

# LEGISLATIVE FACT SHEET

DATE: 6.11.2012\_\_\_\_\_

BT OR RC NUMBER: 12-089  
(Administration Bills)

**SPONSOR** (Department/Division/Agency/Council Member): Neighborhoods Department, Director's Office, Clean It Up, Green It Up-Florida Inland Navigation District Grant (F.I.N.D.)

**PURPOSE/SUMMARY:**

The legislation is requesting acceptance of a \$5,000.00 grant from the Florida Inland Navigation District (F.I.N.D.) to develop litter prevention and education programs. The grant period began Oct. 1, 2011 and ends September 30, 2012. This is a reimbursement grant. COJ will be reimbursed after the September 30, 2012 deadline. Keep Jacksonville Beautiful received the original, signed, agreement letter from F.I.N.D. on June 7, 2012.

**APPROPRIATION:** Total Amount Appropriated: \$ 5,000.00\_\_\_\_\_ as follows:

**(Name of Fund as it will appear in title of legislation) 2012 Florida Inland Navigation District Litter Prevention-Waterway Cleanups/Education Programs**

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

Name of State Funding Source: \_\_\_\_\_ Amount: \$ 5,000.00

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: _____
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Federal or State Mandates	Yes <u>X</u> No ___	
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 <u>X</u> No ___	(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 X (Attach a copy)  
Related Enacted Ordinances? Yes \_\_\_ No X Ord. # of Previous Ord. \_\_\_\_\_  
Report Required to City Council/Council Auditors  
Yes \_\_\_ No \_\_\_ Date \_\_\_\_\_ Frequency \_\_\_\_\_

**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: Vivian Harrell, Environmental Programs Coordinator, Neighborhoods Department  
(Name, Job Title, Department)  
Phone: 630-3420 Fax: 630-7206 E-mail: vharrell@coj.net  
Contact person: John Shellhorn, Mosquito Control Chief, Neighborhoods Department  
(Name, Job Title, Department)  
Phone: 696-4374 Fax: 751-5925 E-mail: shellhorn@coj.net

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**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: \_\_\_\_\_  
(Name, Job Title, Department)  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Contact person: \_\_\_\_\_  
(Name, Job Title, Department)  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

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**