

Dane County Contract Addendum Cover Sheet

Revised 03/2025

Res 048 significant

BAF # 26175
 Acct: Bush
 Mgr: NA
 Budget Y/N: N

| | |
|--|-------|
| Contract # Admin will assign | 16361 |
|--|-------|

| | | | |
|---|---|-----------------------|---|
| Dept./Division | Human Services /FMS | Vendor Name | State of WI, Dept. of Children and Families |
| Brief Addendum Title/Description | 2025 reob/deob to close out State County Child Care contract. We received extra funding to cover actual cost reported via SPARC. Funds are already in the budget. | Vendor MUNIS # | 9474 |
| | | Addendum Term | 1/1/2025 - 12/31/2025 |
| | | Amount (\$) | \$ 192,453.67 |

| Department Contact Information | | Vendor Contact Information | |
|--------------------------------|---------------------------------|----------------------------|-----------------------|
| Contact | Contract Coordination Assistant | Contact | Justine Girard |
| Phone # | 608-242-6200 | Phone # | 715-930-1118 |
| Email | dcdhscontracts@danecounty.gov | Email | Justine.Girard@wi.gov |
| Purchasing Officer | | | |

| Purchase Order – Maintenance or New PO | | | | | |
|--|--|-------------|-------------|--------------|--|
| <input type="checkbox"/> | PO Maintenance Needed PO# | Org: | Obj: | Proj: | |
| <input checked="" type="checkbox"/> | No PO Maintenance Needed – this addendum does not change the dollar amount of the contract. | | | | |
| <input type="checkbox"/> | New PO / Req. Submitted Req# | Org: | Obj: | Proj: | |
| | | Org: | Obj: | Proj: | |

| Budget Amendment | |
|--------------------------|---|
| <input type="checkbox"/> | A Budget Amendment has been requested via a Funds Transfer or Resolution. Upon addendum approval and budget amendment completion, the department shall update the requisition in MUNIS accordingly. |

| Total Contracted Amount – List the Original contract info, then subsequent addenda including this new addendum | | | | | |
|--|-------------------|-----------------------|------------------------|--|-------------------|
| A resolution is required when the total contracted amount first exceeds \$100,000. Additional resolutions are then required whenever the sum(s) of any additional addenda exceed(s) \$100,000 | Addendum # | Term | Amount | Resolution | |
| | Original | 1/1/2025 - 12/31/2025 | \$ 1,533,350.00 | <input type="checkbox"/> None | Res# 048 |
| | A | 1/1/2025 - 12/31/2025 | \$ 192,453.67 | <input checked="" type="checkbox"/> None | Res# 2026 RES-TBD |
| | | | | <input type="checkbox"/> None | Res# |
| | | | | <input type="checkbox"/> None | Res# |
| | | | | <input type="checkbox"/> None | Res# |
| | | | | <input type="checkbox"/> None | Res# |
| Total Contracted Amount | | | \$ 1,725,803.67 | | |

| Contract Language Pre-Approval – prior to internal routing, this contract has been reviewed/approved by: | | |
|--|---|---|
| <input type="checkbox"/> Corporation Counsel: | <input type="checkbox"/> Risk Management: | <input checked="" type="checkbox"/> No Pre-Approval |

| APPROVAL |
|---|
| Dept. Head / Authorized Designee |
|  |

| APPROVAL – Contracts Exceeding \$100,000 | |
|---|----------------------------|
| Director of Administration | Corporation Counsel |
| Slaven, Shelby Digitally signed by Slaven, Shelby Date: 2026.06.02 16:17:57 -05'00' | SHR 5.29.26 |

| APPROVAL – Internal Contract Review – Routed Electronically – Approvals Will Be Attached | | |
|--|---|---|
| DOA: | Date In: 6/2/2026 Date Out: _____ | <input checked="" type="checkbox"/> Controller, Purchasing, Corp Counsel, Risk Management |

Goldade, Michelle

From: Goldade, Michelle
Sent: Tuesday, June 2, 2026 10:51 AM
To: Hicklin, Charles; Rogan, Megan; Cotillier, Joshua
Cc: Oby, Joe
Subject: Contract #16361
Attachments: 16361.pdf

| Tracking: | Recipient | Read | Response |
|------------------|-------------------|-------------------------|----------------------------|
| | Hicklin, Charles | Read: 6/3/2026 8:41 AM | Approve: 6/3/2026 8:41 AM |
| | Rogan, Megan | Read: 6/2/2026 11:32 AM | Approve: 6/2/2026 11:32 AM |
| | Cotillier, Joshua | Read: 6/2/2026 11:45 AM | Approve: 6/2/2026 11:49 AM |
| | Oby, Joe | | |

Please review the contract and indicate using the vote button above if you approve or disapprove of this contract.

Contract #16361

Department: Human Services

Vendor: WI Dept of Children and Families

Contract Description: 2025 Reob/Deob to close out State County Child Care Contract – receiving extra funding (Res 048)

Contract Term: 1/1/25 – 12/31/25

Contract Amount: \$192,453.67

Michelle Goldade

Administrative Manager

Dane County Department of Administration

Room 425, City-County Building

210 Martin Luther King, Jr. Boulevard

Madison, WI 53703

PH: 608/266-4941

Fax: 608/266-4425

TDD: Call WI Relay 711

Please Note: I currently have a modified work schedule...I am in the office Mondays and Wednesdays and working remotely Tuesdays, Thursdays and Fridays.

1
2
3 **2026 RES-048**

4 **ACCEPTING CHILD CARE FUNDS FROM DEPARTMENT OF CHILDREN AND FAMILIES**
5 **DCDHS – FMS DIVISION**

6 Dane County Department of Human Services (DCDHS) Fiscal and Management Service (FMS)
7 has been awarded extra funding from the Wisconsin Department of Children and Families
8 (DCF) for Child Care Administration and Child Care Certification to close out 2025 State County
9 Child Care Contract.

10
11 These additional funds total \$192,453.67. No budgetary change is required as a result of
12 accepting these funds.

13
14 **NOW, THEREFORE, BE IT RESOLVED** that the County Executive and County Clerk, when
15 required, are hereby authorized and directed to sign the agreement on behalf of Dane County.



Governor Tony Evers
Secretary Jeff Pertl
dcf.wisconsin.gov

CONTRACT AMENDMENT

by and between

Wisconsin Department of Children and Families

and

Dane County

CONTRACT NO

437002-C25-0002491-000-13

ASSISTANCE LISTING #

93.575 Child Care and Development Block Grant
(Discretionary portion)
Additional Federal Award Information

COMMODITY OR SERVICE TITLE

State County Child Care Contract

AMENDMENT DESCRIPTION

This amendment deobs/reobs funding.

In Process

CONTRACT TERM

01/01/2025 - 12/31/2025

BRO REGIONAL ADMINISTRATOR

Justine Girard - (715) 930-1118
Justine.Girard@wisconsin.gov

DCF CONTRACT ADMINISTRATOR

Abigail Widick – (920) 785-7844
Abigail.widick@wisconsin.gov

CONTRACT BILLING AND PAYMENT TERMS

SPARC expenses submitted monthly by the 28th of the month, paid the 5th day of the following month.

CONTACT INFORMATION

Authorized Signatory
Address
Phone
CC
UEI

**Dane County
Melissa Agard
1202 Northport Drive
Madison WI 53704
608-242-7463
Spring Larson
Colleen Williams
M7DYJMKQ9MH7**

contracts@danecounty.gov

laron.spring@danecounty.gov
williams.colleen@danecounty.gov

By initialing here, you certify the Unique Entity Identifier (UEI) is accurate. If you are unsure, please confirm with your finance staff prior to initialing.

A01

Funding Information for Grants managed thru SPARC:

| Contractor: Dane County | | | STAR Supplier ID: 0000071906 | |
|---|-----------------------------------|-----------------------------|-------------------------------------|-----------------------------|
| Commodity or Service Description | SPARC Contract Code Number | Current Award Amount | Change | Revised Award Amount |
| Child Care Administration | 0852 | \$1,247,200.00 | \$190,939.63 | \$1,438,139.63 |
| Child Care Certification | 0831 | \$223,830.00 | \$24,292.07 | \$248,122.07 |
| Child Care Supplemental Fraud | 0840 | \$62,320.00 | (\$22,778.03) | \$39,541.97 |
| Child Care Benefits | 0856 | Uncapped | Uncapped | Uncapped |
| Total Revised Project Amount | | \$1,533,350.00 | \$192,453.67 | \$1,725,803.67 |

Allocation amount assumes all prior amendments have been signed.

All Funding allocations are subject to Federal and State budgetary changes.

This is an Amendment of an existing contract for the specific time period, funding, and terms defined. This Amendment is entered into by and between the State of Wisconsin Department of Children and Families and the Contractor listed above. Unless otherwise specified, ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT, INCLUDING FUNDING, REMAIN IN FULL FORCE AND EFFECT. This Amendment and the Contract, collectively, are the complete agreement of the parties and supersede any prior agreements or representations. The Department and the Contractor acknowledge that they have read the Amendment and understand and agree to be bound by the terms and conditions.

By signing below, I, a representative of the contractor, certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.

This Amendment becomes null and void if the time between the earlier dated signature and the later dated signature exceeds sixty (60) calendar days, unless waived by the Department.

Signatures

 Melissa Agard
 Dane County Executive

 Date

DocuSigned by:

 5E9598D3C7D6432...

 Division Administrator Kristina Trastek
 Department of Children and Families

5/12/2026 | 11:26:43 AM CDT

 Date

Certificate Of Completion

Envelope Id: 38FD1042-B1EF-807B-8267-15DDFB0B478D
 Subject: 0002491 A01 CY25 State County Child Care - Deob Reob - Dane

Status: Sent

- 1. Type: Amendment
- 3. Bureau: BOP
- 4. Contract Start Date: 01/01/2025
- 5. Contract End Date: 12/31/2025
- 6. Original Sent Date: 05/13/2026
- 2. Division: DECE
- 7. Internal/External: External
- 8. Full Process ID: 437002-C25-0002491-000-13

Source Envelope:

Document Pages: 2

Signatures: 0

Envelope Originator:

Certificate Pages: 5

Initials: 0

DCF Contracting

AutoNav: Enabled

201 W. Washintgon Ave.

Envelopeld Stamping: Enabled

PO Box 8916

Time Zone: (UTC-06:00) Central Time (US & Canada)

Madison, WI 53708-8916

dcfcontracting@wi.gov

IP Address: 136.226.84.181

Record Tracking

Status: Original
 5/13/2026 9:59:34 AM
 Security Appliance Status: Connected

Holder: DCF Contracting
 dcfcontracting@wi.gov
 Pool: StateLocal

Location: DocuSign

Signer Events

Signature

Timestamp

Melissa Agard
 contracts@danecounty.gov
 Dane County Executive
 Security Level: Email, Account Authentication
 (None)

Sent: 5/13/2026 10:01:37 AM
 Viewed: 5/21/2026 2:17:18 PM

Electronic Record and Signature Disclosure:
 Accepted: 5/21/2026 2:17:18 PM
 ID: c6abdf2d-d090-4139-8993-dadd68a6a1a9

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Justine Girard
 justine.girard@wisconsin.gov
 Southern Area Section Manager
 Security Level: Email, Account Authentication
 (None)

COPIED

Sent: 5/13/2026 10:01:37 AM

Electronic Record and Signature Disclosure:
 Accepted: 11/15/2021 2:51:32 PM
 ID: d78c1c5f-ca92-4b8f-97dd-a8a33aa9ad40

| Carbon Copy Events | Status | Timestamp |
|--------------------|--------|-----------|
|--------------------|--------|-----------|

Spring Larson
larsen.spring@danecounty.gov
Security Level: Email, Account Authentication (None)
Electronic Record and Signature Disclosure:
Not Offered via DocuSign

COPIED

Sent: 5/13/2026 10:01:38 AM

Colleen Williams
williams.colleen@danecounty.gov
Security Level: Email, Account Authentication (None)
Electronic Record and Signature Disclosure:
Not Offered via DocuSign

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Sent: 5/13/2026 10:01:39 AM
Viewed: 5/13/2026 3:31:53 PM

DCF Grants Releases
DCFMBDMSFinGrantsReleases@wi.gov
Security Level: Email, Account Authentication (None)
Electronic Record and Signature Disclosure:
Not Offered via DocuSign

Luke Reible
luke.reible@wisconsin.gov
Security Level: Email, Account Authentication (None)
Electronic Record and Signature Disclosure:
Accepted: 5/14/2026 1:01:42 PM
ID: ecb966e8-a67f-4825-91f6-21332ec107c0

In Process

Abigail Widick
abigail.widick@wisconsin.gov
Security Level: Email, Account Authentication (None)
Electronic Record and Signature Disclosure:
Accepted: 5/19/2026 5:35:53 PM
ID: 89cbf084-32ce-415b-a10e-6d8230cc9663

| Witness Events | Signature | Timestamp |
|----------------|-----------|-----------|
|----------------|-----------|-----------|

| Notary Events | Signature | Timestamp |
|---------------|-----------|-----------|
|---------------|-----------|-----------|

| Envelope Summary Events | Status | Timestamps |
|-------------------------|--------|------------|
|-------------------------|--------|------------|

| | | |
|---------------------|------------------|-----------------------|
| Envelope Sent | Hashed/Encrypted | 5/13/2026 10:01:39 AM |
| Certified Delivered | Security Checked | 5/21/2026 2:17:18 PM |

| Payment Events | Status | Timestamps |
|----------------|--------|------------|
|----------------|--------|------------|

| Electronic Record and Signature Disclosure |
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How to contact State of WI:

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To contact us by email send messages to: dcfcontracting@wisconsin.gov

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To let us know of a change in your e-mail address where we should send notices and disclosures electronically to you, you must send an email message to us at dcfcontracting@wisconsin.gov and in the body of such request you must state: your previous e-mail address, your new e-mail address. We do not require any other information from you to change your email address.. In addition, you must notify DocuSign, Inc. to arrange for your new email address to be reflected in your DocuSign account by following the process for changing e-mail in the DocuSign system.

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Required hardware and software

| | |
|----------------------------|--|
| Operating Systems: | Windows® 2000, Windows® XP, Windows Vista®; Mac OS® X |
| Browsers: | Final release versions of Internet Explorer® 6.0 or above (Windows only); Mozilla Firefox 2.0 or above (Windows and Mac); Safari®, 3.0 or above (Mac only) |
| PDF Reader: | Acrobat® or similar software may be required to view and print PDF files |
| Screen Resolution: | 800 x 600 minimum |
| Enabled Security Settings: | Allow per session cookies |

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- I can print on paper the disclosure or save or send the disclosure to a place where I can print it, for future reference and access; and
- Until or unless I notify State of WI as described above, I consent to receive from exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to me by State of WI during the course of my relationship with you.