LEGISLATIVE FACT SHEET

DATE:	08/19/20	BT or RC No:	N/A
		(Administration & City Council Bi	lls)
SPONSOR:	OGC		
		(Department/Division/Agency/Council Member)	
Contact for all inc	quiries and preser	ntations	
Provide Name:		Christopher Garrett, Assistant General Counsel	
Contact	Number:	(904)255-5075	
Email A	ddress:	garrettc@coj.net	
Research will complete (Minimum of 350 of 150 of 15	this form for Council introverds - Maximum of the approval of a sett of Jacksonville v. Jack the court entered a first, LLC ("JLI"). Funding t claim for taxable cost ble costs, however, the pproval) to settle this ount of \$68,366.02 (hestipulation of dismissa	slation is necessary? Provide; Who, What, When, Where, How are roduced legislation and the Administration is responsible for all other of 1 page.) Element agreement regarding the City's potential liability for assonville Landing Investments, LLC, Case No. 2015-CA-63 and judgment for payment of approximately \$3.7 million by g for the satisfaction of that judgment was approved under its (court costs, copying costs, expert costs, etc.) in the american experience without the cost and uncertainty of additional litigatic alf of the demanded costs). The settlement agreement also I of the case with prejudice. Sufficient funding has been to the total costs. Claim and Losses Over \$50,000 account for the purpose.	r taxable costs in the 340, Div. CV-C. On the City to Jacksonville or Ord. 2020-264-E. JLI nount of \$136,732.04. In for payment by the contemplates that cansferred by MBRC via

APPROPRIATION: Total Ar	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 ti	itle of legislation)				
Name of Federal Funding Source(s)	From:	Amount:			
	То:	Amount:			
Name of State Funding Source(s):	From:	Amount:			
Traine of state Fanding Source(s).	То:	Amount:			
Name of City of Jacksonville	From:	Amount:			
Funding Source(s):	То:	Amount:			
Name of In-Kind Contribution(s):	From:	Amount:			
realite of in-relia Continuation(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.)
Funding for payment of the settlement has been tranferred by TD20-350 to General Fund – Judgments, Claim and Losses
Over \$50,000. No additional funds are needed.
ACTION ITEMS: Purpose / Check List. If "Yes" please provide detail by attaching justification, and
code provisions for each.
code provisions for each.
A OTION ITEM 10
ACTION ITEMS: Yes No
Emergency? X Justification of Emergency: If yes, explanation must include detailed nature of
emergency.
Federal or State Explanation: If yes, explanation must include detailed nature of mandate
Mandate? X Explanation: If yes, explanation must include detailed nature of mandate
wandate:

Fiscal Year Carryover?	Note: If yes, note must include explanation of all-year subfund carryover language.
CIP Amendment? x 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? The settlement agreement is attached as Exhibit 2 to the proposed ordinance.
Related RC/BT? x	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?	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: Pujustification, and code provisions for	urpose / Check List. If "Yes" please provide detail by attaching or each.
ACTION ITEMS: Yes No	
Continuation of Grant? x	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?
	year or grants: Are there long-term implications for the deficial rands
Surplus Property Certification?	Attachment: If yes, attach appropriate form(s).

Reporting Requirements?	x	and frequency of reports, inc	(including City Council / Auditor) to receive reports cluding when reports are due. Provide Department elephone number) responsible for generating
_			
Division Chief:			Date:
		(signature)	
Prepared By:			Date:
		(signature)	

ADMINISTRATIVE TRANSMITTAL

To:	MBRC, Budget Office, St. James Suite 325					
Thru:						
	(Name, Job Title, Department)					
	Phone: E-mail:					
From:						
	Initiating Department Representative (Name, Job Title, Department)					
	Phone: E-mail:					
Primary	ry					
Contact:	Ct: (Name, Job Title, Department)					
	Phone: E-mail:					
CC:	Leann Krieg, Director of Intergovernmental Affairs, Office of the M	layor				
	904-255-5015 E-mail: <u>leeannk@coj.net</u>					
COUN	JNCIL MEMBER / INDEPENDENT AGENCY / CONSTITUTIONAL O	FFICER TRANSMITTAL				
_						
To:	Peggy Sidman, Office of General Counsel, St. James Suite 480					
	Phone: (904) 255-5055 E-mail: <u>psidman@coj.net</u>					
From:						
	Initiating Council Member / Independent Agency / Constitutional Officer					
	Phone: E-mail:					
Primary	ry					
Contact:	Ct: (Name, Job Title, Department)					
	Phone: E-mail:					
CC:	Leann Krieg, Director of Intergovernmental Affairs, Office of the M	layor				
	904-255-5015 E-mail: <u>leeannk@coj.net</u>					
Logialati	ation from Indonendant Agancias requires a resolution from the Indon	andent Agency Board				
-	ation from Independent Agencies requires a resolution from the Indepoing the legislation.	Dendent Agency Board				
• •	endent Agency Action Item: Yes No					
-		propriate documentation. If no,				
	when is board action scrieduli	7 4 :				