

LEGISLATIVE FACT SHEET

2015-0204

DATE: 02/25/15

BT or RC No: BT15051
(Administration Bills)

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

PURPOSE/SUMMARY:

Transfer funds from fund balance to increase funding for 2015 summer camps. Funding was identified from prior year contract encumbrances that were released this FY. This funding will create an additional 427 seats for needy children across the city. It brings total funding for summer camps from \$1,773,454 to \$1,933,579, closer in line with last year's funding after Ordinance 2014-413.

APPROPRIATION: Total Amount Appropriated: \$160,125.00 as follows:
Jacksonville Children's Commission - Special Revenue Fund
 (Name of Fund as it will appear in title of legislation) Balance

Name of Federal Funding Source: _____ Amount: _____
 Name of State Funding Source: _____ Amount: _____
 Name of City of Jax Funding Source: _____ Amount: _____
 Name of In-Kind Contribution: _____ Amount: _____
 Name of Bond Acct: _____ Amount: _____
 Bond Account Number: _____

IMPACT - FINANICIAL / OTHER:

This legislation increases funding appropriated for summer camp seats by an additional \$160,125.

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"/>	<input style="width: 100%; height: 20px;" type="text"/>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach CIP Form(s))
Contract / Agreement (C/A) Approval?	<input type="checkbox"/>	<input checked="" 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)
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 type="checkbox"/>	<input checked="" 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: Jon Heymann, Executive Director/CEO

(Name, Job Title, Department)

Phone: 630-6425

E-mail: jheymann@coj.net

Contact Cynthia Nixon, Director of Finance & Management Services

Person: (Name, Job Title, Department)

Phone: 630-3652

E-mail: cnixon@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: _____

(Name, Job Title, Department)

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