LEGISLATIVE FACT SHEET

DATE:	08/06/21	BT or RC No:	BT21-112		
		(Administration & City Council E	Bills)		
SPONSOR:	Finance and Administrati	ion			
	(De	epartment/Division/Agency/Council Member)			
Contact for all in	quiries and presentations_	Joey Greive/Stephanie E	3urch		
Provide Name:	Đ.	Joey Greive/Stephanie Burch			
Contac	t Number: (904) 2	55-5354/(904) 255-5034			
Email A	Address: pgreive@co	j.net and stephanieb@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.)					
address the critical nour residents. Since and many people are appointment. More i	need for additional COVID-19 tes the federal and state testing site waiting in long lines in incleme readily available testing opportur	O of the City's first round of American Recovery sting and vaccination opportunities to protect the closed in June, COVID-19 positive cases haven weather for testing, or are having to wait 3-4 nities will help protect the community from sprettra precautions and quarantining.	ne health and safety of ave grown significantly days for an		

mount Appropriated \$4,0	000,000.00 as follows:	
		d below:
tle of legislation)		
From: ARP Act	Amount:	\$4,000,000.00
To: Various uses	Amount:	\$4,000,000.00
From:	Amount:	
То:	Amount:	
From:	Amount:	
То:	Amount:	
From:	Amount:	
То:	Amount:	
From:	Amount:	
То:	Amount:	
ng from, going to, how will the funds be used? Will there be an ongoing maintenance? .cipated post-construction operation costs.	d? Does the funding require a	a match? Is r Chapters
nal testing opportunities to protect the health d in June, COVID-19 positive cases have gr ather for testing, or are having to wait 3-4 d elp protect the community from spreading the	h and safety of our residents. rown significantly and many pol lays for an appointment. More	Since the eople are readily
	povide Object and Subobject Number the of legislation) From: ARP Act To: Various uses From: To: From: To: From: To: ROPRIATION / FINANCIAL IMPAC and from, going to, how will the funds be use will there be an ongoing maintenance? cipated post-construction operation costs. 1 page.) riates \$4,000,000 of the City's first round of the lesting opportunities to protect the health of in June, COVID-19 positive cases have greather for testing, or are having to wait 3-4 departments.	povide Object and Subobject Numbers for each category lister the of legislation) From: ARP Act Amount: To: Various uses Amount: From: Amount: To: Amount: From: Amount: To: Amount: From: Amount:

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

ACTION ITEMS: Yes	No	
Emergency? X		Justification of Emergency: If yes, explanation must include detailed nature of emergency.
		Since the federal and state testing and vaccine sites closed in June, COVID-19 positive cases have grown significantly and may people are waiting in long lines in inclement weather or are having to wait 3-4 days for an appointment. More readily available testing and vaccine opportunities will help protect the community by identifying those individuals who should be taking extra
Federal or State Mandate?	x	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.
		Requesting fiscal year carryover as it is likely the contracts that will be used to utilize these funds will still be necessary past the end of this fiscal year.
CIP Amendment?	х	Attachment: If yes, attach appropriate CIP form(s). Include justification for mid-year amendment.
Contract / Agreement Approval?	х	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?
		2
Related RC/BT? X		Attachment: If yes, attach appropriate RC/BT form(s).
Waiver of Code?	х	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.

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

ACTION ITEMS: Yes	No	Frederick the state of the stat	
Continuation of Grant?	x	Is the funding for a specific time frame year of grant? Are there long-term imp	ed? Does the funding require a match? and/or multi-year? If multi-year, note blications for the General Fund?
Surplus Property Certification? Reporting	×	Attachment: If yes, attach appropriate Explanation: List agencies (including (form(s). City Council / Auditor) to receive reports
Requirements?		(include contact name and telephone n Reporting requirements will be included	en reports are due. Provide Department umber) responsible for generating
		from an entity receiving ARPA funding	as a subrecipient.
Division Chief:		(signature)	Date: 6/9/1
Prepared By:			Date:
		(signature)	

ADMINISTRATIVE TRANSMITTAL

10:	MBRC, c/o Teresa Eichner, Budget Office, St. James Suite 325					
Thru:	Leeann Krieg, Director of Intergovernmental Affairs					
	(Name, Job Title, Department)					
	Phone: (904) 255-5015	E-mail: <u>leeannk@coj.net</u>				
From:	Joey Greive, Director of Finance & Administration/Chief Financial Officer					
	Initiating Department Representative	(Name, Job Title, Department)				
	Phone: (904) 255-5354	E-mail: pgreive@coj.net				
Primary	Joey Greive or Stephanie Burch					
Contact:	(Name, Job Title, Department)					
	Phone: 255-5354/(904) 25	E-mail: pgreive@coj.net or stephanieb@coj.net				
CC:						
	Phone:	E-mail:				
COUN	CIL MEMBER / INDEPENDENT	AGENCY / CONSTITUTIONAL OFFICER TRANSMITTAL				
		ACENOTY CONCINTOTIONAL OFFICER TRANSMITTAL				
То:	Peggy Sidman, Office of Gene	ral Counsel, St. James Suite 480				
	Phone: 904-630-4647	E-mail: psidman@coj.net				
From:		18				
	Initiating Council Member / Independe	ent Agency / Constitutional Officer				
	Phone:	E-mail:				
Primary						
Contact:	(Name, Job Title, Department)					
	Phone:	E-mail:				
CC:	Leeann Krieg, Director of Intergovernmental Affairs					
	Phone: (904) 255-5015	E-mail: leeannk@coi.net				
	(100,1)	- Walling Committee of the Committee of				
Legislatio	on from Independent Agencies r	equires a resolution from the Independent Agency Board				
	g the legislation. dent Agency Action Item: Yes	No				
		No Attachment: If yes, attach appropriate documentation. If no,				
t	Boards Action / Resolution?	when is board action scheduled?				

FACT SHEET IS REQUIRED BEFORE LEGISLATION IS INTRODUCED