## **LEGISLATIVE FACT SHEET**

DATE:	10/10/23		BT or RC No: $b 7 4 - 0 20$						
		(Ac	dministration & City Council Bills)						
SPONSO	NP: Kida Hana	Allianco							
SPONSC	Nus Hope	R: Kids Hope Alliance  (Department/Division/Agency/Council Member)							
		(5 5 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,, <b></b> ,,						
Contact t	or all inquiries and p	resentations	Saralyn Grass						
Provide !	Name:	Jes	ssica Pitts						
Contact Number: 2455-4404									
	Email Address: ss	rass@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 appropriate \$350,850.00 for the Jacksonville Upward Mobilty Program (JUMP). For projects located outside the geographical boundaries of an established Community Redevelopment Area, as defined by Section 163.340, Florida Statues, the City shall designate funding equal to 1% of the approved economic development agreement incentives approved during a calendar for inclusion in the next annual budget. This funding may come from the General Fund revenues or other designated funds. The complete first year of funding for this Chapter was calendar year 2022. The combined amount of economic development agreement incentives approved by the City Council during the calendar year 2022 equaled \$350,850.00, the fiscal year 2023/24 appropriation proposed is \$350,850.00. This funding will be used to build the capacity of existing programs and/or create new programs geared towards the training, education, and maintenance of a sustainable local workforce so that when businesses consider our city, there are residents who are ready, willing, and able to step into the employment positions made available by the economic development projects. This will be accomplished through an application of strategies that will accomplish the objectives:  1) Increasing graduation rates for disadvantaged youth and young adults 2) Decreasing the number of disconnected youth and young adults 3) Increasing post-secondary attainment rates 4) Decreasing the prime age employment gap 5) Increasing the number of internships, externships, apprenticeships, and pre-apprenticeship opportunities for youth and young adults (age 16-24) and prime-age adults (age 25-54)									
APPROPRIATION: Total Amount Appropriated \$350,850.00 as follows:									
List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below:									
(Name of F	fund as it will appear in t	tle of legislation)							
Name of Fe	deral Funding Source(s	From:	Amount:						
		То:	Amount:						
Name of S	tate Funding Source(s):	From:	Amount:						
Traine or o	and i dilding codico(s).	То:	Amount:						
N	it. of looks and the Consti	From: Jump Upward Mobility Progra	ram - Contingency Amount: \$350,850.00						

Hame of Oily of Dauksonville Fundi	To:	Jump Upward Mobility Program - Trust Fund Authorized Expenditures	Amount:	\$350,850.00		
Name of In-Kind Contribution(s):	From:		Amount:			
	То:		Amount:	Amount:		
Name & Number of Bond Account(s):	From:		Amount:			
, (oodani(o).	То:		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.)						
Transferring \$350,850.00 in JUMP funding within 10906 from 599100- Contingency to 549006- Trust Fund Authorized Expenditures for fiscal year 23/24.						
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each.						
ACTION ITEMS: Yes No Emergency?						
Federal or State Mandate?	х	Explanation: If yes, explanation must include including Statute or Provision.	detailed nature of	of mandate		
Fiscal Year Carryover?	x	Note: If yes, note must include explanation of language.	f all-year subfund	l carryover		
CIP Amendment?  Contract / Agreement Approval?	x	Attachment: If yes, attach appropriate CIP for mid-year amendment. Attachment & Explanation: If yes, attach the of Department (and contact name) that will prinegotiations are on-going and with whom. Ha	Contract / Agreer	ment and name Indicate if		
Related RC/BT? x Waiver of Code?	х	Attachment: If yes, attach appropriate RC/BT Code Reference: If yes, identify code section detailed explanation (including impacts) within	(s) in box below	and provide		
Code Exception?	x	Code Reference: If yes, identify code in box less explanation (including impacts) within white p		e detailed		

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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.		
	Code Sec. 111.630		

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

ACTION	N ITEMS:	Yes	No				
С	ontinuation of Grant?		x	Is the funding fo	r a specific time f		e funding require a match? year? If multi-year, note he General Fund?
Sur	plus Property Certification?		[x]	Attachment: If y	es, attach approp	oriate form(s).	
R	Reporting equirements?		х	and frequency o	f reports, includin	ig when reports are	Auditor) to receive reports due. Provide Department onsible for generating
Division Chief: Date: 10/13/23  (signature) Date: 10/10/23							
Pre	Prepared By: Date: 10/10/23						
			AD	MINISTRATIV	E TRANSMIT	<u>TAL</u>	
То:	MBRC, c/o th	ne Bud	iget Offi	ice, St. James	Suite 325		
Thru:	Brittany Norris			rgovernmental	Affairs, Office o	of the Mayor	
	Phone:	255-50	000	E-mail:	bnorris@c	coj.net	
From:					Affairs, Office o		
	Phone:	255-50	000	E-mail:	bnorris@c	oj.net	
Primary Contact:	Brittany Norris,			rgovernmental.	Affairs, Office o	f the Mayor	
		255-50		E-mail:	bnorris@c	oj.net	
CC:	Brittany Norris,	Directo	or of Inte	rgovernmental .	Affairs, Office o	f the Mayor	
	Phone:	255-50	00	E-mail:	bnorris@c	oj.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:					
	Initiating Co	ouncil Member / Independe	ent Agency /	Constitutional Officer	
	Phone: _		E-mail:		
Primary					
Contact:	(Name, Job	Title, Department)			
	Phone: _		E-mail:		
CC:	CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor				
*	Phone:	255-5000	E-mail:	bnorris@coj.net	
approving	g the legis		•	resolution from the Independent Agency Board	
18.1		tion / Resolution?		Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?	
				10/16/2023	

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

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