

City of Jacksonville, Florida
Request for Budget Transfer Form

05
1-23-24

Department or Area Responsible for Contract / Compliance / Oversight: Fire and Rescue Department Council District(s): NA

Reversion of Funds: NA Fund / Center / Account / Project * / Activity / Interfund / Future: NA Fiscal Yr(s) of carry over (all-years funds do not require a carryover): NA

Section of Code Being Waived (if applicable): NA CIP (yes or no): No

Justification for Waiver: NA

Justification for / Description of Transfer:
Appropriate funds from the opioid abatement settlement to procure equipment and supplies to respond to opioid calls for service. During the prior fiscal year (FY23), the Jacksonville Fire and Rescue Department (JFRD) responded to 5,559 "overdose" calls. That figure equated to 3% of our total 911 call volume. Over the past several years, the JFRD has continued to expand services via additional stations and apparatus to satisfy the 911 call demand of our local community. Part of that demand is directly attributable to the increased number of calls we have received for opioid overdose emergencies. Request is made to authorize settlement funds for medical supplies, EMS equipment and two Rescue units to respond to opioid overdose emergency calls for service.

Net Amount Appropriated and/or Transferred: \$1,289,128.00

* This element of the account string is titled project but it houses both projects and grants.

CITY COUNCIL

Requesting Council Member: _____ CM's District: _____

Requesting Council Member: _____ CM's District: _____

Prepared By: _____ Ordinance: _____

OFFICE OF THE MAYOR

Date Rec'd.	Date Fwd.	TRANSFER DIRECTIVE	
		Approved	Disapproved
1/3/24	1/18/24	<i>Keith Powers</i>	
1/24/24	1-23-24	<i>April Mitchell</i>	

TD / BT Number: 6T24-039

Approved: *Donna Deegan* Date Initiated: 11/2/23

Prepared By: Keith Powers Phone Number: 255-3303

APPROVED BY: _____
MAYOR'S BUDGET REVIEW COMMITTEE
DATE: JAN 2 2 2024

Date of Action By Mayor: JAN 2 2 2024

Division Chief: Keith Powers

Prepared By: April Mitchell

Initiated / Requested By (if other than Department): _____

Budget Transfer Line Item Detail

Budget Office approval does not confirm; whether or not a grant requires a new 1Cloud grant number nor the availability or use of prior-year revenue and/or the use of fund balance appropriations in all-years subfunds.

* This element of the account string is titled project but it houses both projects and grants.

Budget Officer Initials

369790 *[Signature]*

TRANSFER FROM: (Revenue line items in this area are being appropriated and expense line items are being de-appropriated.)

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Fund	Center	Accounting Codes				
							Account	Project *	Activity	Interfund	Future
Rev	Opioid Settlement Fund	Opioid Settlement	Miscellaneous Settlements	\$1,289,128.00	15111	191023	369790	000000	00001855	000000	00000000
Rev	Motor Pool - Vehicle Replacement	Fleet Management Vehicle Replacement	Interfund - Internal Service Funds	\$754,520.00	51102	114001	341200	000000	00000499	000000	00000000
Total:				\$1,289,128.00							

TRANSFER TO: (Revenue line items in this area are being de-appropriated and expense line items are being appropriated.)

Rev Exp	Fund Title	Activity / Grant / Project Title	Line Item / Account Title	Amount	Fund	Center	Accounting Codes				
							Account	Project *	Activity	Interfund	Future
Exp	Motor Pool - Vehicle Replacement	Fleet Management Vehicle Replacement	Mobile Equipment	\$754,520.00	51102	114001	564010	000000	0000499	000000	00000000
Exp	Opioid Settlement Fund	Opioid Settlement	Medical Supplies	\$62,008.00	15111	125004	552170	000000	00001855	000000	00000000
Exp	Opioid Settlement Fund	Opioid Settlement	Specialized Equipment	\$472,600.00	15111	125004	564290	000000	00001855	000000	00000000
Exp	Opioid Settlement Fund	Opioid Settlement	ISA - Fleet Vehicle Management	\$754,520.00	15111	125004	549521	000000	00001855	000000	00000000
Total:				\$1,289,128.00							

0000500 *[Signature]*