



State of Wisconsin
Department of Employee Trust Funds
 4822 Madison Yards Way
 Madison, WI 53705-9100
 P. O. Box 7931
 Madison, WI 53707-7931

Contract by Authorized Board

Commodity or Service:

Compliance Audits for the State of Wisconsin Group
 Life Insurance Program Contract

Contract No./Request for Proposal No:

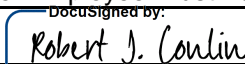
ETH0044

Authorized Board: State of Wisconsin Employee Trust Funds Board

Contract Period: June 1, 2019 and will extend unless and until either party gives the other one hundred eighty (180) days' notice of their intent to cancel this Contract.

1. This Contract is entered into by the State of Wisconsin Department of Employee Trust Funds (Department or ETF) on behalf of the State of Wisconsin Employee Trust Funds Board (Board), and Wipfli, LLP (Contractor), whose address and principal officer appear below. The Department is the sole point of contact for this Contract.
2. Whereby the Department agrees to direct the purchase and Contractor agrees to supply the Contract requirements in accordance with the Department Terms and Conditions, and the documents specified in the order of precedence below, hereby made a part of this Contract by reference.
3. Contractor's audit of the State of Wisconsin Group Life Insurance Program Contract to begin in January 2020, cover calendar year 2018 and 2019, and shall not exceed \$20,250 upon the Department's satisfactory receipt of deliverables.
4. For purposes of administering this Contract, the order of precedence is:
 - (a) This Contract;
 - (b) Request for Proposal (RFP) ETH0044 dated October 17, 2018; and,
 - (c) Contractor's proposal dated November 28, 2018.

Contract Number & Service: ETH0044 Compliance Audits for the Group Life Insurance Program Contract

State of Wisconsin Department of Employee Trust Funds
Authorized Board: State of Wisconsin Employee Trust Funds Board
By (Name): Robert J. Conlin, Secretary Department of Employee Trust Funds
Signature: 
Date of Signature: 249598FF085F431... 4/29/2019

Contractor
Legal Company Name: WIPFLI, LLP
Trade Name: WIPFLI, LLP
Taxpayer Identification Number: 39-0758449
Contractor Address (Street Address, City, State, Zip): 2501 West Beltline Hwy, Suite 401 Madison, WI 53713
Name & Title (print name and title of person authorized to legally sign for and bind Contractor): Zachary D. Mayer, CPA, Partner
Signature: 
Date of Signature: 4/28/2019
Email: zmayer@wipfli.com Phone: 608.274.1980

**CONTRACT COMPLIANCE AUDIT OF THE STATE LIFE INSURANCE PROGRAM CONTRACT
COVERING CALENDAR YEAR 2018 and 2019**

A. Statement of Work

Audit of State Life Insurance Program administered by Minnesota Life Insurance Company (MLIC) to begin in January 2020 and cover calendar years 2018 and 2019.

B. Audit Schedule

Event	Date
Entrance Conference	January 2020
Planning and evaluation of internal controls	May 2020
Data gathering, finalization of testing plan, sampling	June-July 2020
Detail testing and fieldwork	August 2020
Resolve expectations, file reviews, exit conference and report finalization	September 2020
Final Report due to ETF	September 30, 2020

C. Payment Schedule

Amount	Wipfli Invoice Date	ETF Payment Due Date
\$10,125.00	June 1, 2020	June 30, 2020
\$10,125.00	October 1, 2020	October 31, 2020