LEGISLATIVE FACT SHEET

DATE: 10/01/	18 BT or RC No: BT \ 9-015
	(Administration & City Council Bills)
SPONSOR:	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
	y this legislation is necessary? Provide; Who, What, When, Where, How and the Impact.) Council council introduced legislation and the Administration is responsible for all other legislation.
Maximum of 1 page	
	h Section 932.7055, Florida Statutes, \$15,000.00 from the Special Law Enforcement Trust tion funding for Operation Homeward Bound, which began in 2013.
individuals who are stranded in Ja Jacksonville. Once here, these in	king in conjunction with the I. M. Sulzbacher Center for the Homeless, provides funds to acksonville to return to their hometown. Often indigent, homeless individuals are sent to adviduals have neither shelter nor prospects of work. Operation Homeward Bound is ticket to return to their hometown.

APPROPRIATION: Total An	nount Appropriated: \$15,000.00 ovide Object and Subobject Numbers for each ca	as follows:
(Name of Fund as it will appear in ti	•	atogory listed below.
Name of Federal Funding Source(s)	From:	Amount:
	То:	Amount:
Name of State Funding Source/all	From:	Amount:
Name of State Funding Source(s):	То:	Amount:
Name of City of Jacksonville Funding Source(s):	From: JSO-Special Law Enforcement Trust Fund	Amount: \$15,000.0
	To: JSO-Special Law Enforcement Trust Fund	Amount: \$15,000.0
Name of In-Kind Contribution(s):	From:	Amount:
	То:	Amount:
Name & Number of Bond	From:	Amount:
Account(s):	То:	Amount:
Explain: Where are the funds comi funding for a specific time frame? \ 106 regarding funding of anticipated (Minimum of 350 words - Maximum of To appropriate, in accordance with Fund in order to provide continuation of the con	1 page.) Section 932.7055, Florida Statutes, \$15,000.00 from the Son funding for Operation Homeward Bound, which began in the second properties of the Florida Statutes, \$15,000.00 from the Son funding for Operation Homeward Bound, which began in the second properties of the Florida Statutes, \$15,000.00 from the Son funding for the Florida Statutes, \$15,000.00 from the Son funding for the Statutes, \$15,000.00 from the Son funding for the Statutes, \$15,000.00 from the Son funding for the Son funding for the Son funding for the Son funding funding for the Son funding for the Son funding for the Son funding for the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for Operation Homeward Bound, which began in the Son funding for the Son funding funding for Operation Homeward Bound, which began in the Son funding funding funding for the Son funding fu	Gation? Per Chapters 122 & Special Law Enforcement Trus 12013. Homeless, provides funds to eless individuals are sent to

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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.
		t e
F- 11 - 0		
Federal or State	x	Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.
Mandate?		including Statute of Flovision.
		[
Fiscal Year	_x	Note: If yes, note must include explanation of all-year subfund carryover
Carryover?		language.
		64A is an all years fund
		ora is an all yours falls
CIP Amendment?	×	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-
	<u> </u>	year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name of
Contract / Agreement	l x l	Department (and contact name) that will provide oversight. Indicate if
Approval?		negotiations are on-going and with whom. Has OGC reviewed / drafted?
Related RC/BT? x		Attachment: If yes, attach appropriate RC/BT form(s).
		Code Reference: If yes, identify code section(s) in box below and provide
Waiver of Code?	×	detailed explanation (including impacts) within white paper.
Code Exception?	x	Code Reference: If yes, identify code in box below and provide detailed
Codo Excopilon.		explanation (including impacts) within white paper.
Related Enacted		Code Reference: If yes, identify related code section(s) and ordinance reference number in the box below and provide detailed explanation and any
Ordinances?	×	changes necessary within white paper.

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

ACTION ITEMS: Continuation of Grant?	Yes No x	Explanation: How will the funds be used? Is the funding for a specific time frame and/year of grant? Are there long-term implications.	or multi-year? If mu	lti-year, note
Surplus Property Certification?	х	Attachment: If yes, attach appropriate form	ı(s).	
Reporting Requirements?	x	Explanation: List agencies (including City of and frequency of reports, including when re- (include contact name and telephone number	ports are due. Prov	ide Department
			•	
Division Chief:	un	(signature)	Date: _	10/1/2018
Prepared By:	Jan	(Signature)	Date:	10/1/2018

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325
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: <u>william.clement@jaxsheriff.org</u>
Primary Contact:	William Clement, Chief - Budget & Management Division, Office of the Sheriff
Jointal.	maining department representative (raine, dear mile, department,
	Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org
CC:	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor
	904-630-1825 E-mail: jelsbury@coj.net
COLIN	ICIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
00011	ICIL WEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480
	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net Initiating Council Member / Independent Agency / Constitutional Officer
То:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647 E-mail: psidman@coj.net
To: From: Primary	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
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To: From: Primary Contact:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
To: From: Primary Contact: CC:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
To: From: Primary Contact: CC:	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
To: From: Primary Contact: CC: Legislatic	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
To: From: Primary Contact: CC: Legislatic approvin	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647
To: From: Primary Contact: CC: Legislatic approvin	Peggy Sidman, Office of General Counsel, St. James Suite 480 Phone: 904-630-4647

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

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