LEGISLATIVE FACT SHEET

DATE: May	y 23, 2012 BT OR RC NUMBER: N/A (Administration Bills)					
SPONSOR Supervisor of	(Department/Division/Agency Elections	//Council N	Member):			
	SUMMARY: Change the polling Knights of Columbus.	ng place fo	or precinct	1009 to Oak 1	Hill Church of th	e
APPROPRIATION: Total Amount Appropriated: \$				N/A	N/A as follows:	
(Name of Fu	nd as it will appear in title of	legislation	ı)		··· ·	
Name of Federal Funding Source:			Amount: \$			
Name of State Funding Source:						
Name of City of Jax Funding Source:			_ Amount: \$			
Name of In-Kind Contribution Source:				Amount: \$		
Name of Bond Acct			Amount: \$			
N	lumber			_		
IMPACT - I	FINANCIAL/OTHER:					
ACTION IT	EMS:					
Emer	gency?	Yes_X_	No	Justificat	ion:	
Due t	o the time frame of the next ele	ection, and 1	mailing of v	voter informa	tion cards	
Feder	ral or State Mandates	Yes	No _X			
Fisca	l Year Carryover?		No _X_			
				(Attach CIP form)		
Contract/Agreement (C/A) Approval		1 Yes _X_	No			
C/A ı	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?			No_X_	(Identify C	(Identify Code Provision	
Continuation Grant?			No_X_			
Surplus Property Certification?		Yes	No_X	(Attach a copy)		
	Related Enacted Ordinances?			Ord. # of Previous Ord.		
Repo	ort Required to City Council/Co					
		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:	Adam Hollingsworth, Chief of Policy Mayor's Office, Fourth Floor, City Hall at St. James				
From:	(Name, Job Title, Department)				
	Phone: E-mail:				
Conta	ct person:				
	Ct person: (Name, Job Title, Department) Phone: Fax: E-mail:				
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:	<u>Jerry Holland, Supervisor of Elections</u> (Name, Job Title, Department)				
	Phone: 630-7777 Fax: 630-1894 E-mail: jholland@coj.net				
Conta	ct person: Justin Gicalone, Elections Analyst, Supervisor of Elections Office (Name, Job Title, Department) Phone: 545-5893 Fax: 630-1894 E-mail: Gicalone@coj.net				
	lation from Independent Agencies requires a resolution from the Independent Agency Board ving the legislation.				

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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