

**LEGISLATIVE FACT SHEET**

BT19-013

DATE: 07/25/18

BT or RC No: BT18-100  
(Administration & City Council Bills)

SPONSOR: Supervisor of Elections  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentations: Robert Phillips, Chief Elections Assistant

Provide Name: Robert Phillips

Contact Number: (904) 630-8018

Email Address: [Phillips@coj.net](mailto:Phillips@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.)

The Security Network Monitoring Service, known as Albert, provides a near real-time automated system that identifies and alerts on traditional and advanced threats on a network, facilitating the rapid identification of threats and attacks. The Albert service provides traditional network security monitoring, along with net flow collection and analysis. All alerts generated are analyzed by analysts in a 24/7 Security Operations Center (SOC). Albert leverages commodity hardware and open source software in order to provide a more affordable, cost-effective network monitoring solution.

APPROPRIATION: Total Amount Appropriated: \$19,774.00 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: Federal Grants Trust Fund / Help America Vote Act (HAVA)	Amount: \$19,774.00
	To: Supervisor of Elections - Grants / HAVA - Albert Monitoring Grant / SEEL1FCERP / SEE008-1802	Amount: \$19,774.00
Name of State Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
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 provided in this grant shall be used to reimburse expenses and/or provide advance payment for the purchase of Albert Sensors network monitoring hardware and software, including installation, and one year of maintenance and monitoring services. No city matching funds are required.

**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"/>		<p>Justification of Emergency: If yes, explanation must include detailed nature of emergency.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>Note: If yes, note must include explanation of all-year subfund carryover language.</p> <div style="border: 1px solid black; padding: 5px;">This is an all-years' subfund.</div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.</p>
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<p>Attachment &amp; 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?</p> <div style="border: 1px solid black; padding: 5px;">Memorandum of Agreement for the Albert Network Monitoring Solution Grant will be overseen by the Supervisor of Elections.</div>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<p>Attachment: If yes, attach appropriate RC/BT form(s).</p>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<p>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.</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>

**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?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**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?

After the first year of monitoring, grant will expire. Annual monitoring service will cost the City \$11,280 beginning fiscal year 2019/20.

Surplus Property Certification?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Attachment:** If yes, attach appropriate form(s).

**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 generating reports.

Division Chief: Mike Logan  
(signature)

Date: 8/16/18

Prepared By: [Signature]  
(signature)

Date: 8/16/18

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Mike Hogan, Supervisor of Elections, Supervisor of Elections  
\_\_\_\_\_  
(Name, Job Title, Department)  
Phone: 904-630-1414 E-mail: [MHogan@coj.net](mailto:MHogan@coj.net)

From: Robert Phillips, Chief Elections Assistant, Supervisor of Elections  
\_\_\_\_\_  
Initiating Department Representative (Name, Job Title, Department)  
Phone: (904) 630-8018 E-mail: [Phillips@coj.net](mailto:Phillips@coj.net)

Primary Contact: Robert Phillips, Chief Elections Assistant, Supervisor of Elections  
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(Name, Job Title, Department)  
Phone: (904) 630-8018 E-mail: [Phillips@coj.net](mailto:Phillips@coj.net)

CC: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 904-630-1825 E-mail: [JElsbury@coj.net](mailto:JElsbury@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](mailto:psidman@coj.net)

From: \_\_\_\_\_  
Initiating Council Member / Independent Agency / Constitutional Officer  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Primary Contact: \_\_\_\_\_  
\_\_\_\_\_  
(Name, Job Title, Department)  
Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

CC: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 904-630-1825 E-mail: [JElsbury@coj.net](mailto:JElsbury@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**