

LEGISLATIVE FACT SHEET

DATE: 07/08/19

BT or RC No: RC 20-005
BT 20-007
(Administration & City Council Bills)

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

Contact for all inquiries and presentations: William Clement

Provide Name: William Clement

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 Sexual Assault Kit Initiative (SAKI) seeks to reduce the number of unsubmitted sexual assault kits held in evidence, support the investigation and prosecution of these kits/cases, provide services to the victims, and examine policies that created the inventory.

In 2018 the State Attorney's Office, Fourth Judicial Circuit of Florida (SAO), was awarded SAKI funds. Under the SAO award, JSO has received a sub-award to fund two full-time cold-case detectives to work exclusively on the SAKI project.

This sub-award will provide salary and benefits for 1 full-time cold case detective in FY20-FY21, cover the expense of traveling to obtain lawfully owned DNA samples, and the purchase of required collection/test kits (tests will be performed by FDLE).

APPROPRIATION: Total Amount Appropriated: \$543,289.35 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: US Dept of Justice	Amount: \$543,289.35
	To: Permanent and probationary salaries, Special pay, Special pay - pensionable, Medicare tax, Police and Fire ER, Police & Fire DB unfunded liability, Group dental plan, Group life insurance, Group hospitalization insurance, Travel expenses, Other operating expenses - 01201, 01501, 0150 , 02102, 02208/02208B, 02301, 02303, 02304, 04002, 05216, 01511	Amount: \$543,289.35
Name of State Funding Source(s):	From:	Amount:
	To:	Amount:
Name of City of Jacksonville Funding Source(s):	From:	Amount:
	To:	Amount:
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.)

To appropriate \$543,289.35 in federal pass-through funds: US Dept. of Justice through the State Attorney's Office, Fourth Judicial Circuit of Florida. There is no local match. The funds will be used for the Sexual Assault Kit Initiative (SAKI), which seeks to reduce the number of unsubmitted sexual assault kits held in evidence, support the investigation and prosecution of these kits/cases, provide services to the victims, and examine policies that created the inventory. The grant period is 10/01/2018 through 09/30/2021. There will be no ongoing maintenance costs or other staffing obligations.

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

ACTION ITEMS:

Emergency? **Yes** **No**

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?

Note: If yes, note must include explanation of all-year subfund carryover language.

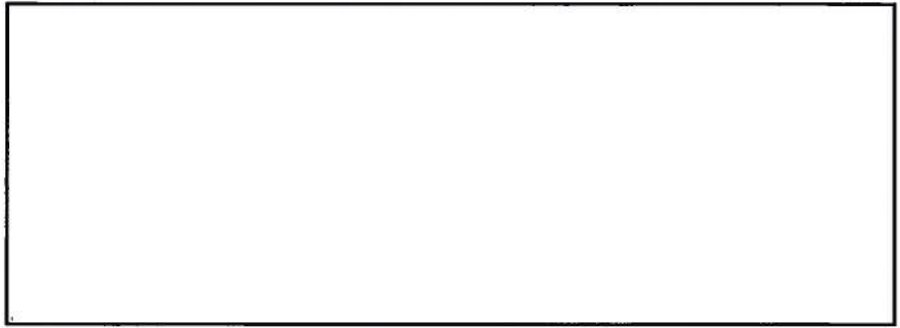
CIP Amendment?

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 JSO Dept. of Investigations and Homeland Security - Sgt. Jake Devevo. Contract negotiations are on-going and will be reviewed by OGC prior to legislative submission..</div>
Related RC/BT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	<input type="checkbox"/>	<input checked="" 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; height: 30px;"></div>
Code Exception?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Code Reference: If yes, identify code in box below and provide detailed explanation (including impacts) within white paper.
			<div style="border: 1px solid black; height: 30px;"></div>
Related Enacted Ordinances?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	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.
			<div style="border: 1px solid black; height: 30px;"></div>


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?
			<div style="border: 1px solid black; height: 150px;"></div>
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 reports.



Division Chief: 
(signature)

Date: 07/08/19

Prepared By: 
(signature)

Date: 07/08/19

ADMINISTRATIVE TRANSMITTAL

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

Thru: _____
(Name, Job Title, Department)

Phone: _____ E-mail: _____

From: William Clement, Chief - Budget & Management Division, Office of the Sheriff

Initiating Department Representative (Name, Job Title, Department)

Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org

Primary William Clement, Chief - Budget & Management Division, Office of the Sheriff

Contact (Name, Job Title, Department)

Phone: 904-630-2217 E-mail: william.clement@jaxsheriff.org

CC: Jordan Elsbury, Intergovernmental Affairs liaison, Office of the Mayor

Phone: 904-630-1825 E-mail: JElsbury@coj.net

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To: Peggy Sidman, Office of General Counsel, St. James Suite 480

Phone: 904-630-4647 E-mail: psidman@coj.net

From: _____
Initiating Council Member / Independent Agency / Constitutional Officer

Phone: _____ E-mail: _____

Primary

Contact (Name, Job Title, Department)

Phone: _____ E-mail: _____

CC: Jordan Elsbury, Intergovernmental Affairs liaison, Office of the Mayor

Phone: 904-630-1825 E-mail: JElsbury@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