

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS  
AGENDA ITEM SUMMARY**

Meeting Date June 19, 2007       Consent       Regular  
     Workshop       Public Hearing

Department Submitted By: Clerk & Comptroller, Palm Beach County

Submitted For:                      Sharon R. Bock, Clerk & Comptroller

**I. EXECUTIVE BRIEF**

**A. Motion and Title:**

Staff recommends motion to approve the following final minutes of the Board of County Commissioners' meetings:

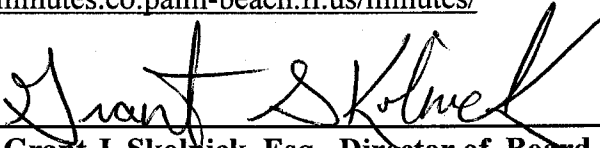
Meeting Type	Meeting Date
Regular	May 1, 2007
Zoning	May 24, 2007


**B. Background and Justification:**

The minutes of the Board of County Commissioners (BCC) meetings had been previously distributed by e-mail to each commissioner's office for review. These minutes are being submitted for approval for inclusion in the official records in the Clerk and Comptroller's office in accordance with Florida Statutes 286.011(2) and the BCC Rules and Procedure R97-2169, Section 10.

**C. Attachments:**

The minutes are available for inspection in the Clerk & Comptroller's Minutes office, 2<sup>nd</sup> Floor, Governmental Center, 301 N. Olive Avenue. Summary minutes can be viewed on the Clerk & Comptroller's website at:  
<http://minutes.co.palm-beach.fl.us/minutes/>

Recommended by:                       6/6/07  
    Grant J. Skolnick, Esq. Director of Board Services                      Date

Approved by:                       \_\_\_\_\_  
    Assistant County Administrator                      Date

II. FISCAL IMPACT ANALYSIS

1. FIVE YEAR SUMMARY OF FISCAL IMPACT: No cash match required

Fiscal years	2004	2005	2006	2007	2008
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	_____	_____	_____	_____	_____
No. additional FTE positions (Cumulative)	_____	_____	_____	_____	_____

Is item included in current Budget? Yes \_\_\_\_\_ No \_\_\_\_\_

Budget Account No.: Fund \_\_\_\_\_ Agency \_\_\_\_\_ Org. \_\_\_\_\_ Object \_\_\_\_\_

Reporting Category \_\_\_\_\_

2. RECOMMENDED SOURCES OF FUNDS/SUMMARY OF FISCAL IMPACT:

3. DEPARTMENTAL FISCAL REVIEW: \_\_\_\_\_

III. REVIEW COMMENTS

1. OFMB FISCAL AND/OR CONTRACT DEV. AND CONTROL COMMENTS:

\_\_\_\_\_  
OFMB Contract Dev. and Control

2. LEGAL SUFFICIENCY: