

2013-12

LEGISLATIVE FACT SHEET

DATE: 10/29/2012

BT OR RC NUMBER: 13-018
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): h bore

PURPOSE/SUMMARY:

To appropriate grants funds from the Institute of Museum and Library Sciences. This grant will provide funds for the Ritz Theater and Museum staff to strengthen the knowledge, skills and other necessary expertise in the critical area of collection care and management. Grant period is October 1, 2012 through September 30, 2013.

APPROPRIATION: Total Amount Appropriated: \$ 105,674.00 as follows:

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

Name of Federal Funding Source: IMLS Amount: \$ 49,200.00

Name of State Funding Source: _____ Amount: \$ _____

Name of City of Jax Funding Source: _____ Amount: \$ _____

Name of In-Kind Contribution Source: COJ/ Ritz Theatre & Museum Amount: \$ 56,474.00

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 ___ No <u>x</u>	_____
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 <u>x</u> No ___	Name of Dept. <u>Parks and Rec.</u>
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 <u>x</u>	(Attach a copy)
Related Enacted Ordinances?	Yes ___ No <u>x</u>	Ord. # of Previous Ord. _____
Report Required to City Council/Council Auditors	Yes ___ No <u>x</u>	Date _____ Frequency _____

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: John M. Jones, Esq., Real Estate Manager, Senior, Real Estate Division
(Name, Job Title, Department)
Phone: 255-8795 Fax: 255-8948 E-mail: _____

Contact person: Jim Morgan, Land Management Agent, Sr., Real Estate Division
(Name, Job Title, Department)
Phone: 255-8737(255-8700) Fax: 255-8948 E-mail: morgan@coj.net

**COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER
TRANSMITTAL**

To: 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.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED