LEGISLATIVE FACT SHEET

DATE: 07/26/17

BT or RC No: BT17-132

(Administration & City Council Bills)

SPONSOR:

Finance/Treasury

(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations

Provide Name:

Name:	Judie Garard	
Contact Number:	904-630-5207	
Email Address:	jgarard@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.)

Debt Service expenditures for principal and interest are estimated during budgeting prior to the beginning of the current fiscal year. During the year, debt service varies from these initial estimates due to subsequent debt issued on previously authorized projects. In order to provide sufficient expenditures authority in the appropriate funding accounts, a reclassification of budget is necessary to properly reflect the actual expenditures and budget authority.

Page 1 is transfers of debt service budget to and from index codes to align budget in the General Fund. Page 2 is transfers of debt service budget among special revenue funds. Page 3 is transfers debt service budget in the Debt Management Funds.

This Budget Transfer does not add any additional expenditures or spending for debt service in Fiscal Year 2017. It only moves existing budget for accounting purposes.

APPROPRIATION: Total Amount Appropriated

\$7,990,202.56 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:
	То:	Amount:
Name of State Funding Source(s):	From:	Amount:
	То:	Amount:
Name of City of Jacksonville Funding Source(s):	From: Debt Service	Amount: \$7,990,202.56
	To: Debt Service	Amount: \$7,990,202.56
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond Account(s):	From:	Amount:
	То:	Amount:

PLAIN LANGUAGE OF APPROPRIATION / FINANCIAL IMPACT / OTHER:

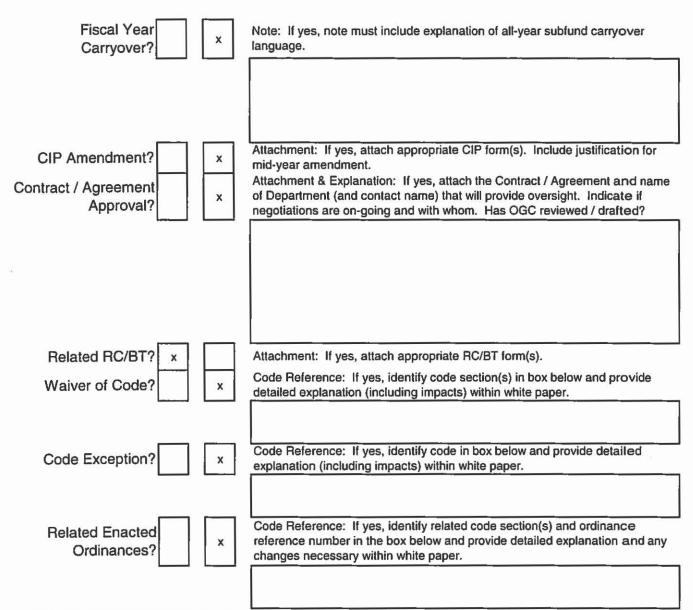
Explain: Where are the funds coming from, going to, how will the funds be used? Does the funding require a match? Is the funding for a specific time frame? Will there be an ongoing maintenance? ... and staffing obligation? Per Chapters 122 & 106 regarding funding of anticipated post-construction operation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

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

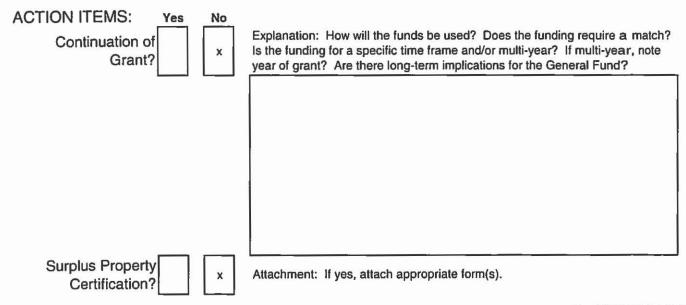
There is no financial impact.

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

ACTION ITEMS: Yes Emergency?	No x	Justification of Emergency: If yes, explanation must include detailed nature of emergency.
Federal or State Mandate?	x	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.



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



Reporting x	Explanation: List agencies (including City Counc and frequency of reports, including when reports Department (include contact name and telephone	are due. Provide
Division Chief: Patrick J. Greive	ptuken (signature)	Date: 7/26/17
Prepared By: Judie Garard	(signature)	Date: 7/24/17

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ADMINISTRATIVE TRANSMITTAL

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

Thru:	Michael Weinstein, CFO, Finance & Admintration			
	(Name, Job Title, Department)			
	Phone:	904-630-4999	E-mail: <u>mweinstein@coj.net</u>	
From:	Patrick J.	Greive, Treasurer, Fir	nance & Administration	
	Initiating Department Representative (Name, Job Title, Department)			
	Phone:	904-630-5940	E-mail: pgreive@coj.net	
Primary Judie Garard, Finance & Administrative Manager, Treasury, Finance & Administration				
Contact:	(Name, Job	Title, Department)		
	Phone:	904-630-5207	E-mail: jgarard@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

То:	Peggy Sidman, Office Phone: 904-630-464		, St. James Suite 480 psidman@coj.net	
From:				
	Initiating Council Member /	ndependent Agency / C	constitutional Officer	
	Phone:	E-mail:		
Primary				
Contact:	(Name, Job Title, Departme	nt)		
	Phone:	E-mail:		
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor			
	904-630-1825 E-ma	I:akshelton@coj	.net	
· · · · · · · · · · · · · · · · · · ·	on from Independent Ag	jencies requires a r	esolution from the Inde	ependent Agency Board

Independent Agency Action Item: Yes

Boards Action / Resolution?

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

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

No