## LEGISLATIVE FACT SHEET

DATE:	2/8/2012	BT OR (Administ			ER:				
SPONSOR (Department/Division/Agency/Council Member): Purpose/Summary:  Parks as							s and Recreation		
The Jacksonville	t of Parks and Recreation res ne current lease agreement b e Arboretum & Gardens desi erty subject to Arboretum's r	etween The ires to ente	e City or r into a	of Jack First .	csonvi Amen	lle and Jacksonville . dment to the Lease A	Arboretum & C	Fardens Inc	
APPROPRIATION: Total Amount Appropriated: \$ 0.00							as follows:		
(Name of Fund	d as it will appear in title	e of legisla	ation)		<u></u>				
Name of Feder	Amount: S	5							
Name of State	Amount: S	6							
Name of City of	Amount: S	3							
Name of In-Kin	— Amount: S	3							
Name of Bond	Account:						— Amount: S		
	Number:								
IMPACT - FI	NANCIAL/OTHER:						<del></del>		
ACTION ITE	MS:			:					
Emergency <sup>6</sup>	?	Yes		No	$\boxtimes$	Justification:	· · · · · · · · · · · · · · · · · · ·		
Fiscal Year CIP Amend Contract/Ag C/A negotia	ment? greement (C/A) Approval? ations on-going? Department Required? ?/BT?	Yes		No No No No No No No No		(Attach CIP Form (Attach Copy Onl Department: (Attach Copy) (Identify Code Pro	Parks and R	ecreation	
Code Excep	otion?	Yes		No	$\boxtimes$	(Identify Code Pro	ovision)		
Related Ena	perty Certification? acted Ordinances?	Yes Yes Yes		No No No		(Attach Copy) # or Previous Ord	inance	ORD 2006- 234-E	
	uired to City uncil Auditors?	Yes		No	$\boxtimes$	Date F	requency		

## <u>ADMINISTRATION TRANSMITTAL</u>

To:	MBRC, c/o Roselyn Chall, Budget Division, Suite 325, City Hall									
CC:	Chris Hand, Chief of Staff, Mayor's Office, 4 <sup>th</sup> floor, City Hall									
From:	Kelley Boree, Interim Director, Department of Parks and Recreation  (Name, Job Title, Department)									
Phone:	255-7908	Fax:	360-8552	E-mail:	KBoree@coj.net					
Contact person:	Kelley Boree, Interim Director, Department of Parks and Recreation  (Name, Job Title, Department)									
Phone:	255-7908	Fax:	360-8552	E-mail:	KBoree@coj.net					
COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL  To: Steve Rohan (630-1672) or Peggy Sidman (630-4647), OGC, Suite 480, City Hall From:										
Phone:	(Name, Job Title, Department)	Fax:		E-mail:						
Contact person:	(Name, Job Title, Department)			-						
Phone:		Fax:	·	E-mail:						
Legislation from I the legislation.	ndependent Agencies requires	a resolu	ition from the Indep	pendent Ag	ency Board approving					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED