

GENERAL

Ordinance Fact Sheet

Ordinance Number

Brief Title

Approval Deadline

Reason

Details

Positions/Recommendations

Reason for Legislation

Sponsor	
Programs, Departments, or Groups Affected	
Applicants / Proponents	<p>Applicant</p> <p>City Department</p> <p>Other</p>
Opponents	<p>Groups or Individuals</p> <p>Basis of opposition</p>
Staff Recommendation	<p><input type="checkbox"/> For</p> <p><input type="checkbox"/> Against</p> <p>Reason Against</p>
Board or Commission Recommendation	<p>By</p> <p><input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No action taken</p> <p><input type="checkbox"/> For, with revisions or conditions (see details column for conditions)</p>
Council Committee Actions	<p><input type="checkbox"/> Do pass</p> <p><input type="checkbox"/> Do pass (as amended)</p> <p><input type="checkbox"/> Committee Sub.</p> <p><input type="checkbox"/> Without Recommendation</p> <p><input type="checkbox"/> Hold</p> <p><input type="checkbox"/> Do not pass</p>

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

(Continued on reverse side)

Details

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Policy/Program Impact

Policy or Program Change	<input type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Finances

Cost & Revenue Projections -- Including Indirect Costs	
Financial Impact	
Fund Source (s) and Appropriation Account Codes	

Applicable Dates:

Reviewed by:

Reference Numbers

CONTRACT

Ordinance Fact Sheet



Brief Title

Approval Deadline

Reason

Details

Reason for Contract

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

Roles and Responsibilities

Sponsor	
Department or Programs Affected	
Recommended Awardee	
Contract Compliance Certification Obtained?	<input type="checkbox"/> No <input type="checkbox"/> Yes
Opponents	Groups or Individuals Reason for Opposition
Responsibilities	Design Engineering: Inspections: Construction or Project Management: Service Monitoring:

Policy/Program Impact

Policy or Program Emphasis Change	<input type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

(Continued on reverse side)

BUDGET ADJUSTMENT

Ordinance Fact Sheet

Ordinance Number

Brief Title	Approval Deadline
Transfer of Correctional Services	

Reason

Details

Reason for Adjustment

Transferring appropriations and responsibility for the Correctional Services Program to Municipal Court from Neighborhood and Community Services.

Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)

One element of the deaprtmental consolidations recommended by the City Manager in the Fiscal Year 2013 Budget and adopted by Council was the transfer of the Correctional Services program to Municipal Court.

The \$4,413,229 Correctional Services budget includes operational costs of \$1,047,968 for ten staff and \$3,365,261 for contracted jail space for detainees and sentenced inmates. The City's agreement with Jackson County for basic jailing services was approved by Ordinance 090306 and provides 150 beds and is the majority of the available housing.

Department, Program, or Accounts Affected

Sponsor

From/Transferor(s) or Fund Title(s)

1000-572210

2760-572210

To/Transferee(s) or Fund Title(s)

1000-272210

2760-272210

Policy / Program Impact

Policy or Program Emphasis Change	<input type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Council Committee Actions

<input type="checkbox"/> Do Pass	<input type="checkbox"/> Hold
<input type="checkbox"/> Do Pass (as amended)	<input type="checkbox"/> w/o Recommendation
<input type="checkbox"/> Committee Sub.	<input type="checkbox"/> Do Not Pass

Fact Sheet prepared by: _____ **Date** _____

Mark Thoma-Perry _____ 4/24/2012

Fact Sheet reviewed by: _____ **Date** _____

Reference Numbers

COMMUNITY PROJECT/ZONING

Ordinance Fact Sheet

Ordinance Number

Brief Title

Approval Deadline

Reason

Details

<p>Specific Address</p>
<p>Reason for Project</p>
<p>Discussion (explain all financial aspects of the proposed legislation, including future implications, any direct/indirect costs, specific account numbers, ordinance references, and budget page numbers.)</p>

Positions/Recommendations

Sponsor	
Area Affected	<p>City-Wide Council District(s)</p> <p>Other districts (school, etc.)</p>
Applicants / Proponents	<p>Applicant</p> <p>City Department</p> <p>Other</p>
Opponents	<p>Groups or Individuals</p> <p>Basis of opposition</p>
Staff Recommendation	<p><input type="checkbox"/> For</p> <p><input type="checkbox"/> Against</p> <p>Reason Against</p>
Board or Commission Recommendation	<p>By</p> <p><input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No action taken</p> <p><input type="checkbox"/> For, with revisions or conditions (see details column for conditions)</p>
Council Committee Actions	<p><input type="checkbox"/> Do pass</p> <p><input type="checkbox"/> Do pass (as amended)</p> <p><input type="checkbox"/> Committee Sub.</p> <p><input type="checkbox"/> Without Recommendation</p> <p><input type="checkbox"/> Hold</p> <p><input type="checkbox"/> Do not pass</p>

(Continued on reverse side)

Details

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Policy/Program Impact

Policy or Program Change	<input type="checkbox"/> No <input type="checkbox"/> Yes
Operational Impact Assessment	

Finances

Cost & Revenue Projections -- Including Indirect Costs	
Financial Impact	
Fund Source (s) and Appropriation Account Codes	

Project Start Date

Projected Completion or Occupancy Date

Fact Sheet Prepared by:

Date:

Reviewed by:

Date:

Reference or Case Numbers