LEGISLATIVE FACT SHEET RC25-111 BT or RC No: 87-25-074 04/08/25 DATE: (Administration & City Council Bill SPONSOR: Office of the Sheriff (Department/Division/Agency/Council Member) William Clement Contact for all inquiries and presentations: William Clement Provide Name: Contact Number: 630-2217 Email Address: William.Clement@jaxsheriff.org 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.) The Florida Department of Law Enforcement has approved the City of Jacksonville/Jacksonville Sheriff's Office's (COJ/JSO) application for financial assistance submitted under the FY24-25 State Financial Assistance for Fentanyl Eradication (S.A.F.E.) in Florida Program in the amount of \$175,000.00. These funds will be used to conduct investigations designed to combat illegal fentanyl activity, and will cover expenses for overtime and part time hours related to investigations. as follows: APPROPRIATION: Total Amount Appropriated: \$175,000.00 List the source <u>name</u> and provide Object and Subobject Numbers for each category listed below: (Name of Fund as it will appear in title of legislation) Amount: Name of Federal Funding Source(s): To:

Reimbursement from FDLE - 342152

Part Time (513060)

From:

From:

Overtime (514010), Med. Tax (521020), Salaries

Name of State Funding Source(s):

Name of City of Jacksonville Funding

Name of In-Kind Contribution(s):

Name & Number of Bond Account(s):

Source(s):

\$175,000.00

\$175,000.00

Amount:

Amount:

Amount:

Amount:

Amount:

Amount:

Amount:

Amount:

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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.)

The Florida Department of Law Enforcement has approved the City of Jacksonville/Jacksonville Sheriff's Office's (COJ/JSO) application for financial assistance submitted under the FY24-25 State Financial Assistance for Fentanyl Eradication (S.A.F.E.) in Florida Program in the amount of \$175,000.00. These funds will be used to conduct investigations designed to combat illegal fentanyl activity, and will cover expenses for overtime and part time hours related to investigations.

This legislation is necessary to appropriate the grant award from the Florida Department of Law Enforcement with no local match for the grant period of february 27th, 2025 to June 30th, 2025.

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

| ACTION ITEMS: Yes Emergency? | No X | Justification of Emergency: If yes, explanation must include detailed nature of emergency. |
|-----------------------------------|----------|---|
| Federal or State Mandate? | × | Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. |
| Fiscal Year Carryover? | Х | Note: If yes, note must include explanation of all-year subfund carryover language. |
| | | |
| CIP Amendment? | X | 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? |
| | <u> </u> | |
| Related RC/BT? X | | Attachment: If yes, attach appropriate RC/BT form(s). |
| Waiver of Code? | Х | Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper. |
| | | |
| Code Exception? | Х | 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. |
| | L | |

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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? | | x l | 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? | | \overline{x} | Attachment: If yes, attach appropriate form(s). |
| Reporting Requirements? | | x l | 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 reports. |
| | | | |
| | | BI | JSINESS IMPACT ESTIMATE |
| Pursuant to Section 166. ordinances that are NOT | | | he City is required to prepare a Business Impact Estimate for this requirement. |
| A list of ordinance exemptions or dinance. If an exemption | otions ar on is app | e prov olicabl | rided below. Please check all exemption boxes that apply to this e, a Business Impact Estimate IS NOT required. |
| The propose | d ordina | nce is | required for compliance with Federal or State law or regulation; |
| The propose | d ordina | nce re | elates to the issuance or refinancing of debt; |
| | | | elates to the adoption of budgets or budget amendments, including y to fund the budget; |
| The propose not limited to by the munic | , any Fe | deral, | required to implement a contract or an agreement, including, but State, local, or private grant or other financial assistance accepted ent; |
| The propose | d ordina | ınce is | an emergency ordinance; |
| The ordinand | e relate | s to p | rocurement; |
| | | | enacted to implement <u>any</u> of the following: |
| a. Part II of and land de developmer | velopme | nt regu | orida Statutes, relating to growth policy, county and municipal planning, lation, including zoning, development orders, development agreements and |
| b. Sections | 190.005 | and 19 | 90.046, Florida Statutes, regarding community development districts; Statutes, relating to the Florida Building Code; |
| | | | Statutes, relating to the Florida Fire Prevention Code. |

If none of the boxes above are checked, then a Business Impact Estimate <u>IS REQUIRED</u> to be prepared by the using agency/office/department and submitted in the MBRC filing packet along with the memorandum request, legislative fact sheet, etc. A Business Impact Estimate form can be found at:

https://www.coj.net/departments/finance/budget/mayor-s-budget-review-committee

| Division Chief: _ | Cul |
|-------------------|-------------|
| Prepared By: _ | (signature) |

Date: 4/5/25

Date: 4 8 25

ADMINISTRATIVE TRANSMITTAL

| To: | MBRC, c/d | the Budget Office | ce, St. James S | Suite 325 | | | | | |
|----------|---|--|-----------------|-----------------|--|--|--|--|--|
| Thru: | Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor | | | | | | | | |
| | (Name, Job | Title, Department) | | | | | | | |
| | Phone: _ | 255-5000 | E-mail: | BNorris@coj.net | | | | | |
| From: | Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor | | | | | | | | |
| | Initiating Dep | Initiating Department Representative (Name, Job Title, Department) | | | | | | | |
| | Phone: _ | 255-5000 | E-mail: | BNorris@coj.net | | | | | |
| Primary | Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor | | | | | | | | |
| <u> </u> | (Name, Job | (Name, Job Title, Department) | | | | | | | |
| | Phone: _ | 255-5000 | E-mail: | BNorris@coj.net | | | | | |
| CC: | Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor | | | | | | | | |
| | Phone: | 255-5000 | E-mail: | BNorris@coj.net | | | | | |