## **LEGISLATIVE FACT SHEET**

	<u>LE</u>	GISL	AIIV	E FACT SHEET	0-11 09#
					RC16-097 BT 16-050
DATE:	02/19/16			BT or RC No:	131 10 030
				(Administration Bi	lls)
SPONSOR:				Office of the Mayor	
		(De	partmer	nt/Division/Agency/Council Membe	er)
PURPOSE/SUI	MMARY:				
				ded Jacksonville Journey Progran	
				workforce development and jobs 32210, 32211, 32218, 32244 and 3	
targeted in zip cod	les 32202, 32203, 32200,	32200, 3	2209, 3	52210, 52211, 52216, 52244 and 3	52254.
APPROPRIATI	ON: Total Amount 4	nnron	isted:	\$1,885,074.00	as follows:
			ialeu.	<u>Ψ1,003,074.00</u>	as follows.
(Name of Fund as	it will appear in title of leg	islation)		3 14 1 1 1 1 1 1	
Name of Federal F	Funding Source:				Amount:
Name of State Fur		Amount:			
Name of City of Ja	x Funding Source: Jacks	onville Jo	urney (S	F 019) / Special Events (SF 01A)	Amount: \$1,885,074.00
Name of In-Kind C	ontribution:				Amount:
Name of Bond Acc	12				Amount:
Bond Account Nun					
IMPACT - FINA	ANICIAL / OTHER:				
ACTION ITEMS	S:	Yes	No		
Emergency?		х		Justification of Emergency:	
Federal or Sta	ate Mandates?		Х	The emergency justification is b	
Fiscal Year Ca	arryover?		Х	related to getting the RFP's out spending the appropriated dollar	
CIP Amendme	ent?		Х	of opportunity to get this work d	
Contract / Agr	eement (C/A) Approval?		Х	ends.	· · · · · · · · · · · · · · · · · · ·
C/A Negotiation	ons On-going?		Х		
Oversight Dep	partment Required?		Х	Name of Dept.:	
Related RC/B	T?	х		(Attach a copy)	
Waiver of Coo	de?		Х	Identify Code:	
Code Exception	on?		Х	Identify Code:	
Continuation of	of Grant?		Х		-
Surplus Prope	erty Certification?		Х	(Attach a copy)	
Related Enact	ted Ordinances?	Х		Ordinance #:	
Report Requir	ed to City Council or		Х	•	
Council Audi	tore?	8		Date:	Erequency:

## **ADMINISTRATIVE TRANSMITTAL**

To:	MBRC, c/o Rosely	/n Chall, Budget C	Office, St. James Suite 325	
Cc:	Allison Korman Sh	nelton, Director of	Intergovernmental Affairs, Office of the May	or
From:	Dr. Charles E. More	land, Director of Co	mmunity Affairs - Office of the Mayor	
	(Name, Job Title, Dep	artment)		
	Phone: 904-63	30-7215 F	E-mail: <u>CMoreland@coj.net</u>	***
Contact	Dr. Charles E. More	land, Director of Co	mmunity Affairs - Office of the Mayor	
Person:	: (Name, Job Title, Dep	artment)		
	Phone: 904-63	30-7215 E	E-mail: <u>CMoreland@coj.net</u>	
COU	NCIL MEMBER / IN	IDEPENDENT AC	GENCY / CONSTITUTIONAL OFFICER TRA	NSMITTAL
To:	Peggy Sidman, Of	ffice of General Co	ounsel. St. James Suite 480	
То:			ounsel, St. James Suite 480 E-mail: psidman@coj.net	
			•	
To: From:	Phone: 630-	-4647 E	•	
		artment)	E-mail: psidman@coj.net	
From:	Phone: 630- (Name, Job Title, Dep Phone:	artment)	•	
From:	Phone: 630- (Name, Job Title, Dep Phone:	artment)	E-mail: psidman@coj.net	
From:	Phone: 630- (Name, Job Title, Dep Phone:	artment) E	E-mail: psidman@coj.net	
From:	Phone: 630- (Name, Job Title, Dep Phone:	artment) E	E-mail: psidman@coj.net	

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED