

2015-0781

LEGISLATIVE FACT SHEET

DATE: Nov 17, 2015

BT OR RC NUMBER: _____
(Administration Bills)

SPONSOR (Department/Division/Agency/Council Member): _____

PURPOSE/SUMMARY:

Amendment #17 to the Jacksonville Jaguars LLC lease agreement

APPROPRIATION : Total Amount Appropriated: \$ _____ as follows:

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

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 Source: _____ Amount: \$ _____

Name of Bond Acct _____ Amount: \$ _____

Number _____

IMPACT - FINANCIAL/OTHER:

ACTION ITEMS:

Emergency?	Yes ___	No <input checked="" type="checkbox"/>	Justification: _____
Federal or State Mandates	Yes ___	No <input checked="" type="checkbox"/>	
Fiscal Year Carryover?	Yes ___	No <input checked="" type="checkbox"/>	
CIP Amendment?	Yes ___	No <input checked="" type="checkbox"/>	(Attach CIP form)
Contract/Agreement (C/A) Approval	Yes <input checked="" type="checkbox"/>	No ___	(Attach a copy only)
C/A negotiations on-going?	Yes ___	No <input checked="" type="checkbox"/>	
Oversight Department Required?	Yes <input checked="" type="checkbox"/>	No <input checked="" type="checkbox"/>	Name of Dept. OED
Related RC?/BT?	Yes ___	No <input checked="" type="checkbox"/>	(Attach a copy)
Waiver of Code?	Yes ___	No <input checked="" type="checkbox"/>	(Identify Code Provision _____)
Code Exception?	Yes ___	No <input checked="" type="checkbox"/>	(Identify Code Provision _____)
Continuation Grant?	Yes ___	No <input checked="" type="checkbox"/>	
Surplus Property Certification?	Yes ___	No <input checked="" type="checkbox"/>	(Attach a copy)
Related Enacted Ordinances?	Yes <input checked="" type="checkbox"/>	No ___	Ord. # of Previous Ord. <u>2015-674</u>

