LEGISLATIVE FACT SHEET

DATE:	09/06/17	BT or RC No:
		(Administration & City Council Bills)
SPONSOR:		Mayor's Office
	(0	Department/Division/Agency/Council Member)
Contact for a	all inquiries and presentations	Jessica Laird
Provide Nam	ne:	
Co	ntact Number:	630-1779
Em	nail Address:	<u>JLaird@coj.net</u>
Research will cor		necessary? Provide; Who, What, When, Where, How and the Impact.) Council qislation and the Administration is responsible for all other legislation.
legislation; Ame expiration date voting liaison palso appoints J	ends the new Section 94.103 (Memb for the Commission and clarify that osition. These changes are necessa	er 54 references to Chapter 94 in the title and Section 1 of the pership; Terms; Composition), Ordinance Code, to add a term the Council Member appointment by the Council President is a non-rry to effectuate the purpose of the Tree Commission. The legislation dent, to the Tree Commission, as a forester from the At-Large Group 4 or 31, 2020.

APPROPRIATION: Total A	mount Appropriated	as follows:
List the source <u>name</u> and pro	ovide Object and Subobject Numbers for each	category listed below:
(Name of Fund as it will appear in t	itle of legislation)	
Name of Federal Funding Source(s	From:	Amount:
	To:	Amount:
Name of State Funding Source(s):	From:	Amount:
Training or Grand Farinaming Counces (6).	То:	Amount:
Name of City of Jacksonville	From:	Amount:
Funding Source(s):	То:	Amount:
Name of In-Kind Contribution(s):	From:	Amount:
ivalile of ill-Killu Contribution(s).	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	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.) ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each. **ACTION ITEMS:** No Justification of Emergency: If yes, explanation must include detailed nature of Emergency? emergency.

including Statute or Provision.

Explanation: If yes, explanation must include detailed nature of mandate

Federal or State

Mandate?

Fiscal Year Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
,	
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	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code? x	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.
	2017-397-E; New Chapter 94 (Tree Commission);
ACTION ITEMS CONTINUED: Pu justification, and code provisions for	rpose / Check List. If "Yes" please provide detail by attaching reach.
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?
	year or grant: 7110 thore long term implications for the centeral rand:
Surplus Property Certification?	Attachment: If yes, attach appropriate form(s).

Reporting Requirements?	x	and frequency of reports, inc	(including City Council / Auditor) to receive reports cluding when reports are due. Provide Department elephone number) responsible for generating
_			
Division Chief:			Date:
		(signature)	
Prepared By:			Date:
		(signature)	

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325		
Thru:			
	(Name, Job Title, Department)		
	Phone:	E-mail:	
From:			
	Initiating Department Representative (
	Phone:	E-mail:	
Primary	Jessica Laird		
Contact:	(Name, Job Title, Department)		
	Phone: 630-1779	E-mail: <u>Jlaird@coj.net</u>	
CC:	Allison Korman Shelton, Directo	or of Intergovernmental Affairs, Office of the Mayor	
	904-630-1825 E-mail: aksh	nelton@coj.net_	
COUN	CIL MEMBER / INDEPENDENT	AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL	
To:	Paggy Sidman Office of Goner	ral Counsel, St. James Suite 480	
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		E maiipolaman coojinot	
From:	1.00.00 O UNamban/Indonesida	10 00 100	
	Initiating Council Member / Independe		
	Phone:	E-mail:	
Primary			
Contact:	(Name, Job Title, Department)		
	Phone:	E-mail:	
CC:		or of Intergovernmental Affairs, Office of the Mayor	
-		nelton@coj.net	
•		equires a resolution from the Independent Agency Board	
	g the legislation.	M-	
•	dent Agency Action Item: Yes	<u> </u>	
		I I Attachment: If ves. attach appropriate documentation. If no,	
ľ	Boards Action / Resolution?	Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?	