

LEGISLATIVE FACT SHEET

DATE: 06/26/17

BT or RC No: BT17-126
(Administration & City Council Bills)

SPONSOR: Parks, Recreation & Community Services / Social Services Division
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation

Provide Name: Johnnetta Moore

Contact Number: 630-4743

Email Address: jmoore@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.)

Appropriate current revenue funds within the Victim Assistance Services Trust Fund to provide immediate financial assistance to relieve the hardships of crime victims and to stabilize their situation. Violent crime victims are provided financial assistance for rent, utility and food when prevented from working due to act of violence against them. Additionally, financial assistance for medication can be provided for those requiring it as a result of injuries. This trust fund is authorized in Municipal Code Chapter 702, Section 111.225 (Victim Assistance Services Trust Fund).

APPROPRIATION: Total Amount Appropriated \$14,032.00 as follows:
 List the source name 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: _____	Amount: _____
	To: _____	Amount: _____
Name of State Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s):	From: Victim Assistance Trust Fund: Court Order Restitutions	Amount: \$14,032.00
	To: Victim Assistance Trust Fund: Victim Assistance	Amount: \$14,032.00
Name of In-Kind Contribution(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name & Number of Bond Account(s):	From: _____	Amount: _____
	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.)

Funds are deposited via court ordered restitution and are used to alleviate the hardships of crime victims. Types of financial assistance include rent, utility and food when prevented from working due to act of violence against them. There is no match nor ongoing maintenance.

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

ACTION ITEMS:	Yes	No	
Emergency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
			<div style="border: 1px solid black; height: 60px;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
			<div style="border: 1px solid black; height: 60px;"></div>

Fiscal Year Carryover?

Note: If yes, note must include explanation of all-year subfund carryover language.

This is an all years subfund.

CIP Amendment?
 Contract / Agreement Approval?

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?
 Waiver of Code?

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?

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.

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?

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).

Reporting
Requirements?

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

Division Chief:

John M...
(signature)

Date: 6/22/2017

Prepared By:

Liana...
(signature)

Date: 6/22/2017

ADMINISTRATIVE TRANSMITTAL

To: MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325

Thru: _____

(Name, Job Title, Department)

Phone: _____

E-mail: _____

From: Johnnetta Moore, Chief of Social Services Division, Parks, Recreation & Community Services

Initiating Department Representative (Name, Job Title, Department)

Phone: 630-4720

E-mail: jmoore@coj.net

Primary Contact: Daryl Joseph, Director, Parks, Recreation and Community Services Department

(Name, Job Title, Department)

Phone: 255-7903

E-mail: Djoseph@coj.net

CC: Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor

904-630-1825 E-mail: akshelton@coj.net

COUNCIL 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

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

Independent Agency Action Item: Yes No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED