

DEPARTMENT OF HEALTH & HUMAN SERVICES

*Milwaukee County*

EMERGENCY MEDICAL SERVICES

December 21, 2006

Mayor Thomas Barrett  
Milwaukee City Hall  
200 E. Wells Street  
Milwaukee WI 53202

Dear Mayor Barrett,

Enclosed are two originals of the 2007 Emergency Medical Services agreement for Paramedic Services between Milwaukee County Department of Health and Human Services and the City of Milwaukee.

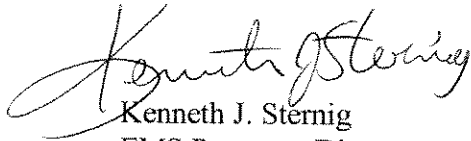
Per line 424 of this agreement, the intent of this letter is to fulfill the responsibility of Milwaukee County to submit a letter to the contracting municipality indicating the timing and amount of payment of the supplemental tax levy funds as approved by the County Executive and the County Board of Supervisors in the 2007 adopted budget. The amount of tax levy funds in the 2007 adopted budget is three (3) million dollars.

Per the distribution formula adopted by the Intergovernmental Cooperative Council (ICC), the percent of the tax levy funds for your municipality will be 40.07% and your total yearly payment will be \$1,202,133.00. This amount will be distributed in monthly payments to your municipality by Milwaukee County.

Please sign both originals of this letter and the agreements, and forward them to the Emergency Medical Services office at 1220 W. Vliet Street, Suite 304, Milwaukee County, 53205, Attention: Kenneth J. Sternig. Upon receiving the signed originals of this letter and the agreements, we will then send them to the parties within Milwaukee County who will be responsible for signing the same. One original of this letter and the agreement will be returned to you once this process is complete.

This agreement reflects some significant changes in the manner in which advanced level care is delivered in Milwaukee County, we look forward to working with you on continuing to provide high quality emergency medical care to the citizens of your community.

Sincerely,



Kenneth J. Sternig  
EMS Program Director  
Milwaukee County

**For the City of Milwaukee:**

**For the County:**

\_\_\_\_\_  
Mayor

Date

\_\_\_\_\_  
John Chianelli, Director  
County Health Programs

Date

\_\_\_\_\_  
City Clerk

Date

\_\_\_\_\_  
Kenneth Sternig  
Program Director  
Emergency Medical Services

Date