Agenda Item #: 3.M.6.

## PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

## AGENDA ITEM SUMMARY

| Meeting Date:  | September 12, 2006  | [X] Consent  | [ ] Regular<br>[ ] Public Hearing   |
|--|---|--|---|
| Department:  | Parks and Recreation  |  |   |
| Submitted By:  | Parks and Recreation Department   |  |   |
| Submitted For:   | Parks and Recreation Department   |  |   |
|  | I. EXECUTIVE BI   | RIEF   |   |
| Foundation, Inc.   | e: Staff recommends motion to approfor the period September 12, 2006, throufor funding of Leonard Marshall Footler Camps.   | igh December 30, 2006  | , in an amount not-to-  |
| for sponsorship of<br>camps held during<br>underprivileged<br>Agreement expe                   | funding is to assist with expenses incurred Leonard Marshall Football Academy and the summer of 2006. The camps servichildren and youth. The Agreement alternates incurred subsequent to Decemberam (RAP) District 4 (\$3,000) and District.  | nd Mike Jarvis Basketh<br>red 212 participants from<br>lows for the reimburse<br>r 26, 2005. Funding is                        | eall Academy summer<br>on age 8- 18, including<br>ement of eligible pre-<br>from the Recreation |
| which advances<br>provides scholar<br>Jarvis Basketbal<br>Mike Jarvis Bas<br>professional athl | d Justification: The Leonard Marshall F<br>charitable and educational opportuniti<br>ships for underprivileged children to the L<br>I Academy summer camps, and assists t<br>ketball Academy with costs for the car<br>etes to provide football and basketball in<br>were held at West Boca Community Hig | ies for underprivileged<br>eonard Marshall Footba<br>the Leonard Marshall F<br>mps. The summer ca<br>estruction to camp partic | children and youth,<br>all Academy and Mike<br>ootball Academy and<br>amp programs utilize      |
| expenses for ath related to the su that amount. The  | amp program cost approximately \$13,8<br>detes, athlete stipends, camp scholarshi<br>mmer camp program. The RAP funding<br>e Agreement has been executed on beha<br>to be approved by the Board of County   | ip costs, and other mis<br>g from Districts 4 and t<br>alf of the Leonard Mars   | cellaneous expenses will offset \$8,000 of  |
| Attachment:  |   |  |   |
| 1. Agreeme   | nt  |  |   |
|  |   |  |   |
| Recommended  | by: Department Director   | <u> </u>   | //6/06<br>e   |
| Approved by:   | Chal  | 8  | 7/23/06   |
|  | Assistant County Administ   | rator Dat  | <b>e</b>  |

## II. FISCAL IMPACT ANALYSIS

| A. Five Year Summary  | of Fiscal Impa  | ict:                     |                                      |  |                          |
|---|---|--------------------------|--------------------------------------|--|--------------------------|
| Fiscal Years  | 2006  | 2007                     | 2008                                 | 2009   | 2010                     |
| Capital Expenditures Operating Costs External Revenues Program Income (Court In-Kind Match (County) |   | -0-<br>-0-<br>-0-<br>-0- | -0-<br>-0-<br>-0-<br>-0-             | -0-<br>-0-<br>-0-<br>-0-   | -0-<br>-0-<br>-0-<br>-0- |
| NET FISCAL IMPACT   | 8,000   | 0                        | 0                                    | 0  | 0                        |
| # ADDITIONAL FTE<br>POSITIONS (Cumulativ  | re)   |                          |                                      | -  |                          |
| Is Item Included in Cur<br>Budget Account No.:  | rent Budget?<br>Fund <u>3600</u><br>Object <u>820</u>           | <br>Departmen            |                                      | R904 and 905   |                          |
| B. Recommended So   | urces of Funds  | /Summary of              | Fiscal Impact                        |  |                          |
| Recreation Assist   | ance Program  |                          |                                      |  |                          |
|   | 3600-583-R904-<br>3600-583-R905-                                |                          | \$3,000<br><u>\$5,000</u><br>\$8,000 |  |                          |
| C. Departmental Fisc  | al Review:  | ckope                    | lakis                                |  |                          |
|   | <u>III. I</u>   | REVIEW COM               | <u>IMENTS</u>                        | and the second s |                          |
| A. OFMB Fiscal and/o  | r Contract Dev  | elopment and             | d Control Com                        | ments:   |                          |
| B. Legal Sufficiency:  Anne Nelsont Assistant County Atte   | Stress 8/17/06 8/17/06 8/17/06 8/17/06 8/17/06 8/17/06 9/123/06 | 106<br>1706              |                                      | opment and Co  | 1911/0 (1911/0)          |
| C. Other Department   | Review:   |                          |                                      |  |                          |
| Department Director   |   | -                        |                                      |  |                          |

# AGREEMENT BETWEEN PALM BEACH COUNTY AND THE LEONARD MARSHALL FOUNDATION, INC. FOR LEONARD MARSHALL FOOTBALL ACADEMY AND MIKE JARVIS BASKETBALL ACADEMY SUMMER CAMPS

THIS AGREEMENT is made and entered into on \_\_\_\_\_\_, by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as "County" and The Leonard Marshall Foundation, Inc., a Florida not-for-profit corporation authorized to do business in the State of Florida, hereinafter referred to as "Foundation".

## WITNESSETH:

WHEREAS, Foundation is a not-for-profit corporation which advances charitable and educational opportunities for underprivileged children and youth, provides scholarships for underprivileged children to the Leonard Marshall Football Academy and Mike Jarvis Basketball Academy summer camps, and assists the Leonard Marshall Football Academy and Mike Jarvis Basketball Academy with other costs for the summer camps; and

WHEREAS, the Leonard Marshall Football Academy and Mike Jarvis Basketball Academy summer camp programs (summer camp programs) sponsored by Foundation utilize professional athletes to provide football and basketball instruction to summer camp participants; and

WHEREAS, the summer camp programs were held from June 4 through June 19, 2006, at West Boca Community High School; and

WHEREAS, the summer camp programs served two hundred and twelve (212) participants from age eight (8) through eighteen (18), including underprivileged children and youth; and

WHEREAS, said summer camp programs cost approximately \$13,800 for camp clothing items, airline travel expenses for athletes, athlete stipends, camp scholarship costs, and other miscellaneous expenses related to the summer camp program; and

WHEREAS, Foundation has requested that County provide \$8,000 to help offset costs for the summer camp programs; and

WHEREAS, funding for Foundation in an amount not to exceed \$8,000 is available from the Recreation Assistance Program (RAP) District 4 (\$3,000) and District 5 (\$5,000); and

WHEREAS, summer athletic camp programs for youth serve a public benefit; and WHEREAS, both parties desire to enter into this Agreement.

NOW THEREFORE, in consideration of the covenants and promises contained herein,

the parties hereby agree to the following terms and conditions:

- 1. County agrees to fund an amount not to exceed \$8,000 to Foundation for camp clothing items, airline travel expenses for athletes, athlete stipends, camp scholarship costs, and other miscellaneous expenses related to the summer camp program, as set forth in Exhibit "A", attached hereto and incorporated herein, hereinafter referred to as the "Project".
- 2. County will use its best efforts to provide said funds to Foundation on a reimbursement basis within forty-five (45) days of receipt of the following information:
- a. A written statement that the Project, as specified herein, was carried out in accordance with this Agreement; and
- b. A Contract Payment Request Form and a Contractual Services Purchases Schedule Form attached hereto and made a part hereof as Exhibit "B", which are required for each and every reimbursement requested by Foundation. Said information shall list each invoice paid by Foundation and shall include the vendor invoice number; invoice date; and the amount paid by Foundation along with the number and date of the respective check or proof of payment for said payment. Foundation shall attach a copy of each vendor invoice paid by Foundation along with a copy of the respective check or proof of payment and shall make reference thereof to the applicable item listed on the Contractual Services Purchases Schedule. Further, Foundation's Program Administrator and Project Financial Officer shall certify the total funds spent by Foundation on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by Foundation and approved by Foundation as indicated.
- 3. Foundation incurred expenses for the Project beginning on December 26, 2005. Those costs incurred by Foundation for the Project, approved and submitted accordingly by Foundation subsequent to December 26, 2005, are eligible for reimbursement by County pursuant to the terms and conditions hereof.
- 4. RAP funds may be used as a match for other local, state, or federal grant programs, but Foundation may not submit reimbursement requests for the same expenses to the County as other fund sources to receive duplicate reimbursement for the same expenses.
- 5. Foundation warrants that it is an active not-for-profit corporation, duly chartered and registered with the Florida Department of State, Division of Corporations.
- 6. Foundation agrees, warrants, and represents that all of the employees and participants in the Project were treated equally during employment and for the provision of

services without regard to residency, race, color, religion, disability, sex, age, national origin, ancestry, marital status, or sexual orientation.

- 7. Foundation shall be responsible for all costs of operation and maintenance of the Project.
- 8. The term of this Agreement shall be until December 30, 2006, commencing upon the date of execution by the parties hereto.
- 9. The parties agree that, in the event Foundation is in default of its obligations under this Agreement, the County shall provide Foundation thirty (30) days written notice to cure the default. In the event Foundation fails to cure the default within the thirty (30) day cure period, the County shall have no further obligation to honor reimbursement requests submitted by Foundation for the Project deemed to be in default and Foundation shall return any County RAP funds already collected by Foundation for that Project.
- 10. Notwithstanding any provision of this Agreement to the contrary, this Agreement may be terminated by the County, without cause, upon thirty (30) days prior written notice to the other party. This Agreement may be terminated by the County with cause, upon expiration of the thirty (30) day cure period provided for in Section 9 above.
- 11. Foundation shall complete the Project by September 30, 2006, and invoices and checks submitted for reimbursement must be dated within the project time frame of December 26, 2005, and September 30, 2006. Foundation shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before December 30, 2006. Upon written notification to County at least ninety (90) days prior to that date Foundation may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny Foundation's request for said extension.
- 12. In the event Foundation ceases to exist, or ceases or suspends the Project for any reason, any remaining unpaid portion of this Agreement shall be retained by County, and County shall have no further obligation to honor reimbursement requests submitted by Foundation. The determination that Foundation has ceased or suspended the Project shall be made by County and Foundation agrees to be bound by County's determination.
- 13. Foundation agrees to abide by, and be governed by, all applicable federal, state, county, and municipal laws, including but not limited to, Palm Beach County's ordinances, as said laws and ordinances exist and are amended from time to time. In entering into this

Agreement, Palm Beach County does not waive the requirements of any County or local ordinance or the requirements of obtaining any permits or licenses normally required to conduct business or activity conducted by Foundation. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.

14. County reserves the right to withhold reimbursement if the Project is not completed as specified in Exhibit "A".

15. It is understood and agreed that Foundation is merely a recipient of County funding and is an independent contractor and is not an agent, servant or employee of County or its Board of County Commissioners. It is further acknowledged that the County only contributes funding under this Agreement and operates no control over the Project. In the event a claim or lawsuit is brought against County or any of its officers, agents or employees, Foundation shall indemnify, save and hold harmless and defend the County, its officers, agents, and/or employees from and against any and all claims, liabilities, losses, judgments, and/or causes of action of any type arising out of or relating to any act or omission of Foundation, its agents, servants and/or employees in the performance of this Agreement. The foregoing indemnification shall survive termination of this Agreement.

In consideration for reimbursement of costs incurred prior to the term of this Agreement, the foregoing indemnification shall apply not only during the term of this Agreement but also for the period prior to the Agreement for which Foundation is eligible to receive reimbursement from the County.

16. Foundation shall, at its sole expense, agree to maintain in full force and effect at all times during the life of this Agreement, insurance coverages and limits (including endorsements), as described herein. The requirements contained herein, as well as County's review and acceptance of insurance maintained by Foundation are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by Foundation under this Agreement.

Commercial General Liability. Foundation shall maintain Commercial General Liability at a limit of liability not less than \$500,000 Each Occurrence. Coverage shall not contain any endorsement excluding Contractual Liability or Cross Liability unless granted in writing by County's Risk Management Department. Foundation shall provide this coverage on a primary basis.

Worker's Compensation Insurance & Employer's Liability. Foundation shall maintain

Worker's Compensation & Employers Liability in accordance with Florida Statutes Chapter 440. Foundation shall provide this coverage on a primary basis.

Additional Insured. Foundation shall endorse the County as an Additional Insured with a CG 2026 Additional Insured - Designated Person or Organization endorsement, or its equivalent, to the Commercial General Liability. The Additional Insured endorsement shall read "Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees and Agents." Foundation shall provide the Additional Insured endorsements coverage on a primary basis.

Waiver of Subrogation. Foundation hereby waives any and all rights of Subrogation against the County, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then Foundation shall agree to notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy when a condition to the policy specifically prohibits such an endorsement, or voids coverage should Foundation enter into such an agreement on a pre-loss basis.

Certificate(s) of Insurance. Prior to execution of this Agreement by the County, Foundation shall deliver to the County a Certificate(s) of coverage evidencing that all types and amounts of insurance coverages required by this Agreement have been obtained and are in full force and effect. Such Certificate(s) of Insurance shall include a minimum thirty (30) day endeavor to notify due to cancellation or non-renewal of coverage. Certificate holder's address shall read Palm Beach County, c/o Parks and Recreation Department, 2700 Sixth Avenue South, Lake Worth, FL 33461, Attention: Administrative Support Manager.

Right to Review. County, by and through its Risk Management Department, in cooperation with the contracting/monitoring department, reserves the right to review, modify, reject or accept any required policies of insurance, including limits, coverages, or endorsements, herein from time to time throughout the term of this Agreement. County reserves the right, but not the obligation, to review and reject any insurer providing coverage because of its poor financial condition or failure to operate legally.

17. Upon request by County, Foundation shall demonstrate financial accountability

through the submission of acceptable financial audits performed by an independent auditor.

18. Foundation shall maintain books, records, documents and other evidence that sufficiently and properly reflect all costs of any nature expended in the performance of this Agreement for a period of not less than five (5) years. Upon advance notice to Foundation, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

19. The County and Foundation may pursue any and all actions available under law to enforce this Agreement including, but not limited to, actions arising from the breach of any provision set forth herein.

20. This Agreement shall be governed by the laws of the State of Florida and any and all legal action necessary to enforce this Agreement shall be held in Palm Beach County.

21. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, Foundation certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the convicted vendor list maintained by the State of Florida Department of Management Services within the thirty six (36) months immediately preceding the date hereof. This notice is required by Section 287.133 (3) (a), Florida Statutes.

22. This Agreement represents the entire agreement between the parties and supersedes all other negotiations, representations, or agreement, written or oral, relating to this Agreement. This Agreement may be modified and amended only by written instrument executed by the parties hereto.

23. Any notice given pursuant to the terms of this Agreement shall be in writing and hand delivered or sent by U.S. mail. All notices shall be addressed to the following:

As to the County:

Director of Parks and Recreation
Palm Beach County Parks and Recreation Department
2700 Sixth Avenue South
Lake Worth, Florida 33461

As to Foundation:

President 7301-A W. Palmetto Park Road, Suite 305-C Boca Raton, FL 33433

24. This Agreement is made solely and specifically among and for the benefit of the parties hereto, and no other person shall have any rights, interest, or claims hereunder or be

entitled to any benefits under or on account of this Agreement as a third-party beneficiary or otherwise.

**IN WITNESS WHEREOF**, the undersigned parties have signed this Agreement on the date first above written.

| ATTEST:<br>SHARON R. BOCK, Clerk &<br>Comptroller | PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS  |
|---|---|
| By: Deputy Clerk                                  | By:<br>Tony Masilotti, Chairman                                   |
| WITNESSES: Rocheldensonder  ky ig light           | By: DIRECTOR  By: Signature                                       |
| APPROVED AS TO FORM AND LEGAL SUFFICIENCY         | APPROVED AS TO TERMS AND CONDITIONS                               |
| By:<br>County Attorney                            | By : Dennis L. Eshleman, Director Parks and Recreation Department |

## Recreation Assistance Program (RAP) **Exhibit "A" to Agreement**

## **BACKGROUND INFORMATION**

Name and address of Agency:

Agency Name:

The Leonard Marshall Foundation, Inc.

Mailing Address:

7301-A W. Palmetto Park Rd, Suite 305C

Boca Raton, FL 33433

Federal Employer Identification Number:

01-0842589

Name of President:

Name of Executive Director:

**Leonard Marshall** 

Leonard Marshall

Project/Project Liaison Information:

Name:

**Brian McMahon** 

Telephone #:

(954)545-8323

Fax #: e-mail: (954)545-8262 mcmahonlaw@aol.com

Purpose/Mission of Agency: Advancement of charitable and educational purposes for children, particularly for childhood education for underprivileged children by establishing a scholarship for underprivileged children with a 3.0 scholastic achievement as well as being interested in sports.

## PROJECT/PROGRAM INFORMATION

1. Name of Project/Program: The Leonard Marshall Football Academy The Mike Jarvis Basketball Academy

& Summer Camps

### 2. Project/ Program Description:

- General (Project Scope): Provide the very best instruction for players ages 8-18 by focusing focus on the fundamentals of each sport, which will help develop the skills and potential of every player.
- Public Purpose: Provide scholarships to underprivileged children to attend the camp.
- Location: West Boca Community High School
- Anticipated Number of Participants/Users: 212

**EXHIBIT A** Page 1 of 2

| <b>3.</b> , | Project/Program Elements: List anticipated broad categories of            |
|-------------|---|
|             | Expenditure Items such as capital outlay, contractual services, personnel |
|             | costs, operational expenses, equipment, and "Other Miscellaneous          |
|             | Project/Program expenses". Do not include expenditure line item budget/   |
|             | amounts.  |

Participants in the Football Academy are provided with shirts, shorts and shoes. The Basketball Academy provided shirts and shorts. (camp clothing items)

Both camps bring in professional athletes to conduct the camp. The Academy must pay for the <u>travel expenses</u> as well as compensation for their appearance at the Academy. (athlete stipends)

Cost per participant is \$495.00. Underpriviledged participants are charged \$300.00 The Foundation is underwriting the cost to the underpriviledged participants. Cost to Foundation is 46 participants at \$13,800.00. (scholarship costs)

\$13,800

Other Miscellaneous Expenses

month/day/year

4.

Estimated Lump Sum Total for Project/Program

| 5. | Project/Program   |                   |     |         |     |     |          |        |
|----|-------------------|-------------------|-----|---------|-----|-----|----------|--------|
|    | reimbursement w   |                   |     |         |     |     |          |        |
|    | project/program   | will be           | con | npleted | and | all | invoices | paid). |
|    | <u>12/26/05</u> t | o <u>9/30/0</u> 6 | 3   | _       |     |     |          |        |

month/day/year

(Note: Invoices and copies of proof of payment documents will be required for Project/Program reimbursement after the RAP Agreement is approved by the Board of County Commissioners. Do not submit reimbursement documentation until after the Agreement is approved. Please note that all invoices and checks must be dated within the project/program time frame as noted above AND Categories for Project/Program Elements must be listed in Section 3 in order to be eligible for RAP reimbursement.

| 6. | Required Attachments:           |
|----|---------------------------------|
|    | Certificate of Insurance        |
| 7. | Additional Comments if desired: |

Page 2 of \$2



## PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT

## **CONTRACT PAYMENT REQUEST**

|  |                 | Date                                  |   |
|--|-----------------|---------------------------------------|---|
| Grantee  |                 | Project Name:                         |   |
| Submission #:  |                 | Reimbursement Period:                 |   |
|  |                 |                                       |   |
| ltem   | Key             | Project Costs This Submission         | Cumulative Project Costs                                |
| Contractual Services   | (C) _           |                                       |   |
| Salary & Wages (% of salaries)   | (S) _           |                                       |   |
| Materials, Supplies, Direct Purchases  | (M) _           |                                       |   |
| Equipment  | (E) _           | ••                                    |   |
| Travel   | (T) _           |                                       |   |
| Indirect Costs   | (I) <u> </u>    |                                       |   |
| TOTAL PROJECT COS    C = Contractual Services     S = Salary & Wages     M = Materials, Supplies, Direct     E = Equipment     T = Travel     I = Indirect Costs     Certification: I hereby certify that the aboots | ect Purchases . | Cortification: L bereby certification | y that the documentation has                            |
| expenses were incurred for the work iden being accomplished in the attached progreports.   | itified as      | been maintained as require            | d to support the project nd is available for audit upon |
| Administrator Da   | te              | Financial Officer                     | Date  |

|                                   | PBC USE ONLY              |                                       |
|-----------------------------------|---------------------------|---------------------------------------|
| County Funding Participation      | \$                        | · · · · · · · · · · · · · · · · · · · |
| Total Project Costs To Date:      | \$                        | ·                                     |
| County Obligation To Date         | \$                        | · · · · · · · · · · · · · · · · · · · |
| County Retainage ( %)             | \$                        |                                       |
| County Funds Previously Disbursed | \$                        | -                                     |
| County Funds Due this Billing     | \$                        |                                       |
| Reviewed and Approved By:         |                           |                                       |
| •                                 | PBC Project Administrator | Date                                  |
| •<br>                             | Department Director       | Date                                  |



<u>Key Legend</u> **C** = Contractual Services

S = Salary & Wages
M = Materials, Supplies, Direct Purchases

E = Equipment T = Travel

| PALM BEACH COUNTY                             |
|---|
| PARKS AND RECREATION DEPARTMENT               |
| <b>CONTRACTUAL SERVICES PURCHASE SCHEDULE</b> |

**EXHIBIT B** 

|          | I = Indirect Co  | sts         |                  |         |                           | Date          | е .                                       |   |   |
|----------|--|-------------|------------------|---------|---------------------------|---------------|---|---|---|
|          | Grantee:   | -           |                  |         |                           | Proje         | ct Name:                                  |   |   |
|          | Submittal #:   |             |                  | · .     |                           | Conti         | ract Reimburseme                          | ent Period:   |   |
|          |  | ٠.          | Check or V       | oucher  |                           | Invo          | ice                                       |   |   |
| ŧ        | Payee (Vendor/Contractor)  | Key         | Number           | Date    | · <u>-</u>                | Number        | Date                                      | Amount  | Expense Description   |
| _<br>1   |  | <del></del> |                  |         |                           |               |   | -   |   |
| 2        |  |             |                  |         |                           |               |   |   |   |
| _<br>3   |  | -           |                  |         |                           |               |   |   |   |
| 4        |  |             |                  |         |                           |               |   |   |   |
| ·        |  |             |                  |         |                           |               |   |   |   |
| —<br>6   |  |             | -                |         | :                         |               |   |   |   |
| _ ·<br>7 |  |             |                  |         |                           |               |   |   |   |
| _<br>8   |  |             |                  |         | · <u> </u>                |               |   |   |   |
| 9        |  |             |                  |         |                           |               |   |   |   |
| 0        | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \                                    |             |                  |         |                           |               |   |   |   |
| 1        |  |             |                  |         | <u> </u>                  |               |   |   |   |
| 2        |  |             | *                |         |                           |               |   |   |   |
| 3        |  |             |                  |         |                           | · ·           |   |   |   |
| 4        |  |             |                  |         | . <u> </u>                |               |   |   |   |
| 5        |  |             |                  |         |                           |               | -   |   |   |
| 6        |  |             |                  |         |                           |               |   |   |   |
|          |  |             |                  |         |                           |               | TOTAL \$                                  |   |   |
|          | Certification: I hereby certify that the pur accomplishing this project. | chases n    | noted above were | used in | Certifi<br>docun<br>reque | nentation hav | eby certify that bid<br>e been maintained | tabulations, executed conditions as required to support the | ract, cancelled checks, and other purchasing<br>e costs reported above and are available for audit upon |
|          | Administrator  |             | Date             |         |                           | · .           | Financial Officer                         | <u> </u>  | Date  |

## Key Legend

C = Contractual Services

S = Salary & Wages
M = Materials, Supplies, Direct Purchases

E = Equipment

T = Travel

I = Indirect Costs

## PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT **CONTRACTUAL SERVICES PURCHASE SCHEDULE**

**EXHIBIT B** (cont'd.)

|         | <u> </u>                                 | *************************************** | Check or         | ' voucner                             | invoid             | е                  |                      |                                    |                |
|---------|--|---|------------------|---------------------------------------|--------------------|--------------------|----------------------|------------------------------------|----------------|
| #       | Payee (Vendor/Contractor)                | Key                                     | Number           | Date                                  | , Number           | Date               | Amount               | Expen                              | se Description |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  | ·                                       |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       | :                  |                    | •                    |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
| ······  |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  | -                                     |                    |                    |                      |                                    |                |
| -       |  |   |                  |                                       | -                  |                    |                      |                                    |                |
|         |  |   | -                |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         | · · · · · · · · · · · · · · · · · · ·    |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   | <del></del>      |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  | -                                       | ·                |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
| <u></u> |  |   |                  | · · · · · · · · · · · · · · · · · · · | <del></del>        | TOTAL \$           |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         | Certification: I hereby certify that the | nurchaeae r                             | noted above were | a used in                             | Certification: 1 h | nereby certify tha | t bid tabulations ex | ecuted contract, cancelled check   | ks. and other  |
|         | accomplishing this project.              | purchases                               | loted above were | o ugod in                             | purchasing doc     | umentation have    | been maintained a    | s required to support the costs re | eported above  |
|         | assemple and project                     |   |                  |                                       | and are available  | le for audit upon  | request.             |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         |  |   |                  |                                       |                    |                    |                      |                                    |                |
|         | Administrator                            |   | Date             |                                       |                    | Financial Officer  |                      | Date                               |                |
|         |  |   |                  |                                       |                    | •                  |                      |                                    |                |

JUL-20-06 10:19 FROM: THE BEACON GROUP

ID: 5619129173 96-674 AGE 4/4

| ACORD- SERVICE  |                                       |  |   | ali  | 07/19/06  |  |  |  |
|---|---------------------------------------|--|---|--|---|--|--|--|
| PRODUCER FOR S  | ERVICE CALL:                          | THIS CERTI                                 | FICATE IS ISSU<br>CONFERS NO<br>THIS CERTIFICA  | ED AS A MATTER OF<br>RIGHTS UPON THE<br>TE DOES NOT AMENI  | CERTIFICATE<br>D. EXTEND OR                           |  |  |  |
| Francis L Dean & Associates, I<br>800/375/0552  | NC.                                   | ALTER THE                                  | ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.  COMPANIES AFFORDING COVERAGE                              |  |   |  |  |  |
| WWW.ATHLETIC-INSURANCE.COM  |                                       | COMPANY                                    | CAPITOL SPEC  | IALTY INSURANCE CO   | ORPORATION  |  |  |  |
| INSURED SPORTS AND REC. PROVIDER  | S RISK FUNCHASING GROUP               | COMPANY                                    |   |  |   |  |  |  |
| Leonard Marshall Foun<br>P.O. Box 970874<br>Boca Raton, FL 33497  |                                       | COMPANY                                    |   |  |   |  |  |  |
| Book Raion, 1 E 30437   | CERT# 6779                            | COMPANY                                    | <del>*************************************</del>  |  |   |  |  |  |
| THIS IS TO CERTIFY THAT THE POLI<br>PERIOD INDICATED, NOTWITHSTAN<br>WHICH THIS CERTIFICATE MAY BE I<br>THE TERMS, EXCLUSIONS AND CON | DING ANY REQUIREMENT, TERM (          | DIR CONDITION OF                           | ED BY THE POLICIE   | RED NAMED ABOVE FOR THE<br>ROTHER DOCUMENT WITH<br>IS DESCRIBED HEREIN IS S  |   |  |  |  |
| co  | POLICY NUMBER                         | POLICY EFFECTIVE                           | POLICY EXPIRATION<br>DATE (MM/DD/YY)  | Limits   |   |  |  |  |
| TYPE OF INSURANCE  GENERAL LIABILITY  A X COMMERCIAL GENERAL LIABILITY  CLAIMS MADE X OCCUR   |                                       | 06/04/06                                   | 06/19/06  | GENERAL AGCREGATE PRODUCTS-COMP/OP AGG PERSONAL & ADV INURY  | \$ 2,000,000.00<br>\$ 1,000,000.00<br>\$ 1,000,000.00 |  |  |  |
| OWNER'S & CONTRACTOR'S PROT INCLUDES ATHLETIC PARTICIPANTS  | CS218051                              | 05/04/06                                   | 00/19/00  | EACH OCCURRENCE FIRE DAMAGE (Any one fire) MED EXP (Any one person)  | \$ 1,000,000,00<br>\$ 100,000,00<br>\$ 5,000,00       |  |  |  |
| AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS   |                                       |  |   | COMBINED SINGLE LIMIT  BODILY INJURY (Por person)  | \$  |  |  |  |
| HIRED AUTOS NON-OWNED AUTOS   |                                       |  |   | BODILY (NJURY<br>(Per accident)  | \$  |  |  |  |
| GARAGE LIABILITY ANY AUTO   |                                       |  |   | AUTO ONLY-EA ACCIDENT OYHER THAN AUTO ONLY: EACH ACCIDENT AGGREGATE  | \$<br>\$<br>\$  |  |  |  |
| EXCESS LIABILITY  UMBRELLA FORM  OTHER THAN UMBRELLA FORM   |                                       |  |   | EACH OCCURRENCE<br>AGGREGATE   | \$<br>\$<br>\$  |  |  |  |
| WORKER'S COMPENSATION AND<br>EMPLOYERS' LIABILITY   |                                       |  |   | WC STATU-<br>TORY LIMITS OTH-<br>ELL BACH ACCIDENT<br>EL DISEASE - POLICY LIMIT  | S<br>S  |  |  |  |
| PARTNERS EXECUTIVE OFFICERS ARE: EXCL   | · · · · · · · · · · · · · · · · · · · |  |   | EL DISEASE - EA EMPLOYEE   | \$  |  |  |  |
| OTHER   |                                       |  |   |  |   |  |  |  |
| DESCRIPTION OF OPERATIONS/LOCATIONS<br>THE BELOW ENTITY IS ADDED AS ADDI<br>ABOVE NAMED INSURED DURING THE                            | ITIONAL INSURED BUT ONLY V            | VITH RESPECT T                             | O LIABILITY ARIS  | ING OUT OF OPERATIO  | NS OF THE   |  |  |  |
| Palm Beach County Board of Commissione 270 6th Ave. South   |                                       | BEFORI<br>ENDEA<br>HOLDE<br>SHALL<br>COMPA | e the expiration yor to mail 30 in the ramed to the impose no obliging. Its agents of the impose no obliging. | BOVE DESCRIBED POLICIE<br>DATE THEREOF, THE ISSU<br>DAYS WRITTEN NOTICE TO<br>LEFT, BUT FAILURE TO I<br>NATION OR LIABILITY OF A<br>R REPRESENTATIVES. | THE CERTIFICATE                                       |  |  |  |
| Lake Worth, FL 33461  |                                       | AUTHORIZ                                   | ED REPRESENTA   | Franc  | is L. Dean<br>RECEATIONNESS                           |  |  |  |

## BRIAN K. MCMAHON, P.A.

1261 E. Sample Road Suite 215 Pompano Beach, FL 33064 Telephone (954)545-8323 Facsimile (954)545-8262

June 19, 2006

Dennis L. Eshleman, Director Parks and Recreation Department 2700 Sixth Ave. South Lake Worth, FL 33461

RE: Leonard Marshall Football Academy/Mike Jarvis Basketball Academy

RAP Funding for Football Academy Scholarships

Dear Mr. Eshleman:

This letter is to inform the County that neither The Leonard Marshall Football Academy, The Mike Jarvis Basketball Academy nor The Leonard Marshall Foundation have employees and, thus, are not required to carry Worker's Compensation insurance.

Sincerely,

Brian K. McMahon