

LEGISLATIVE FACT SHEET

DATE: 02/11/21

BT or RC No: BT21-051
(Administration & City Council Bills)

SPONSOR: MILITARY AFFAIRS AND VETERANS DEPARTMENT
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation HARRISON CONYERS

Provide Name: HARRISON CONYERS

Contact Number: 904-255-5522

Email Address: HCONYERS@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.)

Requesting authority to authorize funds into an expense account in the amount of \$13,500 to the City of Jacksonville Military Affairs and Veterans Department from the Emergency Food and Shelter Program Phase 38 from January 1, 2020 to October 31, 2021. No fiscal impact on the City of Jacksonville.

APPROPRIATION: Total Amount Appropriated _____ 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: _____	Amount: _____
	To: _____	Amount: _____
Name of Contribution(s)	From: 366020 Contributions from Private Sources	Amount: \$13,500.00
	To: 549006 Trust Fund Authorized Expenditures	Amount: \$13,500.00
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.)

Requesting authority to authorize funds into an expense account in the amount of \$13,500 to the City of Jacksonville Military Affairs and Veterans Department from the Emergency Food and Shelter Program Phase 38 from January 1, 2020 to October 31, 2021. No fiscal impact on the City of Jacksonville.

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"/>		Justification of Emergency: If yes, explanation must include detailed nature of emergency. <input type="text"/>
Federal or State Mandate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. <input type="text"/>
Fiscal Year Carryover?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Note: If yes, note must include explanation of all-year subfund carryover language. <input type="text"/>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment. <input type="text"/>
Contract / Agreement Approval?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		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? <input type="text"/>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>		Attachment: If yes, attach appropriate RC/BT form(s). <input type="text"/>
Waiver of Code?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. <input type="text"/>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper. <input type="text"/>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>		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. <input type="text"/>

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

ACTION ITEMS:

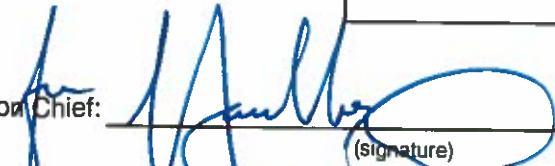
	Yes	No
Continuation of Grant?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Division Chief: 
(signature)

Date: 2/11/2021

Prepared By: 
(signature)

Date: 2/11/2021

ADMINISTRATIVE TRANSMITTAL

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

Thru: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)

Phone: 255-5013 E-mail: jelsbury@coj.net

From: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5013 E-mail: jelsbury@coj.net

Primary Contact: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)

Phone: 255-5013 E-mail: jelsbury@coj.net

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

Phone: 255-5013 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: HARRISON CONYERS
(Name, Job Title, Department)
Phone: 904-255-5522 E-mail: hconyers@coj.net

CC: Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor
Phone: 904-255-5013 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?

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED

Armogan, Mala

From: Conyers, Harrison
Sent: Friday, January 29, 2021 3:13 PM
To: Spann, Bill
Cc: Armogan, Mala; Sims, Timekod; Palmer, Edward; Duncan, Jeffrey; Games, Jon
Subject: FW: EFSP Phase 38 Award Announcement
Attachments: EFSP Phase 38 Budget.xlsx

\$13,500 in new grant funds for Social Services grants/loans!!!!!!

From: RFP Email <RFP@changinghomelessness.org>
Sent: Friday, January 29, 2021 3:11 PM
To: Conyers, Harrison <HCONYERS@coj.net>; jefferyD@coj.net; Finkelstein, Larry <LFinkelstein@coj.net>
Cc: Dawn Gilman <dgilman@changinghomelessness.org>; Monique Elton <melton@changinghomelessness.org>; David Augustine <daugustine@changinghomelessness.org>; Rick Robbins <rrobbins@changinghomelessness.org>; Tawana Chance <tchance@changinghomelessness.org>
Subject: EFSP Phase 38 Award Announcement

EXTERNAL EMAIL: This email originated from a non-COJ email address. Do not click any links or open any attachments unless you trust the sender and know the content is safe.

Thank you for your recent application for the Emergency Food and Shelter Program. The EFSP Phase 38 Application Review Committee has reviewed and scored all applications. We are pleased to inform you that your agency has been awarded **\$13,500**.

The spending period is January 1, 2020 to October 31, 2021. **Therefore, funds must be expended prior to October 31, 2021.** We will notify your agency to begin spending once we have received confirmation from the National Board.

Prior to administering the funds, please refer to the Phase 35 Manual and Phase 36-38 Key Changes and Clarifications as well as Addendums. These documents were included in the NOFA Announcement and may also be accessed via <https://www.efsp.unitedway.org>.

Please return a copy of your revised budget as soon as possible. (See attached)

All participating LRO's must e-sign a Local Recipient Organization Certification Form and as necessary a Fiscal Agent/Fiscal Conduit Agency Relationship Form. Both the Local Board and LRO must retain copies of the forms for their records. The LRO must submit the LRO certification and Fiscal Conduit Certifications directly to the National Board via DocuSign. **Your agency will receive notification from the Local Board when the certification forms are ready for submission.**

Congratulations! We wish you success and thank you for your efforts on behalf of our community.

Dawn Gilman

Chief Executive Officer

904-354-1100 x304 office

904-361-3346 fax

904-388-7000 cell

www.changinghomelessness.org

Armogan, Mala

From: Gozar, Cristina
Sent: Tuesday, February 9, 2021 2:57 PM
To: Armogan, Mala; Basilio, Bella
Cc: Provenza, Joel; Wilson, Garland
Subject: FW: BT-EFSP PHASE 38 GRANT.xlsx
Attachments: BT-EFSP PHASE 38 GRANT.xlsx; BT20-080 MV.pdf; FW: EFSP Phase 38 Award Announcement; COJ MAVD EFSP Phase 38 Budget.xlsx

We are going to set up Activity 00001743 for Emergency Food and Shelter Program Phase 38.

Thanks,

Cristina Gozar
Manager of Accounting Services-General Administration
City of Jacksonville / Finance Department-Accounting
117 West Duval Street
Jacksonville, FL 32202
904-255-5248

**CITY OF
JACKSONVILLE**

One City. One Jacksonville.

From: Basilio, Bella <BBASILIO@coj.net>
Sent: Tuesday, February 9, 2021 2:44 PM
To: Gozar, Cristina <MGozar@coj.net>
Cc: Armogan, Mala <MARMOGAN@coj.net>
Subject: FW: BT-EFSP PHASE 38 GRANT.xlsx