## **LEGISLATIVE FACT SHEET**

DATE:	09/29/1	7 BT or RC No: N/A		
		(Administration & City Council Bills)		
SPONS	OR:	Office of the Sheriff		
		(Department/Division/Agency/Council Member)		
Contact	for all inquiries and	presentations: William Clement		
Provide	Name:	William Clement		
	Contact Number:	904-630-2217		
	Email Address:	william.clement@jaxsheriff.org		
		this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council ouncil introduced legislation and the Administration is responsible for all other legislation.		
Maximu	m of 1 page			
The Jacksonville Sheriff's Office (JSO) has historically re-employed Police and Corrections Officer retirees in certain capacities (e.g. Court Bailiff, Logistical and Technical Support Officer, etc.). The areas in which these retirees are reemployed require a certain level of expertise that the retirees already possess. Bringing in an employee that has worked for JSO significantly increases our operational effectiveness, since the retiree requires little or no additional training to perform the job function. Additionally, it is much more cost effective to utilize a retiree in this capacity than to bring on additional full-time personnel.  The rules governing the re-employment of these retirees are codified in Section 120 and 121 of the Municipal Code. The JSO has identified two additional areas where it would be beneficial to the City/JSO to utilize retirees instead of adding additional full time personnel. These areas are in the capacity of Chaplain and Stable Manager.				

APPROPRIATION: Total Ar	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 ti	tle of legislation)					
Name of Federal Funding Source	From:		Amount:			
	То:		Amount:			
Name of State Funding Source(s):	From:		Amount:			
Traine or state 1 arising course(s).	То:		Amount:			
Name of City of Jacksonville	From:		Amount:			
Funding Source(s):	То:		Amount:			
Name of In-Kind Contribution(s):	From:		Amount:			
Traine of in-raina contribution(s).	То:		Amount:			
Name & Number of Bond	From:		Amount:			
Account(s):	To:	No. 2	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.)
No additional funding is required for this appropriation. These positions are already included and funded within JSO's
budget. The proposed ordinance changes are required to allow us to fill these positions with retirees.
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and
code provisions for each.
ACTION ITEMS: Yes No
Emergency?   Justification of Emergency: If yes, explanation must include detailed nature of emergency.
emergency.
Federal or State Explanation: If yes, explanation must include detailed nature of mandate
Mandate?   x including Statute or Provision.

Page 3 of 6 Rev. 8/2/2016 (CLB RM)

Fiscal Year Carryover?	x	Note: If yes, note must include explanation of all-year subfund carryover language.
Contract / Agreement	x 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?
	x 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?	х	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted Ordinances?	х	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: justification, and code provision		pose / Check List. If "Yes" please provide detail by attaching each.
ACTION ITEMS: Yes I	No 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?	х	Attachment: If yes, attach appropriate form(s).

Reporting x Requirements?	and frequency of reports, including	g City Council / Auditor) to receive reports when reports are due. Provide Department to number) responsible for generating
Division Chief: West	(signature)	Date: 9/29/17
Prepared By:	(pignatura)	Date: 9/29/17

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Page 5 of 6 Rev. 8/2/2016 (CLB RM)

## **ADMINISTRATIVE TRANSMITTAL**

10:	MBRC, c/o Hoselyn Chall, Budget Office, St. James Suite 325				
cc:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor				
Thru:	William Clement, Chief - Budget & Management Division, Office of the Sheriff				
	(Name, Job Title, Department)				
	Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org				
From:	William Clement, Chief - Budget & Management Division, Office of the Sheriff				
	Initiating Department Representative (Name, Job Title, Department)				
	Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org				
Primary Contact:	William Clement, Chief - Budget & Management Division, Office of the Sheriff				
Comac.	milating Department representative (varie, dos rite, Department)				
	Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org				
CC:	Allison Korman Shelton, Director of Intergovernmental Affairs, Office of the Mayor				
	904-630-1825 E-mail: <u>akshelton@coj.net</u>				
COUN	ICIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL				
0001	TOTE WEMPERT MOET ENDERT AGENOTY CONCINIONAL OFFICER THANSMITTAL				
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480				
	Phone: 904-630-4647 E-mail: psidman@coj.net				
From:					
1 10111.	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				
Legislati	on from Independent Agencies requires a resolution from the Independent Agency Board				
approvin	on from Independent Agencies requires a resolution from the Independent Agency Board ag the legislation.				
approvin	on from Independent Agencies requires a resolution from the Independent Agency Board agency the legislation.  Independent Agency Board agency Action Item:  Yes No				
approvin Indepen	on from Independent Agencies requires a resolution from the Independent Agency Board agency Besolution.  dent Agency Action Item:  Yes  No  Attachment: If yes, attach appropriate documentation. If no,				
approvin Indepen	on from Independent Agencies requires a resolution from the Independent Agency Board agency Items (See No Attachment). If you attach appropriate decomposition (See No Attachment). If you attach appropriate decomposition (See No Attachment).				

## FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED