## **LEGISLATIVE FACT SHEET**

DATE:	02/28/18		BT or RC No:	BT	18-064
			(Administration & City Co.	uncil Bills)	
SPONS	OR: Office of Sp	ports and En			
		(1	Department/Division/Agency/Council Memb	oer)	
Contact	for all inquiries and p	resentations	Joey Bergm	an	
Provide	Name:		Sam E. Mousa, Chief Administrative Office	er	
	Contact Number:		904-630-7211		
	Email Address:		smousa@coj.net		
Research v		uncil introduced le	necessary? Provide; Who, What, When, Where edistation and the Administration is responsible e.)		
Transfer rimprovem marquee i	esidual FY 17 debt service ent projects in the sports	e capacity withi and entertainm lipark allocation	n the Sports Complex Maintenance subfur ent area. It should be noted that 30% of the i, and 70% funded by the stadium allocatio	e sports com	plex digital
APPROPRIATION: Total Amount Appropriated \$1,945,000.00 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 ti	tle of legislation	n)		
Name of F	Federal Funding Source(s)	From:		Amount:	
		То:		Amount:	
Name of	of State Funding Source(s):	From:		Amount:	
		То:		Amount:	
	of City of Jacksonville				
		From: Sports	s Complex Debt Service	Amount:	\$1,945,000.00
		To: Sports	s Complex Capital Maint. Projects	Amount:	\$1,945,000.00
Name of	f In-Kind Contribution(s):	From:		Amount:	
Name of I		То:		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.) Transfer residual FY 17 debt service capacity within the Sports Complex Maintenance subfund to fund various capital improvement projects in the sports and entertainment area. It should be noted that 30% of the sports complex digital marquee is funded by the arena/ballpark allocation, and 70% funded by the stadium allocation. This transfer does not impact FY18 debt service budgets or payments 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? Х emergency. Federal or State Explanation: If yes, explanation must include detailed nature of mandate Mandate? including Statute or Provision.

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 Waiver of Code? 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? 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.
ACTION ITEMS CONTINUED: Pur justification, and code provisions for	pose / Check List. If "Yes" please provide detail by attaching each.
ACTION ITEMS: Yes No Continuation of Grant? 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	Attachment: If was attach appropriate fa/->
Certification?	Attachment: If yes, attach appropriate form(s).

Reporting Requirements?	X and fi	nation: List agencies (includ requency of reports, including de contact name and telepho	g when reports are due. Pr	rovide Department
	<u>.</u>			
				,
Division Chief:			Date:	
Prepared By:	(signa	ature)	Date:	3/07/18
	3			

## **ADMINISTRATIVE TRANSMITTAL**

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325			
Thru:				
	(Name, Job Title, Department)			
	Phone:	E-mail:		
From:	Sam E. Mousa, Chief Administrative Officer			
	Initiating Department Representative (Name, Job Title, Department)			
	Phone: 630-7211	E-mail: smousa@coj.net		
Primary				
Contact:	(Name, Job Title, Department)			
		E-mail:		
CC:	Allison Korman Shelton, Directo	r of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: akshe	elton@coj.net		
	•	<del></del> -		
COUN	CIL MEMBER / INDEPENDENT	AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL		
To:	Peggy Sidman, Office of Genera			
	Phone:	E-mail:		
From:				
	Initiating Council Member / Independen			
	Phone:	E-mail:		
Primary				
Contact	(Name, Job Title, Department)			
	Phone:	E-mail:		
CC:	Allison Korman Shelton, Directo	r of Intergovernmental Affairs, Office of the Mayor		
	904-630-1825 E-mail: aksh	elton@coj.net		
		*		
Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.				
Independent Agency Action Item: Yes No				
12.0	Boards Action / Resolution?	Attachment: If yes, attach appropriate documentation. If no,		
		when is board action scheduled?		