

## LEGISLATIVE FACT SHEET

DATE: 02/05/19

BT or RC No: \_\_\_\_\_  
(Administration & City Council Bills)

SPONSOR: Police's & Firemen's Pension Admin  
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Timothy H. Johnson

Provide Name: \_\_\_\_\_

Contact Number: 255-8963

Email Address: thjohnson@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 proposed operating budget amendment for fiscal year 2019 were approved by the Board of Trustees for the Police and Fire Pension Fund.

The proposed changes will yield a net zero (\$0.00) change to the budget, as funds will be realigned from one expense category to another:

**EXPENDITURES INDEX CODES AMOUNT +/-**

Professional Services As named PFPF621AD-03109 -\$135,000

Personnel-Part-time Salaries PFPF621AD-01306 +\$18,000

Operating -Miscellaneous Charges PFPF621AD-04938 +\$13,000

Building-Repairs & Maintenance PFPF621BLDG-04603 +\$85,000

Parking-Repairs & Maintenance PFPF621PARK-04603 +\$19,000

APPROPRIATION: Total Amount Appropriated \$135,000.00 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 title of legislation)

Name of Federal Funding Source(s)	From: _____	Amount: _____
	To: _____	Amount: _____
Name of State Funding Source(s):	From: _____	Amount: _____
	To: _____	Amount: _____
Name of City of Jacksonville Funding Source(s):	From: PFPF621AD/03109	Amount: \$135,000.00
	To: Various Index Codes & Subobj (See above)	Amount: \$135,000.00
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.)

**Notes:**

- Reduce Professional Services by \$135k for 1st quarter realized savings and reductions in needed professional services.
- Add \$18k to Personnel for part-time hours of 1,500 with a budget amount of \$18k for the front receptionist.
- Add \$13k to Operating for any increased training, travel and miscellaneous services operationally for staff, board and committee members.
- Add \$85k to Building in anticipation of the buildout of the 3rd floor, security software with enhanced equipment and video/card reader upgrades to cover building and parking garage access points.
- Add \$19k to Parking to cover the cost of the elevator repairs as approved in the December board meeting.

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

**ACTION ITEMS:**

Emergency?  Yes  No

Justification of Emergency: If yes, explanation must include detailed nature of emergency.

Federal or State Mandate?  Yes  No

Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision.

Fiscal Year Carryover?

Note: If yes, note must include explanation of all-year subfund carryover language.

CIP Amendment?

Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.

Contract / Agreement Approval?

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?

Attachment: If yes, attach appropriate RC/BT form(s).

Waiver of Code?

Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.

Code Exception?

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

**ACTION ITEMS:**  
Continuation of Grant?  Yes  No

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?


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

Reporting Requirements?

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

Division Chief:   
(signature)

Date: 2/5/2019

Prepared By:   
(signature)

Date: 2/5/2019

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: \_\_\_\_\_

(Name, Job Title, Department)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

From: Timothy H. Johnson

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-8963

E-mail: thjohnson@coj.net

Primary

Contact: \_\_\_\_\_

(Name, Job Title, Department)

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

CC: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor

904-630-1825 E-mail: 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

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

904-630-1825 E-mail: jelsbury@coj.net

Independent Agency Action Item:

Yes

No

Boards Action / Resolution?

Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?

Please see attached.

**FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED**