

**LEGISLATIVE FACT SHEET**

DATE: 09/24/21

BT or RC No: BT22-013  
(Administration & City Council Bills)

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

Contact for all inquiries and presentations: Tim Rogers

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

Contact Number: 904-255-6080

Email Address: [TimRogers@coj.net](mailto:TimRogers@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.)

To transfer \$5,763.60 to the Jacksonville Public Library Board of Library Trust Fund in order to cover the administrative costs associated with transferring the operations of the Jax Kids Book Club program from the Kids Hope Alliance to the Library. The Kids Hope Alliance and the the Public Library have a memorandum of understanding transferring the Jax Kids Books Club to the Library. This transfer is meant to further be in line with the Kids Hope Alliance Chapter 77 to be a funding agency and not administer direct services. Through communications with the Jacksonville Public Library they have shown the capability to recruit business sponsors and manage the manufacture and distribution of the books. They have agreed to provide Jax Kids Book Club services to Jacksonville's 9,000 4-year old children. The Jacksonville Public Library's Story Journeys Literacy Enrichment Summer Program is a literacy enrichment program designed to supplement current summer camp programming.

APPROPRIATION: Total Amount Appropriated \$5,763.60 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: Kids Hope Alliance <i>Trust Fund - Fund Balance</i>	Amount: \$5,763.60
	To: Public Library <i>Trust Fund</i>	Amount: \$5,763.60
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.)

Existing unused program funding from the JaxKids Book Club Trust Fund will be used to transfer \$5,763.60 to the Public Library's Board of Library Trustees Trust Fund to help fund the Story Journey's Summer Learning Program.

**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:**      Yes      No

Continuation of Grant?

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?

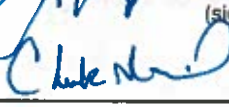
Surplus Property Certification?	<input checked="" type="checkbox"/>
Reporting Requirements?	<input checked="" type="checkbox"/>

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: 9/29/21

Prepared By:   
(signature)

Date: 9/29/21

**ADMINISTRATIVE TRANSMITTAL**

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

Thru: Tim Rogers, Director, Public Library

(Name, Job Title, Department)

Phone: 904-255-6080

E-mail: [TimRogers@coj.net](mailto:TimRogers@coj.net)

From:

Initiating Department Representative (Name, Job Title, Department)

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

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

Primary Contact: Tim Rogers, Director, Public Library

(Name, Job Title, Department)

Phone: 904-255-6080

E-mail: [TimRogers@coj.net](mailto:TimRogers@coj.net)

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

904-630-1825 E-mail: [jelsbury@coj.net](mailto: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](mailto: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

904-630-1825 E-mail: [akshelton@coj.net](mailto:akshelton@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**