

LEGISLATIVE FACT SHEET

BT 24-007

DATE: 08/23/23

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

SPONSOR: Office of the Sheriff
(Department/Division/Agency/Council Member)

Contact for all inquiries and presentation: William Clement

Provide Name: William Clement

Contact Number: 904-630-2217

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.) *137,000.00 AL*

This legislation is necessary to appropriate ~~\$175,000.00~~ in the Special Law Enforcement Trust Fund:

- 1) \$37,000 for two UTV vehicles for patrol units.
- 2) \$30,000 for a Real Time Crime Center Workstation.
- 3) \$12,500 to be transferred to the Teen Driver Special Revenue Fund (Fund 11522), as per Ordinance Code Section 111.365, to fund the Teen Driver Challenge Program.
- 4) \$12,500 to be transferred to the Police Explorers Trust Fund (Fund 11524), as per Ordinance Code Section 111.340, to fund the Jacksonville Sheriff's Office Police Explorer Post.
- 5) \$25,000 to be transferred to First Coast Crimestoppers.
- 6) \$20,000 to be used for the Homeward Bound Program

APPROPRIATION: Total Amount Appropriated \$137,000.00 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	From: JSO-Special Law Enforcement Trust Fund	Amount: \$137,000.00
	To: JSO-Special Law Enforcement Trust Fund	Amount: \$137,000.00

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.)

All funding will come from the Special Law Enforcement Trust Fund:
#137,000.00
 This legislation is necessary to appropriate ~~\$175,000.00~~ in the Special Law Enforcement Trust Fund:
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 2) \$30,000 for a Real Time Crime Center Workstation.
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There are no requirements for a local match or additional staffing obligations

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.
			<div style="border: 1px solid black; height: 30px;"></div>
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.
			<div style="border: 1px solid black; height: 30px;"></div>
Fiscal Year Carryover?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Note: If yes, note must include explanation of all-year subfund carryover language.
			<div style="border: 1px solid black; padding: 5px;">11522 (FAMIS Fund 64A) is an all years fund</div>
CIP Amendment?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	<input checked="" type="checkbox"/>	<input 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?
			<div style="border: 1px solid black; padding: 5px;">Oversight by the JSO Budget Office; using pre-approved form contract.</div>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.
			<div style="border: 1px solid black; padding: 5px;">Section 110.112 to allow for advance of funds as provided in the agreement</div>

Code Exception?

X

Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.

Related Enacted Ordinances?

X

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?	<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"/>	Attachment: If yes, attach appropriate form(s).
Reporting Requirements?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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]* (signature) Date: 8/24/2020

Prepared By: *[Signature]* (signature) Date: 8/24/20

ADMINISTRATIVE TRANSMITTAL

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

Thru: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)
Phone: 255-5006 E-mail: bnorris@coj.net

From: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Initiating Department Representative (Name, Job Title, Department)
Phone: 255-5006 E-mail: bnorris@coj.net

Primary Contact: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
(Name, Job Title, Department)
Phone: 255-5006 E-mail: bnorris@coj.net

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Phone: 255-5006 E-mail: bnorris@coj.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: Sheriff T.K. Waters
Initiating Council Member / Independent Agency / Constitutional Officer
Phone: 904-630-2228 E-mail: latisha.jackson@jaxsheriff.org

Primary Contact: _____
(Name, Job Title, Department)
Phone: _____ E-mail: _____

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor
Phone: 255-5006 E-mail: bnorris@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

