

LEGISLATIVE FACT SHEET

DATE: 03/18/13

BT or RC No: 13-049
(Administration Bills)

SPONSOR: Judicial Courts/Juvenile Drug Court
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

Dept of Justice - Office of Juvenile and Delinquency Prevention/JDC Reclaiming Futures Program to serve substance abusing juvenile offenders. This program implements the Reclaiming Futures and 7 Challenges models. This is a collaborative venture with JDC, State Attorney, Public Defender and River Region Human Services.

APPROPRIATION: Total Amount Appropriated: \$1,765,464.00 as follows:

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

Name of Federal Funding Source: Department of Justice, Office of Justice Programs Amount: \$1,324,098.00

Name of State Funding Source: _____ Amount: _____

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

Name of In-Kind Contribution: City of Jacksonville, Personnel Amount: \$441,366.00

Name of Bond Acct: _____ Amount: _____

Bond Account Number: _____

IMPACT - FINANCIAL / OTHER:

Reduce, recurrence and recidivism

ACTION ITEMS:

	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Justification of Emergency:
Federal or State Mandates?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach CIP Form(s))
Contract / Agreement (C/A) Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Oversight Department Required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Name of Dept: _____
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy) BT 13-049
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Continuation of Grant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ordinance #: _____
Report Required to City Council or Council Auditors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Date: _____ Frequency: _____

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Cc: Chris Hand, Chief of Staff, Office of the Mayor

From: Joseph Stelma, Jr - Trial Court Administrator

(Name, Job Title, Department)

Phone: 255-1001

E-mail: jstelma@coj.net

Contact Pamela Trent - Court Administration

Person: (Name, Job Title, Department)

Phone: 255-1007

E-mail: ptrent@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 630-4647

E-mail: psidman@coj.net

From: Joseph Stelma, Jr - Trial Court Administrator

(Name, Job Title, Department)

Phone: 255-1001

E-mail: jstelma@coj.net

Contact Pamela Trent - Court Administration

Person: (Name, Job Title, Department)

Phone: 255-1005

E-mail: ptrent@coj.net

Legislation from Independent Agencies require a resolution from the Independent Agency Board approving the legislation.

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED