## LEGISLATIVE FACT SHEET 2015-0103

DATE:	12/22/14		BT	or RC No: _	BT1503	0	
				ninistration B			
SPONSOR:	Regulatory Compliance Department/Mosquito Control Division						
		(Departme	nt/Division/Agency/	Council Memb	oer)		
				American server real factor of			
PURPOSE/SU							
from Fiscal Year 2 all of the state fun 021287 (City Con	ds the ERMC012 State bud 2014) to expenditure accounts and hold no reserves, patract #8694-13). State Bud puted after FY 2014 closed	nts for Fiscal Y er Rule 5E-13. get Amendmen	ear 2015. This is h 027(1) Florida Admi	ousekeeping inistrative Co	legislation inter de and FDACS	nded to budget Contract	
APPROPRIAT	ION: Total Amount A	ppropriated	:\$2	09,433.00	as follows:	, 18c	
(Name of Fund as	s it will appear in title of legi	slation) Mosc	juito Control State F	unds			
Name of Federal	Funding Source:				Amount:		
Name of State Funding Source: ERMC012 Mosquito Control State I					Amount:	\$209,433.00	
Name of City of Jax Funding Source:					Amount:	······································	
Name of In-Kind Contribution:					Amount:		
Name of Bond Acct:					Amount:		
					7 anount.		
Bond Account Nu	imber:						
IMPACT - FIN	ANCIAL / OTHER:						
	ssential to procure supplies insecticides, durable equi						
	)11) has been stripped duri					runuing in	
ACTION ITEM		Yes No	7				
Emergency?		X	Justification of E	mergency:			
	tate Mandates?	X	4 1				
Fiscal Year	·	X	L				
CIP Amenda		X	(Attach CIP Forr	n(s))			
	greement (C/A) Approval?	X	(Attach a copy)			<b>P</b>	
<del></del>	tions On-going?	L X					
•	epartment Required?		Name of Dept.:				
Related RC/		LX	(Attach a copy)				
Waiver of Co		X	Identify Code:				
Code Excep		X	Identify Code:				
Continuation		X					
	perty Certification?	X	(Attach a copy)				
	cted Ordinances?	X	Ordinance #:				
	uired to City Council or	L X					
Council Au	altors?		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:	Kimberly Scott, M.P.A., Director of R (Name, Job Title, Department) Phone: 255-7239 7094	Regulatory Compliance Department  F-mail: Kscott@coj.net  Control Division of Regulatory Compliance Dept.			
cou	NCIL MEMBER / INDEPENDENT	AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL			
To:	Peggy Sidman, Office of Genera Phone: 630-4647	ll Counsel, St. James Suite 480 E-mail: psidman@coj.net			
From:					
	(Name, Job Title, Department)	F 1			
•	Phone:	E-mail:			
Contact Person: (Name, Job Title, Department)					
	Phone:	E-mail:			
Legislation from Independent Agencies require a resolution from the Independent Agency Board approving the legislation.					

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED