

LEGISLATIVE FACT SHEET

DATE: 05/01/19

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

SPONSOR: Kids Hope Alliance
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: Mary Tobin

Provide Name: Mary Tobin, Acting CEO, Kids Hope Alliance

Contact Number: (904) 255-4403

Email Address: MTobin@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 Kids Hope Alliance is requesting to submit legislation to make changes to the Youth Travel Trust Fund Ordinance, Sec. 111.850 Part B. This requested legislation has been approved by the Kids Hope Alliance Board of Directors on March 20, 2019. These changes, which are outlined in a redlined version of Sec. 111.850 Part B and attached to this memo for review, will align the Youth Travel Trust Fund with the core values of the Kids Hope Alliance by increasing access to this opportunity and funding for all of Duval County's at-hope youth. This legislation is not appropriating additional dollars. It is simply revising Section 111.850 Part B.

List of Proposed Changes to Sec.111.850 Part B:

- Adding language that will carry over any un-used funds to the next fiscal year. Currently, un-used funds lapse into the Kids Hope Alliance fund balance.
- Changing Sec.111.850 Part B (e)(1) to allow organizations that are unincorporated to be eligabel to apply for funding. Currently, organizations must be a not for porift organization to apply.
- Removing the requirement that organizations must have been in existence for one year.
- Revising Sec.111.850 Part B (f) (1), which allows the Youth Travel Trust Fund to award up to 50% of the total travel expenses. Currently, the fund only awards up to 25% of the total travel expenses.
- Revising Sec.111.850 Part B (f)(5), to allow travel that is in connection with an invitation or travel that is educational and/or gives children unique experiences. Currently, the travel must be in connection with an invitation recognizing and resulting from an outstanding performance or achievement.
- Revising Sec.111.850 Part B (h), to allow the Kids Hope Alliance Board of Directors to advance up to 50% of the grant amount to the awarded applicant. Currently, the Kids Hope Alliance Board of Directors may only advance up to 25% of the

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; height: 60px; width: 100%;"></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 type="checkbox"/>	<input checked="" type="checkbox"/>	<p>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?</p> <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Related RC/BT?	<input type="checkbox"/>	<input checked="" 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:

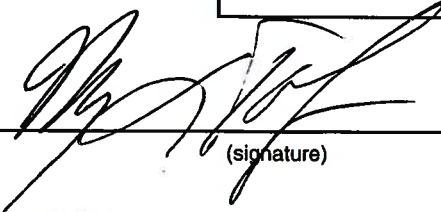
	Yes	No
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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?

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

Division Chief: 
_____ (signature)

Date: 5/1/2019

Prepared By: Adam Miller
_____ (signature)

Date: 5/1/2019

ADMINISTRATIVE TRANSMITTAL

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

Thru: _____

(Name, Job Title, Department)

Phone: _____

E-mail: _____

From: Mary Tobin, Acting CEO, Kids Hope Alliance

Initiating Department Representative (Name, Job Title, Department)

Phone: (904) 255-4403

E-mail: MTobin@coj.net

Primary Contact: Mary Tobin, Acting CEO, Kids Hope Alliance

(Name, Job Title, Department)

Phone: (904) 255-4403

E-mail: MTobin@coj.net

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

Phone: 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, Intergovernmental Affairs Liaison, Office of the Mayor

Phone: 904-630-1825

E-mail: 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?

Board agenda - March 20, 2019

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED