

# LEGISLATIVE FACT SHEET

DATE: 05/18/16

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

SPONSOR: Jacksonville Public Library  
(Department/Division/Agency/Council Member)

**PURPOSE/SUMMARY:**

AN ORDINANCE AMENDING SECTION 90.101 (BOARD OF LIBRARY TRUSTEES), CHAPTER 90 (BOARD OF LIBRARY TRUSTEES), ORDINANCE CODE, TO CHANGE THE BOARD TERM EXPIRING DATE FROM JULY 15 TO SEPTEMBER 30; PROVIDING FOR AN EFFECTIVE DATE.

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: \_\_\_\_\_ Amount: \_\_\_\_\_

Name of Bond Acct: \_\_\_\_\_ Amount: \_\_\_\_\_

Bond Account Number: \_\_\_\_\_

**IMPACT - FINANCIAL / OTHER:**

**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 type="checkbox"/>	<input checked="" type="checkbox"/>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Contract / Agreement (C/A) Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
C/A Negotiations On-going?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Oversight Department Required?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Related RC/BT?	<input type="checkbox"/>	<input checked="" 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.: \_\_\_\_\_

(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: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

From: Barbara Gubbin, Director, Jacksonville Public Library

(Name, Job Title, Department)

Phone: 630-1994

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

Contact Barbara Gubbin, Director, Jacksonville Public Library

Person: (Name, Job Title, Department)

Phone: 630-1994

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