## **LEGISLATIVE FACT SHEET**

DATE: 02/09/23	3	BT or RC	No:	BT23-056		
		(Administration & C	City Council Bills)			
SPONSOR:	Council Presi	Council President Freeman at the request of the Mayor				
	(Depar	tment/Division/Agency/Cour	cil Member)			
Contact for all inquiries and p	presentations	Briar	n Hughes			
Provide Name:		Brian Hughes				
Contact Number: (9	904) 255-5012					
Email Address: h	ughesb@coj.net					
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.)						
This legislation authorizes the admit Health and Financial Technology Excity will agree to fund no more than contributed on a prorata basis with paper and/or bond amounts needer anticipated in each of the next two center is of public purpose due to the health and financial technology grades.	ducation Center in the 0 50% of the establishm other University-identifi d to fund the FY '23 yea years (FY '24 and FY '2 he generational impact	City of Jacksonville in alignment costs up to \$50,000,000 and funds. The legislation will ar-one commitment of \$20,00 ar, subject to further council expected from the creation of	ent with the attach over thee years w authorize the nec 00,000 with a furth approval. The est of high-paying jobs	ned term sheet. The with City funds being sessary commerical her \$15,000,000 tablishment of this and developing the		
APPROPRIATION: Total Amount Appropriated: \$20,000,000.00 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 Federal Funding	From:		Amount:			
Source(s):	То:		Amount:			
	From:		Amount:			
Name of State Funding Source(s)	То:		Amount:			
Name of City of Jacksonville	From: Debt Manage	ement Fund	Amount:	\$20,000,000.00		
Funding Source(s):		raduate Education Center	Amount:	\$20,000,000.00		
				,,		
Name of In-Kind Contribution(s):	From:		Amount:			
	То:		Amount:			
Name & Number of Bond Account(s):	From:		Amount:	-		
, 1000 di it(0).	То:		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.)

This legislation authorizes the administration to enter into an agreement with the University of Florida for the establishment of a Health and Financial Technology Graduate Education Center in the City of Jacksonville in alignment with the attached term sheet. The city will agree to fund no more than 50% of the establishment costs up to \$50,000,000 over thee years with City funds being contributed on a prorata basis with other University-identified funds. The legislation will authorize the necessary commerical paper and/or bond amounts needed to fund the FY '23 year-one commitment of \$20,000,000 with a further \$15,000,000 anticipated in each of the next two years (FY '24 and FY '25), subject to further council approval. The establishment of this center is of public purpose due to the generational impact expected from the creation of high-paying jobs and developing the Fintech graduate education pool which will serve to boost Jacksonville's talent pool.

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?	х	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.  This first year appropriation will commence in the middle of the City's fiscal year and may carry into FY '24.
CIP Amendment?  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?  OGC and admin to negotiate disbursement agreement with Univerity of Florida in alignment with term sheet attached.
Related RC/BT? X Waiver of Code?	Х	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?	Х	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
Related Enacted Ordinances?	Х	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	I ITEMS:	Yes	No		
Co	ontinuatio Gra	n of ant?	Х	the funding for a specific time	ds be used? Does the funding require a match? Is frame and/or multi-year? If multi-year, note year of plications for the General Fund?
	plus Prop Certification Repor equiremer	on?ting	X	frequency of reports, including	oropriate form(s). cluding City Council / Auditor) to receive reports and when reports are due. Provide Department ephone number) responsible for generating reports.
Divis	ion Chief:				Date:
	-			(signature)	
Dro	nared By:				Date:
1 10	parca by			(signature)	
To:			<u> </u>	ADMINISTRATIVE TRANS	<u>SMITTAL</u>
Thru:	Rachel Zii	mmer			
	(Name, Joh	b Title, Depa	rtment)		
	Phone:	(904) 255	5-5006	E-mail: <u>rzimmer@</u>	<u>coj.net</u>
From:	Joey Grei	ve			
	Initiating D	epartment R	epresent	ative (Name, Job Title, Departm	nent)
	Phone:	(904) 255	5-5354	E-mail: pgreive@c	<u>oj.net</u>
Primary	Joey Grei	ve			
Contact:	(Name, Joh	b Title, Depa	rtment)		
	Phone:	(904) 255	5-5354	E-mail: pgreive@c	oj.net
CC:					
	Phone:			E-mail:	

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## **COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL**

To:	Peggy Sidman, Office of General Counsel, St. James Suite 480			I, St. James Suite 480		
	Phone:	904-630-4647	E-mail: _	psidman@coj.net		
From:	Council Pr	esident Freeman				
	Initiating Council Member / Independent Agency / Constitutional Officer					
	Phone:		E-mail:			
Primary						
Contact:	(Name, Job	Title, Department)				
	Phone:		E-mail: _			
CC:	Leeann K	Krieg, Chief of Staff				
	Phone: _	904-255-5015	E-mail: _	<u>leeannk@coj.net</u>		
•	on from Ind g the legis		equires a r	esolution from the Independent Agency Board		
Independ	dent Agen	cy Action Item: Yes	No			
E	Boards Ac	tion / 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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