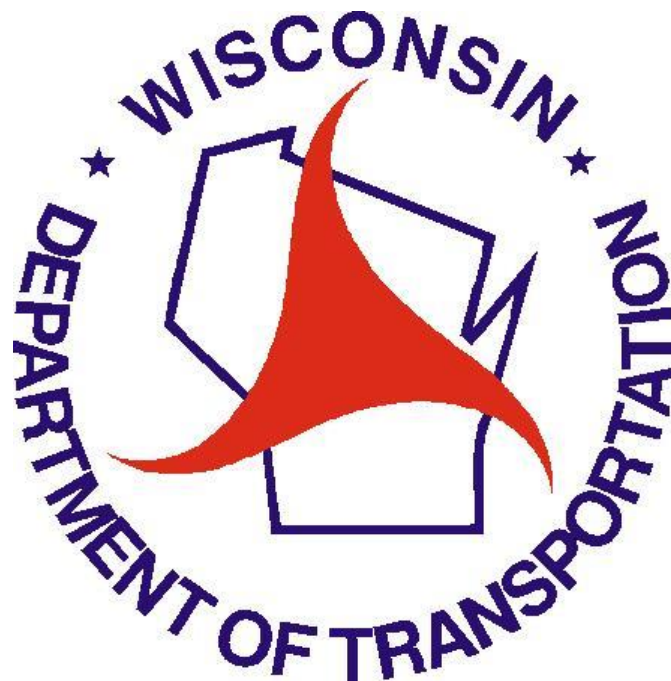
Submitted by:  
David Mack  
DM: lm  
October 26, 2023

ATTACHMENT II

**2024  
APPLICATION  
GUIDELINES**

**SPECIALIZED TRANSPORTATION  
ASSISTANCE PROGRAM FOR  
COUNTIES (WIS. STAT. 85.21)**

Application is due by December 15, 2023, at 12:00 PM  
*Extensions may be granted upon request*



**Administered by:**

**[Specialized Transit](#)**

**Bureau of Transit, Local Roads, Railroads and Harbors (BTLRRH)**

**Division of Transportation Investment Management (DTIM)**

P.O. BOX 7913

MADISON, WI 53707-7913

[specialized.transit@dot.wi.gov](mailto:specialized.transit@dot.wi.gov)



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## INTRODUCTION

The County Elderly and Disabled Transportation Assistance, authorized by Wisconsin Statute 85.21, provides state financial aid to all Wisconsin counties. This grant program operates on an annual, calendar-year basis. It is administered by the Transit Section of the Wisconsin Department of Transportation (“Department”).

For 2024, 85.21 aid totals \$15,977,800. This amount will be allocated among all counties according to the protocol described in Trans 1.02, Wis. Admin. Code. See Appendix A for 2024 county-by-county allocations.

If you have any questions regarding this program, the 2024 application and/or any reporting requirements, please contact either 85.21 program managers:

Lori Jacobson  
[lori.jacobson@dot.wi.gov](mailto:lori.jacobson@dot.wi.gov)  
(608) 266-1128

Eric Anderson  
[Eric1.anderson@dot.wi.gov](mailto:Eric1.anderson@dot.wi.gov)  
(608) 267-1845

## PROGRAM DETAILS AND REQUIREMENTS

### ELIGIBLE APPLICANTS

Wisconsin counties are the only eligible applicants for funds available under 85.21. Private for-profit or private non-profit organizations may provide service for counties through contractual agreements with the county.

*Note: Aging units organized as a non-profit under [Wis. Stat. 46.82\(1\)\(a\)3](#) are considered non-profits and therefore are not eligible to apply; however, they are eligible to provide service on behalf of the counties through contractual agreements.*

### PROGRAM FUNDING

Per Section 85.21, Wis. Stats., and Trans 1.02, Wis. Admin. Code, the most recent relevant census and statistical data and projections from the U.S. Census Bureau are used to determine county allocations. Calculations leading to the allocation table (**Appendix A**) are based on two types of U.S. Census Bureau data: 1) senior (age 65 and older) population estimates, and 2) population estimates for individuals with disabilities aged 64 or younger. Generally, each county is allocated a share of the annual state 85.21 appropriation proportionate to its share of the total statewide population of seniors and individuals with disabilities. However, these amounts are adjusted to ensure that each county receives not less than 0.5 percent of the total annual program appropriation.

Each county must provide, at a minimum, a local cash match equal to 20 percent of its state aid allocation. The county cash match cannot be comprised of “in-kind” services, passenger copayments, or state and federal categorical aids (i.e., aids provided for a defined purpose such as education). A county may contribute more than the required minimum local match. Local match used for another program may not be claimed as match for the 85.21 program.

Income from contracts (i.e.-Managed Care Organizations-MCO’s) to provide human service transportation may be used to reduce the net project costs.

## PASSENGER ELIGIBILITY AND OTHER SERVICE LIMITATIONS

Specialized transportation services using 85.21 aid must serve seniors and individuals with disabilities. State statute permits counties to transport the general public via 85.21-funded service on a “space available” basis. If a county chooses to transport persons who are neither a senior nor disabled, it must ensure that seniors and individuals with disabilities are not displaced or denied service as a result. Space may be made available to the public on a specialized service vehicle when, for instance:

- the vehicle is not scheduled for senior or disabled transportation use;
- the vehicle has remaining seating capacity after a minimum advance reservation time has passed;
- for fixed schedule service, space is available at the time a public rider wishes to board;
- the public rider is a family member accompanying a senior or disabled rider.

For administrative purposes, a senior is defined as any individual age 65 or older. However, for the purpose of operating its specialized transportation program, a county may set the senior age threshold as low as 55.

A person with disabilities is an individual who, because of any temporary or permanent physical or mental condition or institutional residence, is unable, without special facilities or special planning or design, to use available transportation facilities and services as effectively as persons who are not so affected.

Counties may not limit services to persons with disabilities based on any age requirements, though they may require a responsible adult to accompany a disabled child during transport. The Department will not approve applications from counties that deny transportation service to disabled individuals. A group of projects, some or each of which serve different groups, may receive 85.21 aid if the projects collectively provide service for all seniors and individuals with disabilities residing in the county.

Counties must ensure all services funded with 85.21 aids are accessible or that service provided to persons with disabilities is equivalent to that provided to non-disabled individuals. Specialized transportation projects should be accessible to persons who cannot walk or board a vehicle, or who do so with difficulty. Counties that do not offer equivalent accessible service may have their county allocation payment held until they demonstrate such service is available.

## ELIGIBLE PROJECTS

Counties may use 85.21 allocated aid to:

- directly provide transportation service, including operation and dispatching of vehicles, maintenance, and administration of service;
- assist in funding or purchasing transportation service from any public or private provider;
- coordinate transportation services;
- perform or purchase in-service transportation training;
- purchase equipment such as human services vehicles, wheelchair lifts and ramps, and two-way radio communications systems;
- directly subsidize passengers for use of transportation services including reduced fare programs. Programs of this sort permit seniors and individuals with disabilities to use existing transportation services such as public transit, taxis, or SMV carriers at a reduced fare. Typically, the passenger pays part of the fare while the sponsoring county pays the other part of the fare through a ticket or coupon the passenger gives to the driver;
- reimburse seniors and individuals with disabilities for use of their personal means of transportation, when prior approval has been given by the county based on qualification standards established by the county;
- undertake planning or management studies of coordinated, county-wide, or multi-county specialized transportation services. These studies must be designed to help counties plan for or adopt new or revised transportation systems or services which promise to provide improved specialized transportation service throughout one or more counties. Such studies could include service inventories, needs estimates, service evaluations, and the design and implementation of new or different service types (including the organizational and administrative aspects of service or centralized dispatch).

## SERVICES PRIORITIES

State law permits – but does not require – counties to prioritize travel for medical, nutrition, and work-related activities. These activities are defined as follows:

**“Medical activities”** means the procurement of medical or medically-prescribed services or products. It also means participation in medical or medically-prescribed

activities. Training, maintenance and supervision, and education programs do not fall within this definition.

**“Nutritional activities”** means the consumption, purchase or receipt of food.

**“Work-related activities”** means performing work, either voluntarily or for compensation, to produce goods or services. Trips for training or education do not fit this definition. A trip’s purpose is established by the primary reason a person makes a trip.

## TRANSPORTATION SERVICE COORDINATION

Under the federal Bipartisan Infrastructure Law (BIL), federal grant programs supporting transportation of seniors and individuals with disabilities, require projects be derived from a “locally-developed, coordinated public transit-human services transportation plan” as a condition of funding.

The Department believes projects funded with 85.21 aids should be held to the same standard, and consequently requires counties to demonstrate how project(s) meet a goal/strategy outlined in the most recent coordinated transportation plan. Additionally, the Department requires that:

- 85.21 program administrators participate in the ongoing development and review of these local coordination plans; and
- Transportation coordination be addressed in public hearings held as part of the 85.21 grant application development process.

If a proposed 85.21-funded project does not meet a strategy in the coordination plan, the plan should be amended to include it, or the project should be replaced with one that is consistent with the plan.

## PASSENGER REVENUE POLICY

Counties must either require specialized transportation service users to make a copayment or provide users with an opportunity to make a voluntary contribution. Counties must establish the copayment amount, if required, or recommend a voluntary contribution amount. Counties may waive copayments in cases of an emergency when the user is indigent or when the user is not competent to make a payment.

When copayments are required, counties have discretion over how they are collected. Regardless of the collection method, counties must account for and report all copayment revenues received. Examples of acceptable copayment collection policies include:

- Volunteer drivers collect and keep copayments and then the county reimburses the drivers for their travel expenses less the copayments collected.
- Volunteer drivers collect copayments, turn them over to the organization sponsoring the service, and are then reimbursed for the full amount of their travel expenses.

Non-cash forms of exchange may be used for copayments, provided they either represent an obligation by someone to pay the required copayment. Examples of non-cash forms of exchange are tickets, coupons, travel vouchers, tokens, punch cards, passes, and ID cards coupled with a provider-maintained billing account.

Counties may wish to permit non-cash forms of exchange for passenger convenience. Some passengers may prefer to buy a multi-ride book of tickets or a pass, for example, instead of paying cash whenever a copayment is required.

Non-cash forms of exchange also are appropriate when a county has another source of financial aid for passenger fare assistance, which would cover part, or all of the copayment charged to a passenger. Typically, in such cases, a passenger would present a ticket or coupon to the driver as evidence that their ride is being subsidized. The passenger would then pay a reduced copayment, or nothing, and the transportation provider would later redeem the tickets or coupons for the unpaid copayments amount.

Two requirements apply for counties using 85.21 aid in a passenger fare assistance program:

1. A county may not directly subsidize a provider of service with 85.21 aid while it subsidizes the users of that same service with 85.21 aid.
2. When 85.21 aid is administered as part of a passenger fare assistance program, the aid may not pay the entire fee charged to a user (unless the fee has been waived).

### PERIOD FOR USING FUNDS

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Chapter 85.21 aid allocated for 2024 (and associated county match) may be spent or obligated only for allowable net operating or equipment expenses incurred between January 1, 2024 and December 31, 2024.<sup>1</sup>

State 85.21 aid which has not been expended for 2024 expenses must be returned to the Department unless the aid is to be held by the county in trust. If a county is unable to spend its 85.21 within the calendar year, they should contact the 85.21 Program Manager for guidance and to develop a plan to spend the funds.

### FINANCIAL MANAGEMENT STANDARDS AND AUDITS

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County financial management standards and record-keeping practices must be adequate to:

- identify the amounts and dates of all project expenses and must be supported with valid receipts, invoices or other records;
- prevent the charging of ineligible expenses to the 85.21 grant;
- identify the county matching share for audit purposes;
- identify passenger revenue earned from 85.21 services;
- allocate project expenses to the appropriate sponsoring program (if more than one program financially sponsors or subsidizes a project) and prevent double-charging of expenses to different programs; and
- prevent the “carry-over” of a balance of 85.21 which has not been expended during the year or retained in trust as allowed by 85.21(3)(c), Wis. Stats.

Counties are subject to program and project audits by the Department at any time. The Department may withhold future 85.21 aid until the county demonstrates that it has satisfactorily resolved any audit deficiencies found.

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<sup>1</sup> Generally, operating expenses are incurred when a service is performed and equipment expenses are incurred when purchase orders are executed. Revenue from a given service is earned when the service is provided.



## TREATMENT OF PASSENGER REVENUE

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Passenger revenue earned during 2024 should be deducted from expenses incurred during 2024 to determine net expenses eligible for reimbursement from state aid and local match. Passenger revenue includes both voluntary contributions and required copayments or fares. **Counties must account for all passenger revenues, including revenues retained by subcontractors, in their project budgets.**

## ALLOWABLE & UNALLOWABLE COSTS

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See **Appendix B** for a complete listing of allowed and disallowed costs.

## THIRD PARTY CONTRACTS

Counties must have an executed contract, agreement, purchase order, or legal equivalent to use 85.21 aids to purchase service from or make a grant to a third party. Additionally, transportation service contracts with a total annual expense of \$10,000 or more must be obtained through a competitive public procurement process and such contracts must be competitively rebid at least once every five years.

The following situations are exempt from the third-party contract requirement:

- Expense reimbursement arrangements for volunteer drivers.
- Grants or service purchases costing \$100 or less per occurrence (known costs for service purchases cannot be broken down into quarterly or monthly installments of \$100 or less to avoid the requirement for third party agreements).

Counties choosing to provide funding to, or purchase service from, third parties retain the responsibility for complying with all 85.21 program requirements. Consequently, the Department recommends that all contracts extend the same requirements to the third party and include clauses addressing the following:

- Length or term of contract
- Description of services to be performed
- Required use of passenger revenue to offset transportation expenses
- Cost standards
- Return of 85.21 aid spent on unallowable expenses
- Contract maximum
- Method of payment
- Reporting requirements

- Recordkeeping requirements
- Right of WisDOT or county personnel to conduct audit

No contract between a county and a third party will release the county from its contractual obligations to the Department under this program.

## REPORTING

Counties must keep accurate records for the transportation services that receive 85.21 aid. The Department requires counties to complete **quarterly ridership reports** and **annual financial reports** that provide a more detailed cost accounting.

\*Please note, if contracted services are used to provide services under this section, the provider must be able to provide the information as prescribed by WisDOT. Any contractor must submit the reports to the counties for review before the county submits the report to WisDOT.

### **Quarterly Reporting by Project**

- January 1 – March 31; due April 30
- April 1 – June 30; due July 31
- July 1 –September 31; due October 31
- October 1 – December 31; due January 31

### **Annual Financial Report**

- January 1 thru December 31; due March 31

## APPLICATION INSTRUCTIONS AND FORMS

### ACCESS

**Important** - Applications for the 2024 Section 85.21 program will be submitted on WisDOT's [BlackCat® Grant Management System](#).

If you do not already have a username and password to access BlackCat®, please email [specialized.transit@dot.wi.gov](mailto:specialized.transit@dot.wi.gov) with the information below to receive access:

- Name
- Organization and Position Title
- Email Address
- Phone Number

All application materials must be submitted online through the BlackCat Grant Management System.

### APPLICATION COMPONENTS

1. Complete Public Notice requirement
2. Complete Public Hearing requirement
3. Complete Local Board Review requirement
4. Complete and submit application in BlackCat online grant management system
  - a. Update county and contact information
  - b. Complete and upload "Application Workbook"
  - c. Upload Transmittal Letter
  - d. Upload Public Hearing and Public Notice documents
  - e. Upload Local Review documents
  - f. Complete "Spending Plan" section
  - g. Complete "Certifications"
  - h. Submit grant application

Upon review and approval of an application, the Department will issue a grant agreement to be executed between the Department and the county. The grant agreement will be effective from January 1, 2024, through December 31, 2024.

## LOCAL REVIEW REQUIREMENTS

### LOCAL REVIEW FORM

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Counties must offer their local aging unit opportunity to comment on their annual 85.21 application or participate in its preparation. If the aging unit and/or its representatives are members of a county's transportation coordinating committee (TCC) or equivalent, the committee's review of the application satisfies this requirement. If a county's TCC does not include members of its s. 51.42 and s. 51.437 board(s) of directors, then the application must be presented to the 51.42/51.437 board(s) for review.

### PUBLIC NOTICE AND PUBLIC HEARING

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Counties are required to hold a public hearing prior to application submission. The hearing is to inform interested parties of the county's plan for spending 85.21 funds and to receive their comments. The hearing does not need to be held separately from other hearings; it may, for example, be combined with hearings on a county's aging plan. If such a combined hearing is held, the county must be sure that its public hearing notice identifies the 85.21 application as a subject of the hearing. The public hearing is subject to the following specific requirements:

- **The public hearing must be held at least 14 days prior to application submittal** and evidence of the meeting must be included as part of the 85.21 application.
- **Notice of the hearing must be published at least 10 days prior to the hearing** in the official county newspaper or other newspaper likely to be read by people in the county. If a local newspaper is not a viable option, reasonable digital alternatives are acceptable. The hearing notice must summarize the 2024 85.21 projects and budget.
- Copies of a preliminary draft application must be available for public review. The published hearing notice must indicate where copies of the draft are available. The preliminary draft need not be a complete application, but it should address all substantive elements of the specialized transit services funded under 85.21.
- The hearing should be scheduled at a time and in an accessible location that will encourage attendance. The notice must include an offer of transportation to the hearing for seniors and individuals with disabilities.
- The hearing must include a review of the effective coordination plan as it relates to the proposed projects including a discussion of needs and service gaps, and relevant

available services including route and hours of operation.

Complete the public hearing and notice form (see Appendix D) to document your 85.21 public hearing; be sure to do the following:

- Attach a copy of the public hearing notice
- Provide a summary of any public comments that were made at the hearing
- Attach the meetings minutes in which the application was approved.

## WORKBOOK INSTRUCTIONS

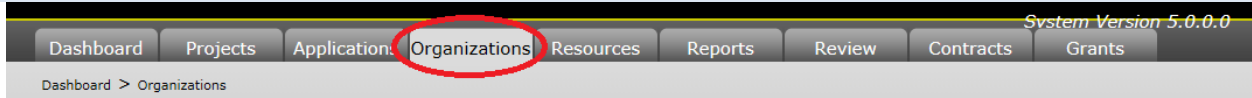
**Enter information only in the gray cells; other cells (light blue) are set up to autofill based on values you enter in the gray cells.**

The workbook can be accessed via the Application tab in BlackCat.

- 1. Applicant Info** - Complete all gray fields.
- 2. Checklist** - Use this form to ensure your application is complete.
- 3. Vehicle Inventory** – Provide information for each vehicle used. Review Section 5310-funded vehicles in the BlackCat system under your “Organizations” tab.
- 4. Third-Party Contracts** – List any third-party contracting in your 85.21 program:
  - Complete the third-party contracting form (Excel spreadsheet); and
  - Attach copies of all executed third-party contracts under “Resources” in BlackCat. If a third-party contract is pending, attach a draft copy and list the parties from whom you will purchase service. Indicate the final year in which the contracted service was subject to a bid, RFP, or RFQ process.
- 5. Trust Fund Plan** - If the county plans to spend money from its trust fund in 2024, place a portion of its 2024 85.21 aid in trust, or hold 85.21 aid in trust for expenditures beyond 2024, complete the trust fund plan template (Excel spreadsheet). For other non-vehicle equipment expenditures, use the “Item” column in the template or the “Narrative” space to briefly describe the item and how it will serve the county’s specialized transportation program. If the county has no trust fund, you need not complete this section.
- 6. Project Tab(s)** – *Description of Project(s)/Proposed Budget* - Use this section to describe all projects that will receive 85.21 funds and complete the proposed budget by project. The Excel spreadsheet contains several identical project budget worksheets (“Project Budget #1”, ... “Project Budget #8”). **Complete a separate worksheet for each project/project type** (i.e., a project you consider part of your county’s 85.21 program to provide specialized transit services). Passenger revenues should include all collected revenues, including those retained by contractors.
- 7. Summary Tab** - This sheet is entirely auto-filled and requires no user-entered data; adjustments need to be made in the tab for a specific project.

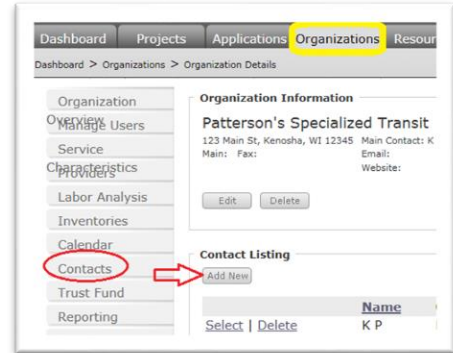
# STEP-BY-STEP INSTRUCTIONS FOR APPLICATION SUBMISSION

## STEP 1 – ORGANIZATION TAB



Complete the following under the Organizations tab:

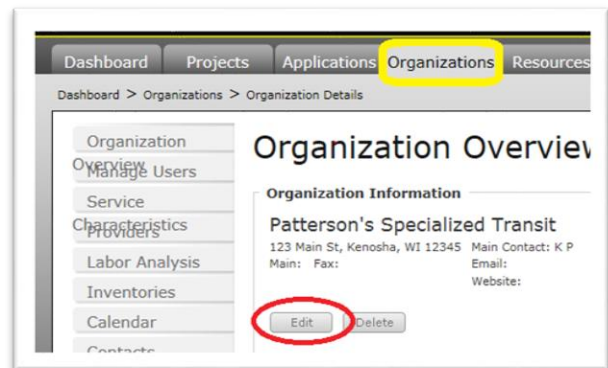
- Contacts** – Select “Contacts” and then “Add New” under the Contact Listing category. **Please enter all possible contacts for your organization and be sure to include their title.**



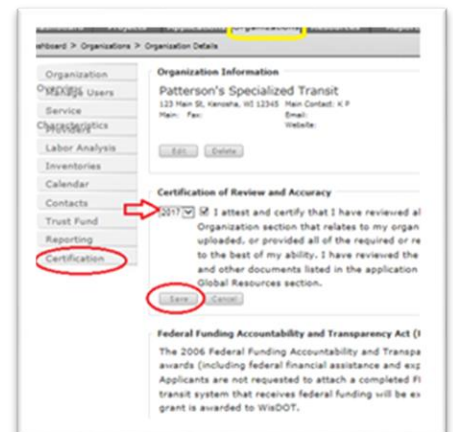
- Agency Details** – On the left-hand menu, select Organization and then the Edit button under the Organization Information.

- Fill in/verify all information under the “Organization details” section. Please note: this information, especially “primary contact” is what WisDOT will use to create contact and distribution lists for program announcements.

- Complete “Service Characteristics”, “Service hours” and “Fares,” if applicable.



- Certification of Review and Accuracy** – Prior to submitting your application, you must complete all applicable certifications for the 2024 calendar year. (Make sure to select appropriate year and click save.)  
*Please note, the Federal Funding Accountability and Transparency Act (FFATA) Certification is **not** required for the 85.21 grant.*



## STEP 2: APPLICATION TAB

Open the 2024 application

### 1. Open the Application

- a. Click on the "Application Tab"
- b. Select 2024 from the Year drop-down menu
  - i. *The first time you go into the application you will select the "New" tab to display current grant opportunities.*
  - ii. *Every time after you will find your application on the "Pending" tab.*
- c. Click "Apply" next to the 2024 Specialized transportation assistance program for counties (85.21) Application

### 2. Upload application forms

- a. Download all forms to your computer and save.
- b. Complete all forms on your computer and save.
- c. Upload completed forms to BlackCat.

**Application Forms**

Before you can submit this opportunity you would need to download and re-upload all necessary documents.

Form	
<a href="#">Download</a> - Guidelines	
<input checked="" type="checkbox"/> <a href="#">Download</a> - Application Workbook	<a href="#">Re-Upload</a>
<input type="checkbox"/> <a href="#">Download</a> - Transmittal Letter	<a href="#">Attach Upload</a>
<input type="checkbox"/> <a href="#">Download</a> - Public Hearing and Notice	<a href="#">Attach Upload</a>
<input type="checkbox"/> <a href="#">Download</a> - Local Review Form	<a href="#">Attach Upload</a>

Click to download the instructions, samples, and/or templates for this item.

"Re-upload" lets you know that a document has already been uploaded, click to view the document or upload a different document.  
*note: only 1 document can be stored, uploading another document REPLACES one already uploaded.*

"Attach Upload" to upload your completed document.

- d. Verify upload is completed by confirming all checkmarks are green.

**Application Forms**

Before you can submit this oppo

Form	
<a href="#">Download</a> - Guidelines	
<input checked="" type="checkbox"/> <a href="#">Download</a> - Applicator	
<input checked="" type="checkbox"/> <a href="#">Download</a> - Transmittal	
<input checked="" type="checkbox"/> <a href="#">Download</a> - Public Hea	
<input checked="" type="checkbox"/> <a href="#">Download</a> - Local Revi	

**3. Spending Plan** - Enter each project into the spending plan – this should match with each project entered in the application workbook.

a. Select Project Type from list

	Type Name	Amount	Note
<a href="#">Insert</a>	Select One		
	<b>Total Available</b>	\$100.00	
	<b>Total Plan</b>	\$0.00	
	<b>Remaining</b>	\$90.00	

b. Enter dollar amount of **allocation and/or trust fund** that will be used toward this project.

\*HINT: do not enter decimals, enter whole dollars (i.e. 50 for \$50.00)

	Type Name	Amount	Note
<a href="#">Edit</a>	Local Match for 5310	\$25.00	
<a href="#">Delete</a>			
<a href="#">Update</a>	Vehicle Purchase	50	
<a href="#">Cancel</a>			
<a href="#">Insert</a>	Select One		
	<b>Total Available</b>	\$100.00	

c. Enter notes such as name of project and/or contractor. (Not required)

d. Select "Insert" when complete.

When finished, click her to insert this plan.

	Type Name	Amount	Note
<a href="#">Insert</a>	Select One		
	<b>Total Available</b>	\$100.00	
	<b>Total Plan</b>	\$0.00	
	<b>Remaining</b>	\$90.00	

**4. Click "Submit" in upper right-hand corner.**



## APPENDIX A - 2024 ALLOCATION OF 85.21 AID

### Wisconsin 85.21 County Elderly and Disabled Transportation Assistance Program 2024 Allocation

Total Appropriation: \$15,977,800  
Minimum County Allocation: \$79,889

County	2024 Allocation	Local Match	Share of 85.21 Allocations	Share of WI Disabled & Elderly
Adams	\$92,259.00	\$18,451.80	0.58%	0.60%
Ashland	\$79,889.00	\$15,977.80	0.50%	0.33%
Barron	\$149,521.00	\$29,904.20	0.94%	0.98%
Bayfield	\$79,889.00	\$15,977.80	0.50%	0.43%
Brown	\$641,335.00	\$128,267.00	4.01%	4.19%
Buffalo	\$79,889.00	\$15,977.80	0.50%	0.28%
Burnett	\$79,889.00	\$15,977.80	0.50%	0.45%
Calumet	\$114,984.00	\$22,996.80	0.72%	0.75%
Chippewa	\$169,339.00	\$33,867.80	1.06%	1.11%
Clark	\$84,759.00	\$16,951.80	0.53%	0.55%
Columbia	\$154,798.00	\$30,959.60	0.97%	1.01%
Crawford	\$79,889.00	\$15,977.80	0.50%	0.33%
Dane	\$1,161,859.00	\$232,371.80	7.27%	7.59%
Dodge	\$229,890.00	\$45,978.00	1.44%	1.50%
Door	\$118,521.00	\$23,704.20	0.74%	0.77%
Douglas	\$132,904.00	\$26,580.80	0.83%	0.87%
Dunn	\$115,231.00	\$23,046.20	0.72%	0.75%
Eau Claire	\$273,477.00	\$54,695.40	1.71%	1.79%
Florence	\$79,889.00	\$15,977.80	0.50%	0.12%
Fond du Lac	\$287,837.00	\$57,567.40	1.80%	1.88%
Forest	\$79,889.00	\$15,977.80	0.50%	0.20%
Grant	\$129,300.00	\$25,860.00	0.81%	0.85%
Green	\$107,035.00	\$21,407.00	0.67%	0.70%
Green Lake	\$79,889.00	\$15,977.80	0.50%	0.41%
Iowa	\$79,889.00	\$15,977.80	0.50%	0.43%
Iron	\$79,889.00	\$15,977.80	0.50%	0.17%
Jackson	\$79,889.00	\$15,977.80	0.50%	0.40%
Jefferson	\$223,356.00	\$44,671.20	1.40%	1.46%
Juneau	\$86,151.00	\$17,230.20	0.54%	0.56%
Kenosha	\$410,659.00	\$82,131.80	2.57%	2.68%
Kewaunee	\$79,889.00	\$15,977.80	0.50%	0.40%
La Crosse	\$288,500.00	\$57,700.00	1.81%	1.89%
Lafayette	\$79,889.00	\$15,977.80	0.50%	0.30%
Langlade	\$79,889.00	\$15,977.80	0.50%	0.46%
Lincoln	\$90,351.00	\$18,070.20	0.57%	0.59%

<b>County</b>	<b>2024 Allocation</b>	<b>Local Match</b>	<b>Share of 85.21 Allocations</b>	<b>Share of WI Disabled &amp; Elderly</b>
Manitowoc	\$248,854.00	\$49,770.80	1.56%	1.63%
Marathon	\$368,408.00	\$73,681.60	2.31%	2.41%
Marinette	\$147,905.00	\$29,581.00	0.93%	0.97%
Marquette	\$79,889.00	\$15,977.80	0.50%	0.39%
Menominee	\$79,889.00	\$15,977.80	0.50%	0.07%
Milwaukee	\$2,194,003.00	\$438,800.60	13.73%	14.34%
Monroe	\$127,010.00	\$25,402.00	0.79%	0.83%
Oconto	\$124,685.00	\$24,937.00	0.78%	0.81%
Oneida	\$137,159.00	\$27,431.80	0.86%	0.90%
Outagamie	\$443,152.00	\$88,630.40	2.77%	2.90%
Ozaukee	\$248,495.00	\$49,699.00	1.56%	1.62%
Pepin	\$79,889.00	\$15,977.80	0.50%	0.15%
Pierce	\$97,121.00	\$19,424.20	0.61%	0.63%
Polk	\$141,550.00	\$28,310.00	0.89%	0.93%
Portage	\$178,938.00	\$35,787.60	1.12%	1.17%
Price	\$79,889.00	\$15,977.80	0.50%	0.34%
Racine	\$521,422.00	\$104,284.40	3.26%	3.41%
Richland	\$79,889.00	\$15,977.80	0.50%	0.38%
Rock	\$441,940.00	\$88,388.00	2.77%	2.89%
Rusk	\$79,889.00	\$15,977.80	0.50%	0.33%
Saint Croix	\$201,349.00	\$40,269.80	1.26%	1.32%
Sauk	\$177,591.00	\$35,518.20	1.11%	1.16%
Sawyer	\$79,889.00	\$15,977.80	0.50%	0.43%
Shawano	\$127,200.00	\$25,440.00	0.80%	0.83%
Sheboygan	\$303,590.00	\$60,718.00	1.90%	1.98%
Taylor	\$79,889.00	\$15,977.80	0.50%	0.37%
Trempealeau	\$79,889.00	\$15,977.80	0.50%	0.50%
Vernon	\$85,422.00	\$17,084.40	0.53%	0.56%
Vilas	\$96,436.00	\$19,287.20	0.60%	0.63%
Walworth	\$293,114.00	\$58,622.80	1.83%	1.92%
Washburn	\$79,889.00	\$15,977.80	0.50%	0.42%
Washington	\$344,987.00	\$68,997.40	2.16%	2.25%
Waukesha	\$1,030,392.00	\$206,078.40	6.45%	6.74%
Waupaca	\$156,898.00	\$31,379.60	0.98%	1.03%
Waushara	\$85,770.00	\$17,154.00	0.54%	0.56%
Winnebago	\$440,491.00	\$88,098.20	2.76%	2.88%
Wood	\$234,516.00	\$46,903.20	1.47%	1.53%

## APPENDIX B - COST STANDARDS

### ALLOWABLE EXPENSES

LABOR: Wages paid to employees in exchange for labor. These are wages typically paid to drivers, passenger aides or escorts (but not volunteers), dispatchers, service coordinators or brokers, mechanics, and administrative, or other technical personnel.

FRINGE BENEFITS: Fringe benefits paid on behalf of an employee to other parties such as an insurance company or a governmental tax authority. These payments are for FICA, pension plans, medical and dental insurance, and other insurance plans. Fringe benefits may also include payments to employees for something other than work such as paid sick leave, paid holidays, and paid vacation.

MATERIALS AND SUPPLIES: The cost of materials or supplies consumed from inventory or purchased for immediate use. Materials and supplies include: tangible products such as fuel and lubricants, tires, equipment maintenance supplies, spare parts, and office supplies. Freight charges and sales tax (unless purchasing agency is tax exempt) can be included.

UTILITIES: Payments to utility companies for gas, water, sewer, electricity, radio repeater service, telephone service, etc. Only the portion of utility expenses related to operating the 85.21 transportation service are allowable costs. Cable/satellite television is considered entertainment (unallowable cost) rather than a necessary utility.

LIABILITY AND CASUALTY COSTS: Payments for insurance programs that protect a project from losses incurred or caused by the project; payments to others for their losses caused by the project.

TAXES: Taxes levied on a project by federal, state, and local governments, but not including income taxes.

PURCHASED TRANSPORTATION SERVICE: Payments made to third parties that provide transportation service. Such organizations would typically be a Section 5310 grantee or other private, non-profit corporation; a public transit system; or, a private contractor such as a school bus operator, taxi service, or lift-equipped van service.

OTHER PURCHASED SERVICES: Payments made to third parties for services that support the provision of specialized transportation service. These services could include: maintenance of vehicles or related equipment; professional and technical services such as training employees and volunteers; advertising or promotion; printing; custodial services; temporary help; accounting and auditing.

LEASES AND RENT: Payments for the use of equipment or facilities owned by other organizations. Items typically leased or rented include: vehicles, two-way radio equipment, office space, or vehicle storage space.

PURCHASE OF EQUIPMENT: Purchase of equipment to provide specialized transportation service; this typically includes: passenger-carrying vehicles; vehicle-mounted wheelchair loading and securement devices; two-way radio equipment; maintenance equipment; or other durable goods or equipment used in providing specialized transportation service. If equipment is shared with non-specialized transportation functions, then only that part of the equipment's cost, which is proportional to its use in specialized transportation, is an allowable expense.

TRAVEL: Eligible travel expenses include: transportation, meals, out-of-town lodging, or related expenses such as parking incurred by employees, volunteers and other individuals as authorized by the county. Travel is allowed for specialized transportation service provided by employees or volunteers to eligible passengers, official project business, and travel by seniors and individuals with disabilities using personal or other available means of transportation when authorized by a county (includes fare assistance programs).

INTEREST: Interest on money borrowed over a short term (one year or less) for operating expenses or over a long term (more than one year) for equipment purchases.

ADVERTISING: Cost of purchasing service advertisements in media such as: newspapers, magazines, newsletters, radio, television, direct mailing, posters, or handouts. Allowable advertising subjects may include the recruitment of paid or volunteer personnel; solicitation of bids for goods and services; sale or disposal of property or services; and announcements of service information such as routes, schedules, or contact information. All advertising expenses must pertain specifically to specialized transportation projects.

VOLUNTEER HONORARIUMS AND RECOGNITION EVENTS: Costs of gifts, mementos, dinners and ceremonies in recognition of volunteered services. However, only one event or group of presentations per project year is an eligible expense.

SUBSCRIPTIONS AND MEETINGS: Book purchases and periodical subscriptions are allowable expenses if they directly pertain to the management, planning, and operation of transportation services. Such items must be procured for agency, not individual, use. Meeting or conference fees are allowable expenses when the primary purpose of the meeting is the dissemination of technical information. Fees for conferences or meetings designed to influence legislation are not allowed.

## UNALLOWABLE EXPENSES

DEPRECIATION: Depreciation accrued by public transit system operators, depreciation on facilities or equipment purchased with public (Federal, state or local) capital grants, depreciation on intangible assets, and depreciation more than the rate used for income tax purposes.

ENTERTAINMENT: The costs of amusement, social activities, and related activities.

FINES AND PENALTIES: Costs resulting from violations or failures to comply with laws and regulations.

CHARITABLE CONTRIBUTIONS AND DONATIONS: Not allowed under the 85.21 program.

BAD DEBT: Losses resulting from uncollectible accounts or other claims.

RESERVE FUNDS FOR FUTURE EXPENSES: Other than allowable Trust Fund deposits (see Appendix C), state aid may not be saved from one year to another for contingencies or general expenses.

LOBBYING: Program funds may not be used to cover the cost of any activity designed to influence law making.

ADVISORY COMMITTEES OR COUNCILS: The cost of advisory committees or councils is not allowed except when such groups are deemed necessary for the preparation of a technical study. The life or term of any such group may not exceed the term of the study.

GENERAL PUBLIC ADMINISTRATION: General county or local government operation costs as they incidentally pertain to the activities covered under the 85.21 program are not allowable expenses. Such costs would include those associated meetings of the county board and its subcommittees, and expenses of county officials whose regular duties do not include specialized transportation.

LAND ACQUISITION: Not allowed under the 85.21 program.

## ALLOWABLE EXPENSES CONDITIONED ON DEPARTMENT APPROVAL

AID HELD IN TRUST: State aid may be held in trust over multi-year periods for future expenses when specifically allowed by the Department under 85.21, Wis. Stats.; see Appendix C.

## APPENDIX C – TRUST FUNDS

In accordance with Trans Rule 1.05(2), “A county may retain and hold in trust all or part of the allocated aid which it receives ... for the purchase or maintenance of transportation equipment.”

Counties with trust arrangements are required to follow specific guidelines governing management and use of trust funds:

1. A county board of supervisors must authorize establishment of this fund by board resolution which must be submitted to WisDOT for approval.
2. Expenditures of aid from a county's trust fund shall be made according to a plan approved by the department. The county's plan should indicate what the trust fund will be used to purchase. A plan may be amended at any time with the department's approval.
3. Aid may be held in trust only for “capital-like” expenditures for items having an expected useful life of at least two years. These purchases must be related to providing transportation service for seniors or individuals with disabilities.
4. All assets must be expended, and a county may not establish a permanent minimum balance.
5. Balance may not exceed \$80,000.
6. Trust fund reporting should consist of unspent allocation, interest earned, and **pre-approved** adjustments only. Counties shall retain records showing the dates and amounts of deposits to the trust fund; the dates, amounts and purposes of expenditures from the fund; and interest earned by the fund.

Counties with established 85.21 trust funds must review, and update spend plans annually. This is required as part of the “Annual Financial Report” submitted for this grant program. In their 2024 budget for 85.21 program(s), counties will estimate the amount of 2024 aid that will be added to their trust fund account.

### GENERAL INFORMATION ON AIDS HELD IN TRUST

#### ALLOWABLE USES

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Trans Rule 1 allows a county to use trust fund balances to purchase or maintain **capital** equipment used in its specialized transit program. All such expenditures must conform to the county's Department-approved trust fund plan which lists specific planned expenditures and is pre-approved by WisDOT Specialized Transit Managers.

## MANAGEMENT OF AIDS HELD IN TRUST

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Counties may elect but are not required to hold state aid in trust. If a county wishes to hold aid in trust, it must be authorized to do so by resolution of its Board of Supervisors. No other organization but a county may hold 85.21 aids in trust.

A county may hold in trust either part or all of its allocation from a given year. However, the trust fund balance is subject to certain constraints:

1. It must be consistent with the county's latest trust fund plan.
2. A county's trust fund plan must expend all funds held in trust. The Department suggests planning to spend funds within three years of deposit.
3. The Trust Fund balance may not exceed \$80,000. The Wisconsin Department of Transportation may require return of any balance exceeding this allowance.

Although a county need not physically segregate aids held in trust from other cash assets, **it must account for the aids separately from other funds**. It may also invest the aids either separately or pooled with other funds, but the interest earned by the aids must be added to the aids held in trust.

When state aid is pooled with other funds for investment purposes, the interest earned by the aid must be added at least annually to the trust fund. The annual interest earned by state aid in a pooled investment is to be computed from the average annual rate of return from all the invested funds and the average monthly balance of aid held in trust during the year.

Neither state law nor administrative rule specifies how long funds may be held in trust; however, the Department suggests counties develop a plan to spend funds held in trust over a three-year span.

Counties must keep records of all aids held in trust, to include the dates and amounts of additions to a trust fund (including interest); dates, amounts and purpose of expenditures from the fund; and the fund balance. These records serve as the basis for trust fund information submitted to the Department in annual financial reports.

Trust arrangements may be terminated by a county or by the Department. Upon termination, the county must refund the balance of unspent funds to the Department. A county may also be required to refund expenditures for items that are not included in a plan approved by the Department.

## LOCAL MATCH

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Annually, counties must appropriate a local share equal to 20 percent of state aid. The county must spend all local match to deposit unspent aid funds in trust. This means:

- only state funds are to be held in trust; and
- when a county makes an expenditure from its trust account, no local match is required, since the matching share for this aid was spent in the year the aid was placed in trust.

## PASSENGER REVENUE

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All passenger revenues (donations, fares, copayments, etc.) earned during a year from transportation services that are sponsored with state aid must be used to offset service expenses. Therefore, passenger revenues earned from state-sponsored services cannot be saved, carried over, or held in trust.

## ESTABLISHMENT OF COUNTY TRUST ARRANGEMENT

Counties wishing to establish a new trust fund to hold 2023 state aids in trust should submit the following items to the Department no later than March 1, 2024. Counties must have Department-approved trust funds in place before hold 85.21 aid in trust.

Department approval is predicated on review of the following three items:

- Transmittal letter
- County board's authorizing resolution
- Trust fund plan

These items should be sent to the:

Specialized Transit Program Manager  
Bureau of Transit, Local Roads, Railroads & Harbors  
Wisconsin Department of Transportation  
P. O. Box 7913  
Madison, WI 53707-7913

After reviewing the submitted materials, the Department will notify the county whether its trust arrangement has been approved. This notification will come in the form of a letter of authorization containing the approval and conditions for holding aid in trust.

A county may take the steps needed to hold 85.21 aids in trust at any time. Once the Department approves the county's submittal, further Department review normally is required only when the county amends its trust fund plan.



## APPENDIX D – APPLICATION TEMPLATES

### TRANSMITTAL LETTER - SAMPLE

***\*The Transmittal letter must be on official county letterhead – template in word format is available through download on the BlackCat Online Grant Management System\****

[ Date ]

85.21 Program Manager  
Bureau of Transit and Local Roads, Railroads and Harbors  
Wisconsin Department of Transportation  
P.O. Box 7913  
Madison, WI 53707-7913

Dear 85.21 Program Manager:

[Insert Name of County] County hereby submits its application for \$[Insert amount of allocation] in state assistance under section 85.21 of Wisconsin Statutes to provide specialized transportation services for seniors and individuals with disabilities in 2024. The County assures that a minimum of \$[insert amount of local match] in local funds has been included in its adopted 2024 budget and will be available as the share required to match the 85.21 grant.

I certify that the information contained in this application is accurate.

Sincerely,

[Insert Name]  
[Insert Title]

PUBLIC NOTICE AND HEARING FORMS - SAMPLE

***\*The following forms and templates for the public notice and public hearing requirement is available through download on the BlackCat Online Grant Management System\****

*Must include the following items:*

- 1. Date of notice publication*
- 2. Copy of actual notice publication from the paper*
- 3. Date of public hearing*
- 4. Include public comments made (if none, state "none")*
- 5. Copy of the meeting minutes when approval of the application was granted*

Date of notice publication:	
(Insert copy of the published notice here) <i>*You will want to insert a copy of actual notification from the paper.*</i>	

Date of public hearing	
(Please provide a summary of any public comments that were made at the meeting in regard to the application.)	

Be sure to attach **a copy the meeting minutes** during which the approval for the application was granted.

## LOCAL REVIEW FORM - SAMPLE

***\*This is a sample only – the official form is available through download on the BlackCat Online Grant Management System\****

Are the committees or commissions on aging, county aging unit and boards (created under ss. 51.42 and 51.437, Stats.) part of the county's Transportation Coordination Committee or equivalent?

Yes

No

If you selected No, you **MUST** include evidence of their review of this application and upload to the Online Grant Management section for "Local Review" with this form.

Such evidence may include:

- Written endorsements
- Recommendations or criticism
- Minutes of meetings attended by the above organizations at which the application was discussed

## General Instructions

Please review ALL pages

**This Annual Financial Report is to be completed by all county governments receiving financial assistance under Wis. Stats. 85.21.**

### Due Date(s):

**Annual Report due March 31**

Refund (if any) due June 30

### How to submit annual report:

**Upload** the signed certification (PDF) and the completed annual financial report (Excel) to a folder under "Resources" in the BlackCat Online Grant Management System. Inform WisDOT Specialized Transit program manager by e-mail.

### Components of Annual Report:

**\*Complete the yellow boxes for the following five parts\***

***\*Do not make any entries in the blue boxes\****

#### **Part 1 - Projects**

If you have more than 5 projects, additional sheets are available after the "Certification" sheet.

**Instructions continued on the following pages:**

- a. Detailed information for completing project tabs **(Page 2)**
- b. Cost Allocation definitions **(Page 3)**
- c. Methods for charging Indirect costs **(Page 3)**

#### **Part 2 - Trust Fund**

All counties with a trust agreement in place, must detail balances and expenses for that fund. If balance is zero, please enter \$0. Please use the Explanation / Notes box at the end of this tab to explain any special circumstances.

#### **Part 3 - Allocation Status**

Summarizes (for all projects combined) the amount your county's allocation was (a) spent, (b) moved to your Trust Fund and/or (c) to be refunded to WisDOT.

#### **Part 4 - Summary of Financial Operations**

Summarizes the project reports listed in Part 3. This sheet auto-populates from entries made on the individual project sheets.

#### **Part 5 - Certification**

Complete all yellow fields, print & sign.  
Scan & save signed copy as PDF file; upload to BlackCat Resources.

**Please contact your Program Manager for technical assistance:**

**Lori Jacobson (608-266-1128) Eric Anderson (608-267-1845) or [Specialized.Transit@dot.wi.gov](mailto:Specialized.Transit@dot.wi.gov)**

**Item 1:** List the project expenditures that were incurred during the year.  
Total project expenditures for the full year should be described.

- Expenses must have been incurred during the period 01/01/24 through 12/31/24.
- Services to be provided in 2024 may not be prepaid with 2023 aid.
- All equipment purchased in 2024 with s. 85.21 aid must be fully described. For any vehicles, state the type, make, model year, seating capacity, and whether or not it is equipped with wheelchair lifts or ramps. For other equipment state the quantity, manufacturer's name, model, and (if appropriate) the proportion of time it will be used in the elderly and disabled transportation program.
- Do not include documentation with this report; however, you must be able to justify expenditures and provide documentation upon request. (For example, personnel expenditures are to be supported by payrolls which in turn are backed by time records. If personnel do not spend their time exclusively on s. 85.21 project activities, then their wages and benefits chargeable to the s. 85.21 program should be supported by an equitable time distribution scheme. Other expenses should be supported by invoices or other written evidence.)

**Item 2:** Indicate the amount of passenger revenue that is applied to 2024 expenses.

- This figure must include passenger revenue that was earned in 2024 from services sponsored with s. 85.21 aid; **this includes passenger revenue collected and retained by a subcontractor.**
- All passenger revenue earned should be spent on expenses incurred in the year the revenue was earned.
- Any unspent 2024 passenger revenue must be spent by June 30, 2025; after this date, unspent passenger revenue becomes payable to WisDOT.
- Passenger revenue is automatically subtracted from total expenditures and the results shown on the net expenditures line.

**Item 3:** **Indicate the amounts and sources of aid to which the net expenditures were charged.**

- If a project pays for its elderly and disabled transportation activity with funds from various sources, show how expenditures are allocated to different sources so that no expenditures are double-charged and so that WisDOT can determine what each source paid.

## Cost Allocation Definitions

Direct Costs:

Direct costs are those that can be identified specifically with a particular cost objective. These costs may be charged directly to grants, contracts, or to other programs.

**Indirect Costs:**

The term "indirect costs," as used on the 85.21 program, applies to generalized costs related to providing transportation services. Indirect costs are those expenses that are:

- (a) incurred for a common purpose that benefits more than one project or program, AND
- (b) cannot be easily assigned to a project or program without extraordinary effort.

If Indirect Costs are indicated, you must provide detail to ensure compliance with program.

## Methods for Charging Indirect Costs

Counties are able to charge indirect costs to their s. 85.21 grant. There are two methods in which these costs may be charged to the s. 85.21 grant.

**Method 1:**

The recipient may charge direct costs to the grant as well as indirect costs allocated over an equitable base.

Direct labor must be supported by time sheets or time studies. If time studies are used to distribute labor, they should be performed using guidelines set by WisDOT.

**Method 2:**

The recipient may charge direct costs to the grant as well as a fixed percentage of direct costs to cover indirect costs. WisDOT's Bureau of Transit, Local Roads, Railroads and Harbors has set the indirect cost rate at 10% of direct costs. Counties using this method should indicate the types of expenses included in the indirect cost allocation, which should not duplicate any of the expenses included as direct costs. Remember that costs for general administration and for advisory committees or councils are not permitted expenses under this program.

For purposes of applying the indirect cost percentage, pass-through expenditures, such as those included in capital equipment purchases or service contracts will be excluded from direct costs.

Direct labor costs must be supported by time sheets. In no case may a direct labor allocation based on time studies or estimates be allowed under this method.

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

**Name of Project:**

--

Section Description	Amount
---------------------	--------

<b>1. Annual Expenditures/Expenses</b>	
--	--

**Personal Services**

Drivers/Mechanics (salaries, wages, fringe benefits)	
Administrative Personnel (salaries, wages, fringe benefits)	
Volunteer Driver Reimbursement	
<b>Total:</b>	<b>\$0.00</b>

**Contractual Services**

1.	Transportation Sub-Contractor(s)	
2.		
3.		
4.		
5.		
	Repairs and Maintenance	
	Utility Services	
	Other Contractual Services	
	<b>Total:</b>	<b>\$0.00</b>

**Fare Assistance Programs**

Fare Assistance	
<b>Total:</b>	

**Office Operations**

Office Supplies & Expenses	
<b>Total:</b>	

**Vehicle Operations**

Fuel and Lubricants	
Tires, Parts and Supplies	
Vehicle Leases	
<b>Total:</b>	<b>\$0.00</b>

**Fixed Charges**

Insurance	
Facility Rental	
Communications Equipment & Other Rentals	
<b>Total:</b>	<b>\$0.00</b>

**Capital Outlay**

1.	Major Maintenance (greater than \$1,000)	
2.	Capital Equipment (describe below)	
3.		
	<b>Total:</b>	<b>\$0.00</b>

**Indirect Costs**

1.	Specify Types of Costs Covered:	
2.		
3.		
	<b>Total:</b>	<b>\$0.00</b>

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

Section Description	Amount
---------------------	--------

**2. Annual Net Expenditures - Summary**

Total Annual Expenditures & Expenses	\$0.00
Passenger Revenue	
<b>Net Expenditures (summary)</b>	Expenses minus Revenue <b>\$0.00</b>

**3. Annual Net Expenditures - Funding Sources**

A. s.85.21 funds from CY2024 Allocation	
B. s.85.21 funds from Trust Fund	
C. County Levy	
D. Medicare	
E. Older American Act	
F. Tribal funds	
G. Other Funds (describe below)	
1.	
2.	
3.	
4.	
5.	
6.	

<b>Total actual funding received</b>	Funding payouts <b>\$0.00</b>
--------------------------------------	-------------------------------

**Summary vs. Breakout Cross-check (must equal zero)**  
 This value will equal zero (0) when the totals of Section 2 and 3 are the same.

Checksum **\$0.00**



**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

**Name of Project:**

--

Section Description	Amount
---------------------	--------

<b>1. Annual Expenditures/Expenses</b>
--

**Personal Services**

Drivers/Mechanics (salaries, wages, fringe benefits)	[Yellow Cell]
Administrative Personnel (salaries, wages, fringe benefits)	[Yellow Cell]
Volunteer Driver Reimbursement	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Contractual Services**

Transportation Sub-Contractor(s)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
4. [Yellow Cell]	[Yellow Cell]
5. [Yellow Cell]	[Yellow Cell]
Repairs and Maintenance	[Yellow Cell]
Utility Services	[Yellow Cell]
Other Contractual Services	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fare Assistance Programs**

Fare Assistance	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Office Operations**

Office Supplies & Expenses	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Vehicle Operations**

Fuel and Lubricants	[Yellow Cell]
Tires, Parts and Supplies	[Yellow Cell]
Vehicle Leases	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fixed Charges**

Insurance	[Yellow Cell]
Facility Rental	[Yellow Cell]
Communications Equipment & Other Rentals	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Capital Outlay**

Major Maintenance (greater than \$1,000)	[Yellow Cell]
Capital Equipment (describe below)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Indirect Costs**

Specify Types of Costs Covered:	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

Section Description	Amount
---------------------	--------

**2. Annual Net Expenditures - Summary**

Total Annual Expenditures & Expenses	\$0.00
Passenger Revenue	
<b>Net Expenditures (summary)</b>	Expenses minus Revenue <b>\$0.00</b>

**3. Annual Net Expenditures - Breakout By Funding Source**

A. s.85.21 funds from CY2022 Allocation	
B. s.85.21 funds from Trust Fund	
C. County Levy	
D. Medicare	
E. Older American Act	
F. Tribal funds	
G. Other Funds (describe below)	
1.	
2.	
3.	
4.	
5.	
6.	

<b>Total actual funding received</b>	Funding payouts <b>\$0.00</b>
--------------------------------------	-------------------------------

**Summary vs. Breakout Cross-check (must equal zero):**  
 This value will equal zero (0) when the totals of Section 2 and 3 are the same.

Checksum **\$0.00**

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

**Name of Project:**

--

Section Description	Amount
---------------------	--------

<b>1. Annual Expenditures/Expenses</b>
--

**Personal Services**

Drivers/Mechanics (salaries, wages, fringe benefits)	[Yellow Cell]
Administrative Personnel (salaries, wages, fringe benefits)	[Yellow Cell]
Volunteer Driver Reimbursement	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Contractual Services**

Transportation Sub-Contractor(s)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
4. [Yellow Cell]	[Yellow Cell]
5. [Yellow Cell]	[Yellow Cell]
Repairs and Maintenance	[Yellow Cell]
Utility Services	[Yellow Cell]
Other Contractual Services	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fare Assistance Programs**

Fare Assistance	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Office Operations**

Office Supplies & Expenses	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Vehicle Operations**

Fuel and Lubricants	[Yellow Cell]
Tires, Parts and Supplies	[Yellow Cell]
Vehicle Leases	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fixed Charges**

Insurance	[Yellow Cell]
Facility Rental	[Yellow Cell]
Communications Equipment & Other Rentals	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Capital Outlay**

Major Maintenance (greater than \$1,000)	[Yellow Cell]
Capital Equipment (describe below)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Indirect Costs**

Specify Types of Costs Covered:	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

Section Description	Amount
---------------------	--------

**2. Annual Net Expenditures - Summary**

Total Annual Expenditures & Expenses	\$0.00
Passenger Revenue	
<b>Net Expenditures (summary)</b>	Expenses minus Revenue <b>\$0.00</b>

**3. Annual Net Expenditures - Breakout By Funding Source**

A. s.85.21 funds from CY2022 Allocation	
B. s.85.21 funds from Trust Fund	
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D. Medicare	
E. Older American Act	
F. Tribal funds	
G. Other Funds (describe below)	
1.	
2.	
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4.	
5.	
6.	

<b>Total actual funding received</b>	Funding payouts <b>\$0.00</b>
--------------------------------------	-------------------------------

**Summary vs. Breakout Cross-check (must equal zero):**  
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Checksum **\$0.00**

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

**Name of Project:**

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Section Description	Amount
---------------------	--------

<b>1. Annual Expenditures/Expenses</b>	
--	--

**Personal Services**

Drivers/Mechanics (salaries, wages, fringe benefits)	
Administrative Personnel (salaries, wages, fringe benefits)	
Volunteer Driver Reimbursement	
<b>Total:</b>	<b>\$0.00</b>

**Contractual Services**

1.	Transportation Sub-Contractor(s)	
2.		
3.		
4.		
5.		
	Repairs and Maintenance	
	Utility Services	
	Other Contractual Services	
	<b>Total:</b>	<b>\$0.00</b>

**Fare Assistance Programs**

Fare Assistance	
<b>Total:</b>	

**Office Operations**

Office Supplies & Expenses	
<b>Total:</b>	

**Vehicle Operations**

Fuel and Lubricants	
Tires, Parts and Supplies	
Vehicle Leases	
<b>Total:</b>	<b>\$0.00</b>

**Fixed Charges**

Insurance	
Facility Rental	
Communications Equipment & Other Rentals	
<b>Total:</b>	<b>\$0.00</b>

**Capital Outlay**

1.	Major Maintenance (greater than \$1,000)	
2.	Capital Equipment (describe below)	
3.		
	<b>Total:</b>	<b>\$0.00</b>

**Indirect Costs**

1.	Specify Types of Costs Covered:	
2.		
3.		
	<b>Total:</b>	<b>\$0.00</b>

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

Section Description	Amount
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**2. Annual Net Expenditures - Summary**

Total Annual Expenditures & Expenses	\$0.00
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<b>Total actual funding received</b>	Funding payouts <b>\$0.00</b>
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Checksum **\$0.00**

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

**Name of Project:**

--

Section Description	Amount
---------------------	--------

<b>1. Annual Expenditures/Expenses</b>
--

**Personal Services**

Drivers/Mechanics (salaries, wages, fringe benefits)	[Yellow Cell]
Administrative Personnel (salaries, wages, fringe benefits)	[Yellow Cell]
Volunteer Driver Reimbursement	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Contractual Services**

Transportation Sub-Contractor(s)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
4. [Yellow Cell]	[Yellow Cell]
5. [Yellow Cell]	[Yellow Cell]
Repairs and Maintenance	[Yellow Cell]
Utility Services	[Yellow Cell]
Other Contractual Services	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fare Assistance Programs**

Fare Assistance	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Office Operations**

Office Supplies & Expenses	[Yellow Cell]
<b>Total:</b>	[Yellow Cell]

**Vehicle Operations**

Fuel and Lubricants	[Yellow Cell]
Tires, Parts and Supplies	[Yellow Cell]
Vehicle Leases	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Fixed Charges**

Insurance	[Yellow Cell]
Facility Rental	[Yellow Cell]
Communications Equipment & Other Rentals	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Capital Outlay**

Major Maintenance (greater than \$1,000)	[Yellow Cell]
Capital Equipment (describe below)	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Indirect Costs**

Specify Types of Costs Covered:	[Yellow Cell]
1. [Yellow Cell]	[Yellow Cell]
2. [Yellow Cell]	[Yellow Cell]
3. [Yellow Cell]	[Yellow Cell]
<b>Total:</b>	<b>\$0.00</b>

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

Section Description	Amount
---------------------	--------

**2. Annual Net Expenditures - Summary**

Total Annual Expenditures & Expenses	\$0.00
Passenger Revenue	
<b>Net Expenditures (summary)</b>	<b>Expenses minus Revenue</b> \$0.00

**3. Annual Net Expenditures - Breakout By Funding Source**

A. s.85.21 funds from CY2022 Allocation	
B. s.85.21 funds from Trust Fund	
C. County Levy	
D. Medicare	
E. Older American Act	
F. Tribal funds	
G. Other Funds (describe below)	
1.	
2.	
3.	
4.	
5.	
6.	

<b>Total actual funding received</b>	<b>Funding payouts</b> \$0.00
--------------------------------------	-------------------------------

**Summary vs. Breakout Cross-check:**  
 This value will equal zero (0) when the totals of Section 2 and 3 are the same.

Checksum **\$0.00**



**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

## Trust Fund Status Form

**Instructions:**

- Step 1 - Enter all withdrawals of funds held in Trust. Include item purchased and the owner or whom the item was purchased for (name of agency/contractor).  
 Please include details as much as room allows. In the case of vehicles, please state the type, make, model year, seating capacity and whether or not the vehicles are equipped with lifts or ramps.)
- Step 2 - Complete the yellow boxes.

### STEP 1: 2022 Withdrawals from your 85.21 Trust Fund (if any)

Item & Owner	Total Cost	Aid Spent From Trust Fund
1.		
2.		
3.		
4.		
5.		
6.		
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>

### STEP 2: End of Year Trust Fund Balance Sheet

Item Description	Amount
<b>1. Opening Balance on January 1, 2024 (from last year's report):</b>	
2. 2024 Additions to Funds Held in Trust:	
A. Aid from CY23 85.21 allocation unspent and moved to trust	
B. Interest Earned by s. 85.21 Aid in 2023	
3. 2023 Withdrawals of funds held in Trust <i>(carried from total in Step 1)</i>	\$0.00
4. Adjustments: <i>If adjustments are made, provide a <b>brief</b> explanation below</i>	
<b>5. Closing Balance on December 31, 2023: (Sum of items 1 through 4):</b>	<b>\$0.00</b>

**Explanations or Other Notes:** \_\_\_\_\_

**Make Entries ONLY in Yellow Cells; NOT Blue Cells**

## 2022 ALLOCATION STATUS

	Description	Amount
<b>Item 1</b>	<b>Amount of s.85.21 aid received in 2024:</b> <i>Enter the amount of the county's 2024 allocation received under s.85.21 as listed in Section II of your 2024 grant agreement.</i>	
<b>Item 2</b>	<b>Amount of s.85.21 2022 aid spent in 2024:</b> <i>This total is automatically calculated from the sum of all amounts entered into Item 3A of each project.</i>	\$0.00
<b>Item 3</b>	<b>Amount of s.85.21 2023 aid moved to trust:</b> <i>This total is automatically calculated from the trust fund sheet. This should equal any amount of the county's 2022 allocation which was not spent in 2022, but will be retained in trust in accordance with Section II of your 85.21 grant agreement.</i>	\$0.00
<b>Item 4</b>	<b>Unspent Aid Checksum:</b> <i>This is a calculated value; amount of aid received minus the amount of aid spent or to be moved into trust.</i> <b>Verify this amount is ZERO.</b> <i>Any remaining aid cannot be "carried-over" into 2024. Any remaining balance not spent or moved to trust, is to be returned to WisDOT. If planning to refund any portion of your 85.21 funds, please contact the program manager for a discussion of other options.</i>	\$0.00

***This Page Auto-Populates; Make No Entries on This Page***  
**Summary of 2022 Financial Operations**

0

Project Name	0	0	0	0	0	0	0	0	0	0	0	0	0	0	TOTALS
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Annual Expenditures/Expenses														
Total Expenditures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Passenger Revenue	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Net Expenditures</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

Annual Net Expenditures - Breakout By Funding Source														
A.	85.21 Allocation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
B.	Trust Fund	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
C.	County Levy	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
D.	Medicare	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
E.	OOA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
F.	Tribal	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
G.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total Funding:</b>		<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Checksum**

Expenses vs. Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
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**TRUST FUND**

Trust Fund (Part II)	\$0.00
Trust Fund Sum (Part IV, row B)	\$0.00
Difference	<b>\$0.00</b>

**LOCAL MATCH**

Required local match (20%)	\$0.00
Actual Local Match (Part V)	\$0.00
Difference	<b>\$0.00</b>












# 2024\_8521\_Contract\_County-NCHC-WATS


Final Audit Report


2024-01-26


Created:	2023-12-15
By:	Nicole Fehl (nicole.fehl@co.marathon.wi.us)
Status:	Signed
Transaction ID:	CBJCHBCAABAtr49vJCBnRkzRjISHsAgBJ778iYINrJk


## "2024\_8521\_Contract\_County-NCHC-WATS" History


-  Document created by Nicole Fehl (nicole.fehl@co.marathon.wi.us)  
2023-12-15 - 9:33:50 PM GMT- IP address: 198.150.25.236
-  Document emailed to lance.leonhard@co.marathon.wi.us for signature  
2023-12-15 - 9:39:19 PM GMT
-  Email viewed by lance.leonhard@co.marathon.wi.us  
2023-12-15 - 9:39:37 PM GMT- IP address: 40.94.28.174
-  Signer lance.leonhard@co.marathon.wi.us entered name at signing as Lance Leonhard  
2023-12-18 - 2:23:17 PM GMT- IP address: 198.150.25.236
-  Document e-signed by Lance Leonhard (lance.leonhard@co.marathon.wi.us)  
Signature Date: 2023-12-18 - 2:23:19 PM GMT - Time Source: server- IP address: 198.150.25.236
-  Document emailed to katie.rosenberg@ci.wausau.wi.us for signature  
2023-12-18 - 2:23:25 PM GMT
-  Email viewed by katie.rosenberg@ci.wausau.wi.us  
2023-12-18 - 2:23:44 PM GMT- IP address: 40.94.29.136
-  New document URL requested by Nicole Fehl (nicole.fehl@co.marathon.wi.us)  
2024-01-26 - 4:17:15 PM GMT- IP address: 198.150.25.236
-  New document URL requested by Nicole Fehl (nicole.fehl@co.marathon.wi.us)  
2024-01-26 - 4:21:13 PM GMT- IP address: 198.150.25.236
-  Email viewed by katie.rosenberg@ci.wausau.wi.us  
2024-01-26 - 5:21:45 PM GMT- IP address: 104.47.65.254
-  Signer katie.rosenberg@ci.wausau.wi.us entered name at signing as Katie Rosenberg  
2024-01-26 - 5:22:34 PM GMT- IP address: 198.150.25.236


 Document e-signed by Katie Rosenberg (katie.rosenberg@ci.wausau.wi.us)  
Signature Date: 2024-01-26 - 5:22:36 PM GMT - Time Source: server- IP address: 198.150.25.236

 Document emailed to golsen@norcen.org for signature  
2024-01-26 - 5:22:38 PM GMT

 Email viewed by golsen@norcen.org  
2024-01-26 - 6:28:33 PM GMT- IP address: 104.47.64.254

 Signer golsen@norcen.org entered name at signing as Gary D. Olsen  
2024-01-26 - 6:29:21 PM GMT- IP address: 198.150.25.236

 Document e-signed by Gary D. Olsen (golsen@norcen.org)  
Signature Date: 2024-01-26 - 6:29:23 PM GMT - Time Source: server- IP address: 198.150.25.236

 Agreement completed.  
2024-01-26 - 6:29:23 PM GMT