# LEGISLATIVE FACT SHEET

DATE: 04/26/14

RC 18-002 BT or RC No: BT. 18-002 (Administration & City Council Bills)

SPONSOR: Neighborhoods Department / Housing and Community Development Division

(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation:

Provide Name:	Diana M. Sey	ydlorsky, Chief	
Contact N	lumber:	(904) 255-8204	
Email Ad	dress:	dianams@coj.net	

PURPOSE: White Paper (Explain Why this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council Research will complete this form for Council introduced legislation and the Administration is responsible for all other legislation. (Minimum of 350 words - Maximum of 1 page.)

This legislation appropriates funding received from the U. S. Department of Housing and Urban Development for the Housing Opportunities for Persons with AIDS (HOPWA) program administered by the Housing and Community Development Division. The HOPWA program was established to provide housing assistance and related supportive services for low-income persons living with HIV/AIDS and their families.

HOPWA funds may be used for a wide range of housing, social services, program planning, and development costs. These include, but are not limited to, the acquisition; rehabilitation; or new construction of housing units; costs for facility operations; rental assistance; and short-term payments to prevent homelessness. An essential component in providing housing assistance for this targeted special needs population is the coordination and delivery of support services. Consequently, HOPWA funds also may be used for services including (but not limited to) assessment and case management, substance abuse treatment, mental health treatment, nutritional services, job training and placement assistance, and assistance with daily living.

APPROPRIATION: Total Amount Appropriated \$2,660,472.92 as follows: List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below:

(Name of Fund as it will appear in title of legislation)

Name of Federal Funding Source(s)	From:	U.S. Housing and Urban Development	Amount:	\$2,660,472.92
	То:	Housing Opportunities for Persons s/AIDS Program	Amount:	\$2,660,472.92
Name of State Funding Source(s):	From:		Amount:	
	To:		Amount:	
Name of City of Jacksonville	From:		Amount:	
Funding Source(s):	To:		Amount:	
Name of In-Kind Contribution(s):	From:		Amount:	
	To:		Amount:	
Name & Number of Bond	From:		Amount:	
Account(s):	To:		Amount:	

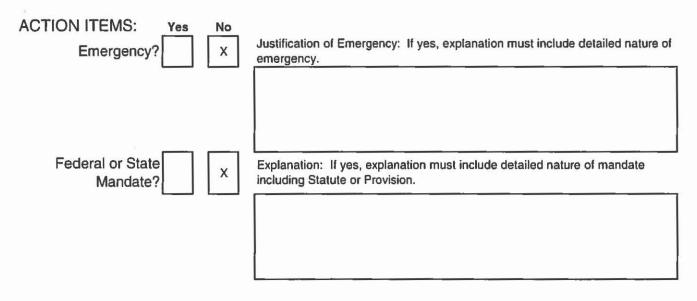
### PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

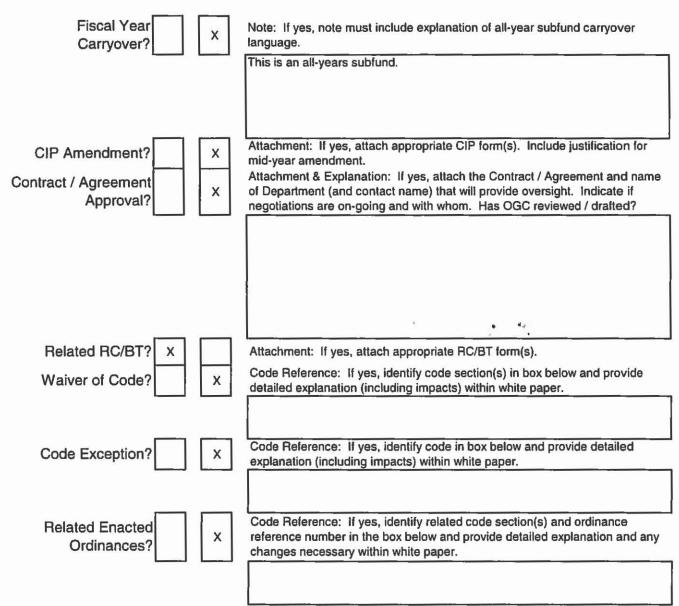
Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation costs.

(Minimum of 350 words - Maximum of 1 page.)

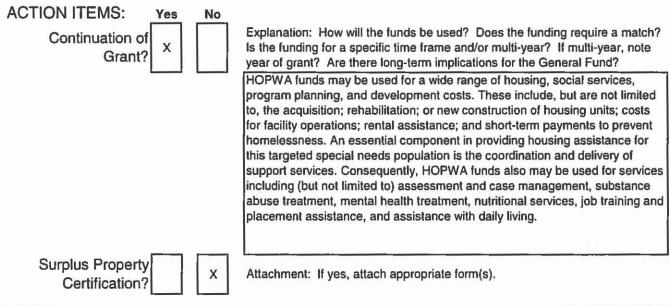
Housing Opportunities for Persons with AIDS grants are provided via formula allocation to grantees by the U.S. Housing and Urban Development.

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





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



1

Reporting X Requirements?	Explanation: List agencies (including City Council / Aud and frequency of reports, including when reports are du Department (include contact name and telephone numb	e. Provide	2.5
Division Chief: Diarie A	Jeeple D.	Pate:4/2	26/2017
Prepared By:	(signature)	oate:4/2	26/2017

5 × 5

# **ADMINISTRATIVE TRANSMITTAL**

То:	MBRC, c/o Roselyn Chall, Budg	et Office, St. James Suite 325
Thru:	Stephanie Burch, Director, Neighbo	rhoods Department
	(Name, Job Title, Department)	
	Phone: 255-8902	E-mail: staphanieb@coj.net
From:	Diana M. Seydlorsky, Chief, Housin	g and Community Development Division
	Initiating Department Representative (N	Name, Job Title, Department)
	Phone: 255-8204	E-mail: dianams@coj.net
Primary		g and Community Development Division
Contact:	(Name, Job Title, Department)	
	Phone: 255-8204	E-mail: dianams@coj.net
CC:	Allison Korman Shelton, Directo	r of Intergovernmental Affairs, Office of the Mayor
	904-630-1825 E-mail: aksh	elton@coj.net
<u>COUN</u>	CIL MEMBER / INDEPENDENT	AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
<b>T</b>	Design Olderer Office of Oregon	
То:		al Counsel, St. James Suite 480
То:	Peggy Sidman, Office of General Phone: 904-630-4647	
To: From:	Phone: 904-630-4647	E-mail: psidman@coj.net
		E-mail: psidman@coj.net
	Phone: 904-630-4647	E-mail: psidman@coj.net
	Phone: 904-630-4647 Initiating Council Member / Independent	E-mail: psidman@coj.net
From: Primary	Phone: 904-630-4647 Initiating Council Member / Independer Phone:	E-mail: psidman@coj.net
From: Primary	Phone: 904-630-4647 Initiating Council Member / Independent	E-mail: psidman@coj.net
From: Primary Contact:	Phone:	E-mail:
From: Primary	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Director	E-mail:
From: Primary Contact:	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Director	E-mail:
From: Primary Contact:	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Director	E-mail:
From: Primary Contact: CC:	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Directo 904-630-1825 E-mail:aksh	E-mail:
From: Primary Contact: CC: Legislati approvir	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Director 904-630-1825 E-mail:aksh on from Independent Agencies re ing the legislation.	E-mail:
From: Primary Contact: CC: Legislati approvir	Phone: Initiating Council Member / Independen Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Directo 904-630-1825 E-mail:aksh	E-mail:
From: Primary Contact: CC: Legislati approvir Indepen	Phone: Initiating Council Member / Independer Phone: (Name, Job Title, Department) Phone: Allison Korman Shelton, Director 904-630-1825 E-mail:aksh on from Independent Agencies re ing the legislation.	E-mail:

# FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED