LEGISLATIVE FACT SHEET

DATE:	08/20/19)		BT or RO	C No:		
8.			(Adn	ninistration &	City Council Bills)	ē	***************************************
SPONSOR	:		Office of the	ne Sheriff			
		(Depart	ment/Division/Ag	ency/Council	Member)		
Contact for	all inquiries and pr	esentations:	At	William	Clement		
Provide Nar	ne:		William C	Clement	2)		
Con	tact Number:	-	630-2217				
Ema	ail Address:	william.cle	ment@jaxsher	riff.org			
PURPOSE: Whi	ite Paper (Explain Why th	is legislation is necess	ary? Provide; Who,	, What, When, \	Where, How and the	Impact.)	Council
	implete this form for County f 350 words - Maxim		on and the Adminis	tration is respor	nsible for all other le	gislation.	
The Jacksonvi	lle Sheriff's Office (JSG) is requesting auth	norization to repea	al Sections 11	1.397 (Sheriff's R	ed Light	Safety
Revenue Fund	l) and 636 Part 4 (Red h concluded on June 3	Light Violations). Th	nese Ordinance C	ode Sections	deal with the Rec	Light Ca	ımera
program, which	in concluded on dune 5	o, 2010, with the las	at citation being is	sued on Dece	Siliber 31, 2017.		
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	r in title of legislation) From:		Amount:	
Name of Federal Funding Source(s):	To:			
Name of State Funding	From:		Amount:	
Source(s):	To:	12	Amount:	
Name of City of Jacksonville	From:		Amount:	
Funding Source(s):	То:		Amount:	
Name of In-Kind Contribution(s):	From:		Amount:	
value of minima continuition(s).	То:		Amount:	
Name & Number of Bond	From:		Amount:	
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.)

There is no funding associated with this	s legislation. The Red Light Camera program	ended on June 30, 2018.
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code provisions for each. ACTION ITEMS: Yes No Emergency? X	Justification of Emergency: If yes, explar emergency.	nation must include detailed nature of
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Federal or State Mandate?	Explanation: If yes, explanation must inclining Statute or Provision.	ude detailed nature of mandate
	=	
Fiscal Year Carryover?	Note: If yes, note must include explanation language.	on of all-year subfund carryover
	,	
CIP Amendment?	Attachment: If yes, attach appropriate Cly year amendment.	P form(s). Include justification for mid-

Contract / Agreement Approval?	×	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?
5 5 5		8
Related RC/BT?	×	Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	X	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?	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 ustification, and code provision.		urpose / Check List. If "Yes" please provide detail by attaching or each.
ACTION ITEMS: Yes I	No	
Continuation of	х	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?
		To 14 21
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Surplus Property		
Certification?	×	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.

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Division Chief:	(cignoture)	Dat	te: 08/20/19
Prepared By:	(signature)	Dat	te: 08/20/19

ADMINISTRATIVE TRANSMITTAL

10:	MBHC, c/o Hoselyn Chall,	Budget Office, St. James Suite 325			
Thru:					
	(Name, Job Title, Department)				
	Phone:	E-mail:			
From:	William Clement, Chief - Budg	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 Contact	William Clement, Chief - Bud	am Clement, Chief - Budget & Management Division, Office of the Sheriff			
:	(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			
COL	JNCIL MEMBER / INDEPE	IDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL			
То:	Pegav Sidman. Office of G	eneral Counsel, St. James Suite 480			
	Phone: 904-630-4647	E-mail:psidman@coj.net			
From:					
	Initiating Council Member / Indep	endent Agency / Constitutional Officer			
	Phone:	E-mail:			
Primary		7			
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			
Legisla	tion from Independent Agering the legislation.	cies requires a resolution from the Independent Agency Board			
	ndent Agency Action Item:	Yes No			
	Boards Action / Resolution?	Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?			
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FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED