LEGISLATIVE FACT SHEET

DATE:	11/14/16	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:	Finance and	ministartion / Budget Office
		(Department/Division/Agency/Council Member)
Contact for all	inquiries and pre	ntation: Angela Moyer
Provide Name	:	
Conta	act Number:	904-630-1259
Emai	l Address:	amoyer@coj.net
Research will comp (Minimum of 35	lete this form for Counc 50 words - Maximu	
Revise section 10 o Correct the title o Strike 106.215 (emergency". Sup	6.215 Supplemental of the continuation g (c). This item current	ections 106.215, 106.216 and 106.401. propriation and revenue reduction limits: match reserve in 106.215 (b) tates "supplemental appropriation ordinances may not be approved by s are budget transfers that are in additional to what Council approved in the ordinance.
o Change the date provide the recommevised because if for vehicle replace o Strike a portion City's short term with the Council's	nmended vehicle repl t conflicts with the tin ements for the upcom of 106.216(d) which oan fund and/or budg or the Administration	eet vehicles: ruary 1st to April 1st. This is the date that Fleet management is required to ments to the Budget Office for the upcoming fiscal year. The date needs to be ame in 106.217 (1) that requires Fleet management to determine estimated costs fiscal year by working with vehicle vendors between January and March. es that the Mayor should recommend funding for vehicle replacements from the stabilization account. This contradicts section 106.216 (h) and are not in line ocus of funding vehicle replacements with cash. Item (h) of the same section hase fleet replacement vehicles.
o Replace all refe part-time hours wi enterprise fund, in that this section p requires the Mayo	rences to "major func ithin major funds with iternal service fund a rovided this type of fl ir to certify the Citywi	zations and 106.404 Temporary Employees: nd "fund" with "subfund". As it is written now the Mayor can move positions and Council approval. Major fund include general fund, special revenue fund, crust/agency fund. The Budget Office and the Council Auditors were unaware polity. This is contrary to Council's intent when it created 106.422 (c) which cap by subfund and department. It is also unwise to move positions and/or part- fund due to differences in the various funding sources that exist between

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APPROPRIATION: Total All List the source <u>name</u> and pro	mount Appropriated N ovide Object and Subobject Numbers for each	/A as follows: ch category listed below:
(Name of Fund as it will appear in t	itle of legislation)	
Name of Federal Funding Source(s	From:	Amount:
	То:	Amount:
Name of State Funding Source(s):	From:	Amount:
g = a constant	То:	Amount:
Name of City of Jacksonville	From:	Amount:
Funding Source(s):	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
realitie of in-reality contains attories).	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	То:	Amount:

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PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER: Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs. (Minimum of 350 words - Maximum of 1 page.)

ACTION ITEMS: Purpose / Check code provisions for each.	List. If "Yes" please provide detail by attaching justification, and
ACTION ITEMS: Yes No Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State Mandate?	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.

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Fiscal Year Carryover?	X	Note: If yes, note must include explanation of all-year subfund carryover language.
· _		
CIP Amendment?	х	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	X	Attachment & Explanation: If yes, attach the Contract / Agreement and name of Department (and contact name) that will provide oversight. Indicate if negotiations are on-going and with whom. Has OGC reviewed / drafted?
Related RC/BT?	Х	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	х	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.
_		
Code Exception?	X	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Г		
Related Enacted Ordinances?	X	Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any changes necessary within white paper.
ACTION ITEMS CONT justification, and code p		urpose / Check List. If "Yes" please provide detail by attaching for each.
ACTION ITEMS:	Yes No	•
Continuation of Grant?	x	Explanation: How will the funds be used? Does the funding require a match? Is the funding for a specific time frame and/or multi-year? If multi-year, note year of grant? Are there long-term implications for the General Fund?

Surplus Property Certification?	x	Attachment: If yes, attach approp	riate form(s).	
Reporting Requirements?	Х	Explanation: List agencies (including City Council / Auditor) to receive reports and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating		
Division Chief:	C	(signature)	Date: _	11/14/2016
Prepared By:	 6	(signature)	Date: _	11/14/2016

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325
Thru:	Angela Moyer, Budget Officer
	(Name, Job Title, Department)
	Phone: 904-630-1301 E-mail: <u>amoyer@coj.net</u>
From:	same
	Initiating Department Representative (Name, Job Title, Department)
	Phone: E-mail:
Primary	camo
Contact:	
	Phone: E-mail:
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: akshelton@coj.net
COUN	CIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	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:	(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
-	on from Independent Agencies requires a resolution from the Independent Agency Board g the legislation.
	g the legislation. dent Agency Action Item: Yes No
•	Attachment: If yes, attach appropriate documentation. If no,
	when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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