

LEGISLATIVE FACT SHEET

2015-0766

DATE: 10/14/15

BT or RC No: BT 16-005
(Administration Bills)

SPONSOR: Office of the Sheriff
(Department/Division/Agency/Council Member)

PURPOSE/SUMMARY:

To appropriate \$51,402.00 in federal pass-through funds, with a local match of \$12,851.00, to fund one position and related expenses. One full-time SPE victim advocate position to provide services to victims following an act of crime. Grant ends September 30, 2016. Included on Schedule B1C - FY16 Provisional Grants. The local match will be met by utilizing a currently funded Social Service Specilist Senior position.

APPROPRIATION: Total Amount Appropriated: \$77,104.00 as follows:

(Name of Fund as it will appear in title of legislation) Florida Office of Attorney General Victim Advocate Project
Name of Federal Funding Source: US Department of Justice, Office for Victims of Crime Amount: pass through
Name of State Funding Source: Florida Office of Attorney General Amount: \$51,402.00
Name of City of Jax Funding Source: _____ Amount: _____
Name of In-Kind Contribution: _____ Amount: _____
Name of Bond Acct: _____ Amount: _____
Bond Account Number: _____

IMPACT - FINANCIAL / OTHER:

[Empty box for impact information]

ACTION ITEMS:

	Yes	No
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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"/>
Contract / Agreement (C/A) Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Oversight Department Required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Report Required to City Council or Council Auditors?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Justification of Emergency: _____
(Attach CIP Form(s))
(Attach a copy)
Name of Dept.: JSO Investigations Division
(Attach a copy)
Identify Code: _____
Identify Code: _____
(Attach a copy)
Ordinance #: _____
Date: _____ Frequency: _____

ADMINISTRATIVE TRANSMITTAL

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

Cc: Kerri Stewart, Chief of Staff, Office of the Mayor

From: William J Clement - Chief of Budget & Management Division, Office of the Sh

(Name, Job Title, Department)

Phone: 904-630-2217

E-mail: William.Clement@jaxsheriff.org

Contact William J Clement - Chief of Budget & Management Division, Office of the Sh

Person: (Name, Job Title, Department)

Phone: 904-630-2217

E-mail: William.Clement@jaxsheriff.org

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: William J Clement - Chief of Budget & Management Division, Office of the Sh

(Name, Job Title, Department)

Phone: 904-630-2217

E-mail: William.Clement@jaxsheriff.org

Contact William J Clement - Chief of Budget & Management Division, Office of the Sh

Person: (Name, Job Title, Department)

Phone: 904-630-2217

E-mail: William.Clement@jaxsheriff.org

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

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE
DATE OCT 26 2015