

# LEGISLATIVE FACT SHEET

DATE: 03/02/16

BT or RC No: \_\_\_\_\_  
(Administration Bills)

SPONSOR: Office of General Counsel  
(Department/Division/Agency/Council Member)

**PURPOSE/SUMMARY:**

AN ORDINANCE APPROPRIATING \$400,000 FROM OFFICE OF GENERAL COUNSEL RETAINED EARNINGS TO PROVIDE FOR SUPPLEMENTAL FUNDING FOR THE CITY'S LITIGATION COSTS (INCLUDING EXPERT WITNESS AND TRAVEL COSTS) IN THE OFFICE OF GENERAL COUNSEL'S ANCILLARY LEGAL ACCOUNTS FOR PROFESSIONAL SERVICES AND TRAVEL, PREDOMINATELY IN THE CASE STYLED U.S., ET AL. VS. CONSOLIDATED CITY OF JACKSONVILLE, ET AL., CASE NO. 3:12-CV-451-J-32MCR (M.D. FLA.), AMONG OTHER CASES.

APPROPRIATION: Total Amount Appropriated: \$400,000.00 as follows:  
(Name of Fund as it will appear in title of legislation) OFFICE OF GENERAL COUNSEL RETAINED EARNINGS

Name of Federal Funding Source: _____	Amount: _____
Name of State Funding Source: _____	Amount: _____
Name of City of Jax Funding Source: <u>JXSF 551-38902</u>	Amount: <u>\$400,000.00</u>
Name of In-Kind Contribution: _____	Amount: _____
Name of Bond Acct: _____	Amount: _____
Bond Account Number: _____	

**IMPACT - FINANCIAL / OTHER:**

N/A

**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"/>	
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 type="checkbox"/>	<input checked="" 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: Kerri Stewart, Chief of Staff, Office of the Mayor

From: Rita Mairs, Chief of General Litigation, OGC

(Name, Job Title, Department)

Phone: 630-1716

E-mail: [mairsr@coj.net](mailto:mairsr@coj.net)

Contact Rita Mairs, Chief of General Litigation, OGC

Person: (Name, Job Title, Department)

Phone: 630-1716

E-mail: [mairsr@coj.net](mailto:mairsr@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](mailto: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.

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