LEGISLATIVE FACT SHEET

DATE:	10/19/16	BT or RC No:
·		(Administration & City Council Bills)
SPONSOR:	Office of Economic D	evelopment
	-	(Department/Division/Agency/Council Member)
Contact for all inq	quiries and presentation	nsOffice of Economic Development
Provide Name:	Ed Rand	olph, Director of Business Development Operations (OED)
Contact	Number:	630-1185
Email A	ddress:	edr@coj.net
Research will complete		is necessary? Provide; Who, What, When, Where, How and the Impact.) Council d legislation and the Administration is responsible for all other legislation.
	<u> </u>	le metro area was selected by the Brooking Institute
		e plans to accentuate the region's global presence
_		e (GCI).The GCI inclides 27 other cities with the same asses: Exports and Foreign Direct Investment (FDI).
•	•	ey deliverables of Phase 1 (Exports). A regional plan
	1.77	ompleted and released on April 14, 2015. The
		nted. The OED would like to move forward with the
	•	ort Plan and subsequently move to Phase 2, which egration of a Foreign Direct Investment (FDI)
		nter into a one-year agreement with JAXUSA
		ort Plan and begin Phase 2FDI strategy
development.		
	×	

List the source name and pro	ovide Object and Subobject Num	bers for each category listed below:
(Name of Fund as it will appear in t	tle of legislation)	
Name of Federal Funding Source(s)	From:	Amount:
value of Federal Fullding Source(s)	То:	Amount:
	From:	Amount:
Name of State Funding Source(s):	То:	Amount:
Name of City of Jacksonville	From:	Amount:
Name of City of Jacksonville Funding Source(s):	To:	Amount:
	10.	Amount.
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	To:	Amount:
		nt with JAXUSA Partnership to ategy development. If approved.
		ategy development. If approved,
	• •	Partnership for \$60,000, with the
	mitment for two additional y ear of the proposed initiative	
	essional Services 03109).	
		9
		9

Page 2 of 5 Rev. 8/2/2016 (CLB RM)

Funds for the intial

ACTION ITEMS: Yes	No	
Emergency?	x	Justification of Emergency: If yes, explanation must include detailed nature of
,		emergency.
Federal or State	x	Explanation: If yes, explanation must include detailed nature of mandate
Mandate?		including Statute or Provision.
Fiscal Year		Note: If yes, note must include explanation of all-year subfund carryover
Carryover?	X	language.
,		
		Attachment: If yes, attach appropriate CIP form(s). Include justification for
CIP Amendment?	X	mid-year amendment.
Contract / Agreement		Attachment & Explanation: If yes, attach the Contract / Agreement and name
Approval? X		of Department (and contact name) that will provide oversight. Indicate if
7.pp.ova		negotiations are on-going and with whom. Has OGC reviewed / drafted? Office of Economic Development to provide oversight and administration.
		Office of Economic Development to provide oversight and administration.
Related RC/BT?	X	Attachment: If yes, attach appropriate RC/BT form(s).
\vdash	25,000	Code Reference: If yes, identify code section(s) in box below and provide
Waiver of Code?	x	detailed explanation (including impacts) within white paper.
0.1.5		Code Reference: If yes, identify code in box below and provide detailed
Code Exception?	X	explanation (including impacts) within white paper.
Related Enacted		Code Reference: If yes, identify related code section(s) and ordinance
Ordinances?	X	reference number in the box below and provide detailed explanation and any
Ordinariocs:		changes necessary within white paper.

Page 3 of 5

ACTION ITEMS CONTINUED: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.

ACTION ITEMS:	Yes	No			
Continuation of Grant?		x	Explanation: How will the funds be used? Does the siles the funding for a specific time frame and/or multi-year of grant? Are there long-term implications for the	ear? If mul	lti-year, note
				*	
Surplus Property Certification? Reporting Requirements?		х	Attachment: If yes, attach appropriate form(s). Explanation: List agencies (including City Council / A and frequency of reports, including when reports are (include contact name and telephone number) response.	due. Provi	de Department
Division Chief:	5	_	(signature)	Date:	10/19/2016
Prepared By:	S-f		(signature)	Date:	10/19/2016

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325		
Thru:	Sam Mousa, Chief Administrative Officer, Mayors Office, Fourth Floor, City Hall at St. James (Name, Job Title, Department)		
	Phone: E-mail:		
From:	Kirk Wendland, Executive Director, Office of Economic Development (OED)		
	Initiating Department Representative (Name, Job Title, Department)		
	Phone: 630-2455 E-mail: <u>kwendland@coj.net</u>		
Primary Contact:	Ed Randolph, Director of Business Development Operations, OED		
Contact:	(Name, obb Title, Department)		
	Phone: 630-1185 E-mail: edr@coj.net		
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: <u>akshelton@coj.net</u>		
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
To:	Paggy Sidman, Office of Conoral Councel, St., James Suite 480		
10.	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net		
_			
From:	Initiating Council Member / Independent Agency / Constitutional Officer		
- .	Phone: E-mail:		
Primary Contact:			
Cornact.	(Name, Job Title, Department)		
	Phone: E-mail:		
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: akshelton@coj.net		
Legislation	on from Independent Agencies requires a resolution from the Independent Agency Board		
_	g the legislation.		
Independ	dent Agency Action Item: Yes No		
E	Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?		

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

Page 5 of 5