

# LEGISLATIVE FACT SHEET

DATE: 05/31/16

BT or RC No: BT16-089  
(Administration Bills)

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

**PURPOSE/SUMMARY:**

To appropriate \$414,350 from the Special Law Enforcement Trust Fund as follows:

1) Appropriate \$398,850 in accordance with F.S. 932.7055:  
American Foundation for Suicide Prevention - \$5,000; Boy Scouts of America, North Florida Council - \$10,000; City Center Ministry of Jacksonville dba Noah's Ark - \$10,000; Communities In Schools of Jacksonville, Inc. - \$15,000; Family Farm of Northeast Florida - \$30,000; First Coast Crime Stoppers, Inc. - \$25,000; Florida Archery Foundation, Inc. - \$10,000; Florida Sheriff's Youth Ranch - \$500; Florida State College Foundation, Inc. - \$36,000; Hands on Jacksonville - \$5,000; Hubbard House - \$10,000; I.M. Sulzbacher Center for the Homeless, Inc. - \$35,000; Jacksonville Historic Naval Ship Association, Inc. - \$10,000; Justice Coalition, Inc. - \$15,000; Kingdom Fellowship, Inc. - \$10,000; M.A.D. D.A.D.S. Jacksonville Chapter, Inc. - \$30,000; MaliVai Washington Kids Foundation, Inc. - \$10,000; Northeast Florida Camp Cadet - \$7,500; Operation Save Our Sons (OSOS) - \$29,850; Pit Sisters - \$5,000; Police Athletic League of Jacksonville, Inc. - \$70,000; Project Cold Case, Inc. - \$5,000; Rethreaded, Inc. - \$10,000; State of Florida Association of Police Athletic/Activity Leagues, Inc. - \$5,000,

2) Appropriate \$12,500 transfer to the Police Explorers Trust Fund in accordance with ordinance code section 111.340,

3) Appropriate \$3,000 transfer to the Teen Driver Special Revenue Fund in accordance with ordinance code section 111.365.

APPROPRIATION: Total Amount Appropriated: \$426,850.00 ✓ 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: Special Law Enforcement Trust Fund Amount: \$426,850.00 ✓

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"/>	Justification of Emergency: <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
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"/>	(Attach CIP Form(s))
Oversight Department Required?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(Attach a copy)
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Name of Dept.: <u>JSO Budget &amp; Management Division</u>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(Attach a copy)
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Identify Code: _____
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: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

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

(Name, Job Title, Department)

Phone: 630-2217

E-mail: [william.clement@jaxsheriff.org](mailto:william.clement@jaxsheriff.org)

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

Person: (Name, Job Title, Department)

Phone: 630-2217

E-mail: [william.clement@jaxsheriff.org](mailto: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](mailto:psidman@coj.net)

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

(Name, Job Title, Department)

Phone: 630-2217

E-mail: [william.clement@jaxsheriff.org](mailto:william.clement@jaxsheriff.org)

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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**