LEGISLATIVE FACT SHEET

| DATE: | 12/09/16 | BT or RC No: |
|--|---|---|
| | | (Administration & City Council Bills) |
| | | |
| SPONS | OR: Finance and Ad | dministration/Procurement |
| | | (Department/Division/Agency/Council Member) |
| Contact | for all inquiries and prese | entation: |
| Provide | Name: | Gregory Pease |
| | Contact Number: | 255-8801 |
| | Email Address: | gpease@coj.net |
| Research (Minimu | will complete this form for Council in im of 350 words - Maximum | gislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council ntroduced legislation and the Administration is responsible for all other legislation. of 1 page.) e the ordinance code chapter 126 parts 2 and 3 regarding Sole Source and |
| between between that many use the "the Single | a Sole Source or Proprietary cla the two classifications. In 2011, non-competitive purchases we Single Source" designation use e Source designation. This will: | is a using agency in their justification for a noncompetitive purchase to distinguish assification. This creates some confusion as there is frequently a gray area an audit was performed by the Council Auditors Office which resulted in findings are misclassified. Their recommendation was to remove the two classifications and d by the State of Florida. Procurement also desires to simplify this process and use still require the same process for justifying the non-competitive purchase only it will er it is Sole Source or Proprietary. |
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| APPROPRIATION: Total Af | nount Appropriated N/A | as follows: |
|---------------------------------------|--|-----------------------|
| List the source <u>name</u> and pro | ovide Object and Subobject Numbers for each o | ategory listed below: |
| (Name of Fund as it will appear in to | tle of legislation) | |
| Name of Federal Funding Source(s) | From: N/A | Amount: |
| | То: | Amount: |
| | r and a second s | |
| Name of State Funding Source(s): | From: N/A | Amount: |
| | То: | Amount: |
| | | |
| Name of City of Jacksonville | From: N/A | Amount: |
| Funding Source(s): | То: | Amount: |
| | | |
| Name of In-Kind Contribution(s): | From: N/A | Amount: |
| Name of m-kind Contibution(s). | То: | Amount: |
| | | |
| Name & Number of Bond | From: N/A | Amount: |
| Account(s): | To | 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.) | |
|---|--|
| No financial Impact | |
| | |
| ACTION ITEMS: Purpose / Check I 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? | Note: If yes, note must include explanation of all-year subfund carryover language. |
|--|--|
| Carryover: | |
| CIP Amendment? X Contract / Agreement Approval? X | Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. 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? X Waiver of Code? X | Attachment: If yes, attach appropriate RC/BT form(s). 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. |
| Related Enacted Ordinances? | 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. See explanation above |
| ACTION ITEMS CONTINUED: Pur justification, and code provisions for | pose / Check List. If "Yes" please provide detail by attaching 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? | Attachment: If yes, attach appropriate form(s). |

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| Reporting Requirements? | X | | City Council / Auditor) to receive reports en reports are due. Provide Department number) responsible for generating |
|----------------------------|---|-------------|--|
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| | | - | |
| | | | |
| | | | |
| Division Chief: | 7 | (signature) | Date: / 2//2//6 |
| Prepared By: | | (disease) | Date: |
| | | (signature) | |

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ADMINISTRATIVE TRANSMITTAL

| To: | MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325 | | | |
|----------|---|--|--|--|
| Thru: | | | | |
| | (Name, Job Title, Department) | | | |
| | Phone: E-mail: | | | |
| From: | Greg Pease, Chief of Procurement | | | |
| | Initiating Department Representative (Name, Job Title, Department) | | | |
| | Phone: 255-8801 E-mail: gpease@coj.net | | | |
| Primary | Greg Pease, Chief of Procurement | | | |
| Contact: | (Name, Job Title, Department) | | | |
| | Phone: 255-8801 E-mail: gpease@coj.net | | | |
| CC: | Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor | | | |
| | 904-630-1825 E-mail: akshelton@coj.net | | | |
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| 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: | | | |
| CC: | Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor | | | |
| | 904-630-1825 E-mail: akshelton@coj.net | | | |
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| _ | on from Independent Agencies requires a resolution from the Independent Agency Board | | | |
| | g the legislation. dent Agency Action Item: Yes No | | | |
| • | Boards Action / Resolution? Attachment: If yes, attach appropriate documentation. If no, when is beard action scheduled? | | | |
| ı | when is board action scheduled? | | | |
| | | | | |

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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PROCUREMENT DIVISION





MEMORANDUM

TO: Sam E. Mousa, MBRC Chair

THROUGH: Mike Weinstein, Director, Finance and Administration

FROM: Greg Pease, Chief, Procurement Division

RE: Request for Legislation to Amend Ordinance Code Ch. 126

We respectfully request MBRC approval to submit legislation in order to amend Ordinance Code Ch. 126 Parts 2 & 3 for Sole Source and Proprietary purchases. The requested amendment is to satisfy a Council Auditor recommendation and our own desire to simplify the sole source and proprietary classification process by moving to just a "single source" designation similar to what is used by the State of Florida.

This will eliminate the need to classify a single source procurement as either proprietary or sole source.

Your consideration and approval of this action is greatly appreciated.

GP/

Attachments

APPROVED BY:
MAYOR'S BUDGET
REVIEW COMMITTEE
DATE
DEC 1 2 2016