LEGISLATIVE FACT SHEET

DATE: 05/05/20	BT or RC No	BT or RC No: 8 720-081				
	(Administration & City C	Council Bills)				
SPONSOR:	Finance and Administration					
	(Department/Division/Agency/Council Me	mber)				
Contact for all inquiries and p	resentations Patrick "Joey"	Greive				
Provide Name:	Patrick "Joey" Greive					
Contact Number: 90	94-255-5354	_				
Email Address: ps	reive@coj.net					
	his legislation is necessary? Provide; Who, What, When, Whe Incil introduced legislation and the Administration is responsib num of 1 page.)					
Stadium. These projects include va Building systems are described as p and addressing food service area n	to TIAA Bank Field necessary for the 2020 Jaguars sea rious building system replacements as well as security blumbing, electrical, mechanical, addressing drainage is eeds. In addition, this project will allow for exterior wat a facility, landscaping, lighting and interior stairs.	features and enhancements. ssues, generator replacement				
APPROPRIATION: Total Ar List the source <u>name</u> and pro (Name of Fund as it will appear in ti	ovide Object and Subobject Numbers for each	as follows: category listed below:				
Name of Federal Funding Source(s	From:	Amount:				
4	То:	Amount:				
Name of State Funding Source(s):	From:	Amount:				
	То:	Amount:				
Name of City of Jacksonville Fund	From: Debt Management Fund	Amount: \$5,800,000.00				
	To: Authorized Capital Funds	Amount: \$5,800,000.00				
Name of In-Kind Contribution(s):	From:	Amount:				
	То:	Amount:				
Name & Number of Bond Account(s):	From:	Amount:				
	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 List. If "Yes" please provide detail by attaching justification, and code provisions for each. **ACTION ITEMS:** Yes No Justification of Emergency: If yes, explanation must include detailed nature of X Emergency? Federal or State Explanation: If yes, explanation must include detailed nature of mandate including Statute or Provision. Mandate? Fiscal Year Note: If yes, note must include explanation of all-year subfund carryover language. Carryover? all-years funds Attachment: If yes, attach appropriate CIP form(s). Include justification for CIP Amendment? mid-year amendment. Attachment & Explanation: If yes, attach the Contract / Agreement and name Contract / Agreement X of Department (and contact name) that will provide oversight. Indicate if Approval? negotiations are on-going and with whom. Has OGC reviewed / drafted? Related RC/BT? Attachment: If yes, attach appropriate RC/BT form(s). Code Reference: If yes, identify code section(s) in box below and provide Waiver of Code? detailed explanation (including impacts) within white paper. Code Reference: If yes, identify code in box below and provide detailed Code Exception? explanation (including impacts) within white paper. Code Reference: If yes, identify related code section(s) and ordinance Related Enacted reference number in the box below and provide detailed explanation and any Ordinances? 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.

Co Surp	ontinuation of Grant? Colus Property Certification?	No X	Explanation: How will the Is the funding for a specific year of grant? Are there to Attachment: If yes, attach	c time frame and/or multi- ong-term implications for t	year? If mu	lti-year, note	
Re	Reporting equirements?	X	Explanation: List agencies and frequency of reports, include contact name and	including when reports are	e due. Provi	de Department	
Divisi	ion Chief:				Date:		
	· · · · · · · · · · · · · · · · · · ·		(signature)		· -		
Pre	pared By:Teresa		(signature) MINISTRATIVE TRAN	NSMITTAL.	Date:	5/18/2020	
To:	MBRC, c/o Roselyn Chall, Budget Office, St. James Suite 325						
Thru:	Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor (Name, Job Title, Department) Phone: 255-5013 E-mail: <u>jelsbury@coj.net</u>						
From: Jordan Elsbury, Director of Intergovernmental Affairs, Office of the Mayor Initiating Department Representative (Name, Job Title, Department)							
	Phone: 255-5	013	E-mail: jelsbury	@coj.net			
Primary Contact:	Jordan Elsbury, Direc		ergovernmental Affairs,	Office of the Mayor			
	Phone: 255-5	013	E-mail: jelsbury	@coj.net			
CC:	Jordan Elsbury, Int Phone: 255-5		nmental Affairs Liaiso E-mail: <u>jels</u>	n, Office of the Mayor bury@coj.net	r		

COUNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL

To:	Peggy Sidman, Office of General Counsel, St. James Suite 480							
	Phone: 904-6	30-4647	E-mail: _	psidman@coj.net				
From:	Council Member Ron Salem							
	Initiating Council Me	Initiating Council Member / Independent Agency / Constitutional Officer						
	Phone:		E-mail: _					
Primary								
Contact:	(Name, Job Title, De	epartment)						
	Phone:		E-mail: _					
CC:	Jordan Elsbury,	Jordan Elsbury, Intergovernmental Affairs Liaison, Office of the Mayor						
	Phone: 904-6	30-1825	E-mail:	jelsbury@coj.net				
approving Independ	on from Independing the legislation. dent Agency Action Boards Action / R	on Item: Yes	No A	esolution from the Independent Agency Board Attachment: If yes, attach appropriate documentation. If no, when is board action scheduled?				

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED