

# LEGISLATIVE FACT SHEET

DATE: 10/15/2011

BT OR RC NUMBER: 2011-

SPONSOR (Department/Division/Agency/Council Member): JEA

**PURPOSE/SUMMARY:**

Legislative approval of the 10/1/2009-9/30/2012 collective bargaining agreement between JEA and American Federation of State, County and Municipal Employees (AFSCME), Florida Council 79, Local 429

**APPROPRIATION:** Total Amount Appropriated:

(Name of Fund as it will appear in title of legislation)

N/A

Name of Federal Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of State Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of City of Jax Funding Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of In-Kind Contribution Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Name of Bond Acct \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Number \_\_\_\_\_

**IMPACT - FINANCIAL/OTHER:**

**ACTION ITEMS:**

Emergency?	Yes ___ No <u>x</u>	Justification: _____
Federal or State Mandates	Yes ___ No <u>x</u>	
Fiscal Year Carryover?	Yes ___ No <u>x</u>	_____
CIP Amendment?	Yes ___ No <u>x</u>	(Attach CIP form)
Contract/Agreement (C/A) Approval	Yes <u>X</u> No ___	(Attach a copy only)
C/A negotiations on-going?	Yes ___ No <u>x</u>	
Oversight Department Required?	Yes ___ No <u>x</u>	Name of Dept. _____
Related RC?/BT?	Yes ___ No <u>x</u>	(Attach a copy)
Waiver of Code?	Yes ___ No <u>x</u>	(Identify Code Provision _____)
Code Exception?	Yes ___ No <u>x</u>	(Identify Code Provision _____)
Continuation Grant?	Yes ___ No <u>x</u>	
Surplus Property Certification?	Yes ___ No <u>x</u>	(Attach a copy)
Related Enacted Ordinances?	Yes ___ No <u>x</u>	Ord. # of Previous Ord. _____
Report Required to City Council/Council Auditors	Yes ___ No <u>X</u>	Date _____ Frequency _____

**ADMINISTRATION TRANSMITTAL**

To: MBRC, c/o Roselyn Chall, Budget Division, Suite 325

CC: Chris Hand, Chief of Policy  
Mayor's Office, Fourth Floor, City Hall at St. James

From:

Phone:                      Fax:                      E-mail:

Contact person:

Phone:                      Fax:                      E-mail:

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**INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL**

To: Steve Rohan (630-1672) or Peggy Sidman (630-4647), Office of General Counsel  
Suite 480, City Hall at St. James

From: Chad Poppell, Director, Employee Services, JEA  
(Name, Job Title, Department)

Phone: 665-4132                      Fax: 665-7014                      E-mail: popppc@jea.com

Contact person: Wayne Young, Director, Government Affairs, JEA  
(Name, Job Title, Department)

Phone: 665-7728                      Fax: 665-7950                      E-mail: younow@jea.com

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

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**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**