LEGISLATIVE FACT SHEET

DATE:	04/16/25		BT or RC No:				
			(Administration & City Council Bills)				
SPONSOF	t: Office of the	ne Mavor					
	<u> </u>		(Department/Division/Agency/Council Me	mber)			
Contact for	all inquiries and pre	sentations:	Office of the	Mayor			
Provide Na	·	·	Office of the	iviayor			
	Contact Number: 904.497.8123; 904708.2673						
	•••••		j.net; sjoshi@coj.net				
PURPOSE: Who complete this for	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 c	f 350 words - Maximu	m of 1 page.)					
This legislation is to request the approval to file legislation seeking approval form City council to extend the contract between United Way and the City of Jacksonville for three months and to move funding from the Benefits to Salaries line item for the reimbursement of expenditures that will be incurred from March 31, 2025 through June 30, 2025. The extension of the grant contract and approval to move funding from one line to the other will allow United Way of Northeast Florida, Inc. to continue providing 988 crisis counseling service for mental health from April1, 2025 through June 30, 2025. 2)There is \$25,000 remaining on the benefits line in their budget because the percentage calculated at the time the budget was submitted was calculated at a rate higher than it should have been. We are requesting to move the \$25,000 from benefits to salaries. The total balance is \$48,924.71 (\$23,924.71+ \$25,000 = \$48,924.71) Because the amount being adjusted exceeds 10% above the original budget of \$200,000, City Council approval is required.							
List the sou	APPROPRIATION: Total Amount Appropriated: N/A as follows: 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)						
Name of Fod	oral Funding Course(s)	From:		Amount:			
Name of Fed	eral Funding Source(s):	To:		Amount:			
Name of State Funding Source(s):		From:		Amount:			
		То:		Amount:			
Name of City	of Jacksonville Funding S	From:		Amount:			
		To:		Amount:			
Name of In-Ki	nd Contribution(s):	From:		Amount:			
OI HI TM	John badon oj.	То:		Amount:			
None 0 Mill		From:		Amount:			
ivairie & Numi	per of Bond Account(s):	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.)				
ACTION ITEMS: Purpose / Check L provisions for each.	ist. If "Yes" please provide detail by attaching justification, and code			
ACTION ITEMS: Yes No Emergency? X	Justification of Emergency: If yes, explanation must include detailed nature of emergency.			
Federal or State Mandate? X	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? X Contract / Agreement Approval? X	Attachment: If yes, attach appropriate CIP form(s), Include justification for mid-year amendment. 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? X Waiver of Code? X	Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide detailed explanation (including impacts) within white paper.			
Code Exception? X	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.			

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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: Continuation of Grant?	Yes	No X	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?		X	Attachment: If yes, attach appropriate form(s).
Reporting Requirements?		х	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.

BUSINESS IMPACT ESTIMATE

Pursuant to Section 166.041(4), F.S., the City is required to prepare a Business Impact Estimate for ordinances that are <u>NOT</u> exempt from this requirement. A list of ordinance exemptions are provided below. Please check all exemption boxes that apply to this ordinance. If an exemption is applicable, a Business Impact Estimate <u>IS NOT</u> required.

	The proposed ordinance is required for compliance with Federal or
	State law or regulation; The proposed ordinance relates to the issuance or refinancing of debt; The proposed ordinance relates to the adoption of budgets or budget amendments, including revenue sources necessary to fund the budget;
X	The proposed ordinance is required to implement a contract or an agreement, including, but not limited to, any Federal, State, local, or private grant or other financial assistance accepted by the municipal government;
	The proposed ordinance is an emergency ordinance; The ordinance relates to procurement; or The proposed ordinance is enacted to implement the following: a. Part II of Chapter 163, Florida Statutes, relating to growth policy, county and municipal planning, and land development regulation, including zoning, development orders, development agreements and development permits; b. Sections 190.005 and 190.046, Florida Statutes, regarding community

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

c. Section 553.73, Florida Statutes, relating to the Florida Building Code; or d. Section 633.202, Florida Statutes, relating to the Florida Fire Prevention

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Division Chief:

(signature)

Prepared By: (signature)

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)

(Name, Job Title, Department)

255-5000 Phone: E-mail: BNorris@coj.net

From: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor

Initiating Department Representative (Name, Job Title, Department)

Phone: 255-5000 E-mail: BNorris@coj.net

Primary Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor Contact

Phone: 255-5000 BNorris@coj.net E-mail:

CC: Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor

Phone: 255-5000 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:							
	Initiating Cou	ıncil Member / Indeper	ndent Agency	/ Constitutional Officer			
	Phone:		E-mail:				
Primary							
Contact	(Name, Job Title, Department)						
	Phone:		E-mail:				
CC:	Brittany Norris, Director of Intergovernmental Affairs, Office of the Mayor						
	Phone:	255-5000	E-mail:	BNorris@coj.net			
Legislation		endent Agencies r	equires a re	solution from the Independent Agency Board approving			
Independe	ent Agency A	ction Item: Y	es No				
	Boards Action	on / Resolution?		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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