

**LEGISLATIVE FACT SHEET** 2015-0107

DATE: 12/29/2014

TD OR RC NUMBER: \_\_\_\_\_  
(Administration Bills)

**SPONSOR** JFRD / Emergency Preparedness Division (EPD); General Counsel

**PURPOSE/SUMMARY:**

Transfer ownership of UASI purchased property.

**APPROPRIATION :** Total Amount Appropriated: None \_\_\_\_\_ as follows:

**(Name of Fund as it will appear in title of legislation)** \_\_\_\_\_

Name of Federal Funding Source: \_\_\_\_\_ NA \_\_\_\_\_ Amount: \$ \_\_\_ None \_\_\_\_\_

Name of State Funding Source: \_\_\_\_\_ NA \_\_\_\_\_ Amount: \$ \_\_\_ None \_\_\_\_\_

Name of City of Jax Funding Source: \_\_\_\_\_ NA \_\_\_\_\_ Amount: \$ \_\_\_ None \_\_\_\_\_

Name of In-Kind Contribution Source: \_\_\_\_\_ NA \_\_\_\_\_ Amount: \$ \_\_\_ None \_\_\_\_\_

Name of Bond Acct \_\_\_\_\_ NA \_\_\_\_\_ Amount: \$ \_\_\_ None \_\_\_\_\_

Number \_\_\_\_\_

**IMPACT - FINANCIAL/OTHER:**

No impact. Transfer from COJ inventory to agencies currently in possession of such property; an administrative activity.

**ACTION ITEMS:**

Emergency?	Yes ___ No <u>X</u>	Justification: _____
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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 ___ 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 ___ 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 _____

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**Add Additional pages as necessary for explanation.**

**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**