

2013-11

# LEGISLATIVE FACT SHEET

DATE: November 14, 2012

BT OR RC NUMBER: BT 13-014  
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): Jacksonville Children's Commission

**PURPOSE/SUMMARY:**

To appropriate revenue received from the Early Learning Coalition of Duval representing cash match for years 2 and 3 for the Fostering Children's Mental Health; SAMHSA Grant. Funding for the grant was originally approved with Ordinance 2012-0433-E (Schedule M).

**APPROPRIATION:** Total Amount Appropriated: \$ 60,000 as follows:

**(Name of Fund as it will appear in title of legislation) JCC Special Revenue Grant Fund – Fostering Children's Mental Health Initiative - SAMHSA Grant**

Name of Federal Funding Source:	Amount: \$
Name of State Funding Source:	Amount: \$
Name of City of Jax Funding Source:	Amount: \$
Name of Non-Government Funding Source: <u>Contributions from Private Sources</u>	Amount: \$ 60,000
Name of Non-Government 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 <u>X</u> No ___	_____
CIP Amendment?	Yes ___ No <u>X</u>	(Attach CIP form)
Contract/Agreement (C/A) Approval	Yes ___ No <u>X</u>	(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 <u>X</u> No ___	
Surplus Property Certification?	Yes ___ No <u>X</u>	(Attach a copy)
Related Enacted Ordinances?	Yes <u>X</u> No ___	Ord. # of Previous Ord. <u>2012-0433</u>

Report Required to City Council/Council Auditors

Yes \_\_\_ No X 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: Jill Dame, Interim Executive Director, Jacksonville Children's Commission  
(Name, Job Title, Department)

Phone: 630-6425 Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact person: Cynthia Nixon, Finance Director, Jacksonville Children's Commission  
(Name, Job Title, Department)

Phone: 630-3652 Fax: 630-6474 E-mail: cnixon@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**