## **LEGISLATIVE FACT SHEET**

DATE:	05/18/20	BT or RC No: BT 20-082			
				& City Council Bills)	
SPONSOR			Finance and Administr	ation	
		(De	partment/Division/Agency/Cour	ncil Member)	
Contact for	all inquiries and p	oresentations	Rand	lall Barnes	
Provide Na	me:		Randall Barnes		
Co	ontact Number: 90	04-255-5351			
Er	nail Address: <u>rb</u>				
Research will co	ite Paper (Explain Why to emplete this form for Cor f 350 words - Maxir	uncil introduced legi	essary? Provide; Who, What, Whe slation and the Administration is re	en, Where, How and the Imsponsible for all other legisl	pact.) Council ation.
			hich formerly served as parking	for the Jacksonville La	nding.
List the sou	ATION: Total Ar rce <u>name</u> and pro	ovide Object ar	ated\$3,861,047.28 nd Subobject Numbers for		ed below:
Name of Feder	al Funding Source(s)	From:		Amount:	
		То:		Amount:	
Name of State	tate Funding Source(s):	From:		Amount:	
		То:		Amount:	
Name of City of Jacksonville Funding		From: Debt Mar	agement Fund	Amount:	\$3,861,047.28
		To: Authorized Capital Funds		Amount:	\$3,861,047.28
Name of In-Ki	nd Contribution(s):	From:		Amount:	
		То:		Amount:	
Name & Num	per of Bond	From:		Amount:	
Account(s):		To:			

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## 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.) ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and code provisions for each. ACTION ITEMS: Yes No Justification of Emergency: If yes, explanation must include detailed nature of Emergency? Х emergency. Federal or State Explanation: If yes, explanation must include detailed nature of mandate Mandate? including Statute or Provision. Fiscal Year Note: If yes, note must include explanation of all-year subfund carryover Carryover? language. all-years funds Attachment: If yes, attach appropriate CIP form(s). Include justification for CIP Amendment? mid-year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name Contract / Agreement of Department (and contact name) that will provide oversight. Indicate if Approval? negotiations are on-going and with whom. Has OGC reviewed / drafted? Litigation through the Office of General Counsel Related RC/BT? Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide Waiver of Code? detailed explanation (including impacts) within white paper. Code Reference: If yes, identify code in box below and provide detailed Code Exception? explanation (including impacts) within white paper. Code Reference: If yes, identify related code section(s) and ordinance Related Enacted reference number in the box below and provide detailed explanation and any

changes necessary within white paper.

Ordinances?

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

ACTION	NITEMS:	Yes 1	lo_				
Ce	ontinuation of Grant?		×	Explanation: How will the funds be used? Does the Is the funding for a specific time frame and/or multi-year of grant? Are there long-term implications for t	year? If mul	ti-year, note	
		*					
	plus Property Certification?		x	Attachment: If yes, attach appropriate form(s).			
			$\dashv$	Explanation: List agencies (including City Council /			
Reporting X Requirements?				and frequency of reports, including when reports are due. Provide Department (include contact name and telephone number) responsible for generating reports.			
Divis	sion Chief:				Date:		
	<del></del>			(signature)			
Pre	pared By:	Teresa Ei	chne		Date:	5/18/2020	
				(signature)			
			<u>A</u> [	DMINISTRATIVE TRANSMITTAL			
To:	MBRC, c/o F	Roselyn C	hall,	Budget Office, St. James Suite 325			
Thru:	Jordan Elsbur			ntergovernmental Affairs, Office of the Mayor			
	Phone:	255-5013	3	E-mail: jelsbury@coj.net			
From: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor							
	Phone:	255-5013		tative (Name, Job Title, Department)  E-mail: jelsbury@coj.net			
n . =	•			A CONTRACTOR OF THE PROPERTY O			
Primary Contact:	<del></del>			ntergovernmental Affairs, Office of the Mayor			
Oomaoi.	(IASING, DOD TIL		,				
	Phone:	255-5013	3	E-mail: <u>jelsbury@coj.net</u>			
CC:		ury, Interg	ove	rnmental Affairs Liaison, Office of the Mayor			
	Phone:	255-5013	3	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:		ember Ron Salem						
	Initiating Council Member / Independent Agency / Constitutional Officer							
	Phone: _	<u> </u>	E-mail:					
Primary								
Contact:	(Name, Job	Title, Department)						
	Phone:		E-mail:					
CC:	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor							
	Phone:	904-630-1825	E-mail:	jelsbury@coj.net				
approvin Independ	g the legis dent Agend		No /	resolution from the Independent Agency Board  Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?				

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

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