

LEGISLATIVE FACT SHEET

DATE November 1, 2011

BT OR RC NUMBER: _____
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): _Supervisor of Elections

PURPOSE/SUMMARY:

Resolution declaring Early Voting locations and times for Presidential Preference Primary Election

APPROPRIATION : Total Amount Appropriated: \$ _0_ as follows:

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

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_x_ | |
| Federal or State Mandates | Yes__ | No_x_ | |
| Fiscal Year Carryover? | Yes__ | No_x_ | _____ |
| CIP Amendment? | Yes__ | No_x_ | (Attach CIP form) |
| Contract/Agreement (C/A) Approval | Yes__ | No_x_ | (Attach a copy only) |
| C/A negotiations on-going? | Yes__ | No_x_ | |
| Oversight Department Required? | Yes__ | No_x_ | Name of Dept. _____ |
| Related RC?/BT? | Yes__ | No_x_ | (Attach a copy) |
| Waiver of Code? | Yes__ | No_x_ | (Identify Code Provision _____) |
| Code Exception? | Yes__ | No_x_ | (Identify Code Provision _____) |
| Continuation Grant? | Yes__ | No_x_ | |
| Surplus Property Certification? | Yes__ | No_x_ | (Attach a copy) |
| Related Enacted Ordinances? | Yes__ | No_x_ | Ord. # of Previous Ord. ____ Report |
| Required to City Council/Council Auditors | Yes__ | No_x_ | Date _____ Frequency _____ |

Add additional pages as necessary for explanation.

ADMINISTRATION TRANSMITTAL

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

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

From: Jerry Holland, Supervisor of Elections
(Name, Job Title, Department)

Phone: 1414 _____ Fax: 2920 _____ E-mail: jholland@coj.net

Contact person: Robert Phillips, Exec Asst to the SOE, Elections
(Name, Job Title, Department)

Phone: 8018 _____ Fax: 2920 _____ E-mail: Phillips@coj.net

**COUNCIL MEMBER / 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: Jerry Holland, Supervisor of Elections
(Name, Job Title, Department)

Phone: 1414 _____ Fax: 2920 _____ E-mail: jholland@coj.net

Contact person: Robert Phillips, Exec Asst to the SOE, Elections

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Phone: 8018 _____ Fax: 2920 _____ E-mail: Phillips@coj.net

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

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED