CITY OF JACKSONVILLE, FLORIDA **RC # : RC24-**

	DATE	RECOMMENDED	NOT RECOMMENDED
DIVISION CHIEF:			
DEPARTMENT HEAD:			
HR CHIEF:			
BUDGET OFFICE:			

DEPARTMENT: Finance and Administration TO BE EFFECTIVE: Upon Approval

ACTION	No.	ACTIVITY NO/ DESCRIPTION	TITLE	OCC CODE	PAY GRADE	PAY RANGE
Authorize	1	AFPS011EBO	Administrative Aide	B0005	15.12	33,427.39 - 64,336.18
Authorize	1	AFPS011EBO	Business Compliance Analyst	04085	29.11	51,871.44 - 87,334.92
Delete	1040	AFPS011EBO	Part Time Hours			

FUNDING: Indicate funding for this change:
Funds are available within current appropriations for this change: Yes [x] No [ ] (see description below)
If NO, funds will be provided by:

JUSTIFICATION:

Adding two full time positions based on the needs to the Jacksonville Small and Emerging Business Office.

Reference TD/BT _____ Council approval required? Yes [x] No [ ] Date action required: _____

ACTION TAKEN BY MBRC:

SIGNATURES:

Chief Administrative Officer

MAYOR

AMENDMENTS:

Comments: