

## LEGISLATIVE FACT SHEET

DATE: 10/29/24

BT or RC No: RC24-197  
BT25-025  
(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: 630-2217

Email Address: William.Clement@jaxsheriff.org

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 Florida Department of Law Enforcement has awarded the City of Jacksonville/Jacksonville Sheriff's Office's (COJ/JSO) \$204,000 for the period July 1, 2024 to June 30, 2025. These funds will be used to hire and train two Fusion Center Analysts and one Critical Infrastructure Specialist to serve as domestic security analysts for the Northeast Fusion Center (NEFFC). Through the application of extensive analytical research and interpretive skills, the positions will provide intelligence on crime trends and threats to Florida with the Critical Infrastructure Specialist analyzing vulnerabilities of, and threats to, Florida's critical infrastructure.

APPROPRIATION: Total Amount Appropriated: \$204,000.00 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: Contributions from State - 334100                                                                                                                                                                                                                    | Amount: \$204,000.00 |
|                                  | Permanent and Probationary Salaries - 512010;<br>Medicare Tax - 521020; GEPP Defined Contribution<br>DC-ER - 522130; Group Dental Plan - 523010;<br>Group Life Insurance - 523030; Group<br>Hospitalization Insurance - 523040; Travel Expense -<br>540020 | Amount: \$204,000.00 |

|                                                 |             |               |
|-------------------------------------------------|-------------|---------------|
| 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.)

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This legislation is necessary to appropriate the grant award from the Florida Department of Law Enforcement with no local match for the grant period of July 1st, 2024 to June 30th, 2025.

**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? ☒ Yes ☐ No

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

Fund 11407 is an all years fund.

CIP Amendment? ☐ Yes ☒ No

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

Contract / Agreement Approval? ☒ Yes ☐ No

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?

Department of Investigations & Homeland Security - Commander Chris King  
OGC has not reviewed the agreement.

Related RC/BT? ☒ Yes ☐ No

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

Waiver of Code? ☐ Yes ☒ No

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

Code Exception? ☐ Yes ☒ No

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

Related Enacted Ordinances? ☐ Yes ☒ No

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:**

|                                 | Yes                      | No                                  |                                                                                                                                                                                                                                                                                                                              |
|---------------------------------|--------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Continuation of Grant?          | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <p>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?</p> <div style="border: 1px solid black; height: 40px; width: 100%;"></div>              |
| Surplus Property Certification? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <p>Attachment: If yes, attach appropriate form(s).</p>                                                                                                                                                                                                                                                                       |
| Reporting Requirements?         | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <p>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.</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div> |

**BUSINESS IMPACT ESTIMATE**

Pursuant to Section 166.041(4), F.S., the City is required to prepare a Business Impact Estimate for ordinances that are NOT exempt from this requirement.

A list of ordinance exemptions are provided below. Please check all exemption boxes that apply to this ordinance. If an exemption is applicable, a Business Impact Estimate IS NOT required.

- ☐ The proposed ordinance is required for compliance with Federal or State law or regulation;
- ☐ The proposed ordinance relates to the issuance or refinancing of debt;
- ☐ The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget;
- ☒ The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government;
- ☐ The proposed ordinance is an emergency ordinance;
- ☐ The ordinance relates to procurement;
- ☐ The proposed ordinance is enacted to implement any of the following:
  - a. Part II of Chapter 163, Florida Statutes, relating to growth policy, county and municipal planning, and land development regulation, including zoning, development orders, development agreements and development permits;
  - b. Sections 190.005 and 190.046, Florida Statutes, regarding community development districts;
  - c. Section 553.73, Florida Statutes, relating to the Florida Building Code;
  - d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention Code.

If none of the boxes above are checked, then a Business Impact Estimate IS REQUIRED to be prepared by the using agency/office/department and submitted in the MBRC filing packet along with the memorandum request, legislative fact sheet, etc. A Business Impact Estimate form can be found at:

<https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee>

Division Chief: ca

Date: 10/29/24

Prepared By: (signature)  
(signature)

Date: 10/29/24

### **ADMINISTRATIVE TRANSMITTAL**

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

Thru: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor  
(Name, Job Title, Department)  
Phone: 255-5000 E-mail: BNorris@coj.net

From: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor  
Initiating Department Representative (Name, Job Title, Department)  
Phone: 255-5000 E-mail: BNorris@coj.net

Primary Contact: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor  
(Name, Job Title, Department)  
Phone: 255-5000 E-mail: BNorris@coj.net

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5000 E-mail: BNorris@coj.net

**COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL**

To: Mary Staffopoulos, Office of General Counsel, St. James Suite 480  
Phone: 904-255-5062 E-mail: mstaff@coj.net

From: Sheriff T. K. Waters  
Initiating Council Member / Independent Agency / Constitutional Officer  
Phone: 904-630-2228 E-mail: latisha.jackson@jaxsheriff.org

Primary Contact: William Clement, Chief of Budget, Office of the Sheriff  
(Name, Job Title, Department)  
Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor  
Phone: 255-5000 E-mail: BNorris@coj.net

Legislation from Independent Agencies requires a resolution from the Independent Agency Board approving the legislation.

Independent Agency Action Item:

Boards Action / Resolution? 

|                          |                          |
|--------------------------|--------------------------|
| Yes                      | No                       |
| <input type="checkbox"/> | <input type="checkbox"/> |

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

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