

PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: August 21, 2007

Consent  
 Ordinance

Regular  
 Public Hearing

Department: Parks and Recreation

Submitted By: Parks and Recreation Department

Submitted For: Parks and Recreation Department

I. EXECUTIVE BRIEF

**Motion and Title:** Staff recommends motion to approve: Agreement with Museum of Lifestyle and Fashion History, Inc. for the period August 21, 2007, through August 31, 2007, in an amount not-to-exceed \$7,500 for 2007 programming and exhibits.

**Summary:** This funding is to help offset operational expenses for 2007 programming and exhibits for the Museum of Lifestyle and Fashion History, Inc. (MLFH)'s Children & Parents Day Winter Wonderland and Swedish Enchantment Gala events. The events were attended by approximately 500 participants. The Agreement allows for the reimbursement of eligible project costs incurred subsequent to May 1, 2006. Funding is from the Recreation Assistance Program (RAP) District 7 Funds. District 7 (AH)

**Background and Justification:** MLFH is a not-for-profit history museum that offers retrospective and anthropology exhibits showcasing lifestyle, history, cultures, people, places, fashion trends, architecture, furnishings, locomotives and toys, and information about popular uses of artifacts by people/events over a period of time. MLFH provided the Children & Parents Day Winter Wonderland on January 14, 2007, and the Swedish Enchantment Gala on April 28, 2007, which were special events for the community.

The total cost of the Events was approximately \$62,000 for arts and craft supplies, entertainment, entertainers, performers, music, sound system/video, printing, graphic design, signage, mailings/postage, catering, valet parking, photography, security, special event coordinator fees, and decorations/room décor. The \$7,500 from RAP - District 7 will offset a portion of these costs. The Agreement has been executed on behalf of ML FH, Inc., and now needs to be approved by the Board of County Commissioners.

Attachment: Agreement

Recommended by:   
Department Director

7-24-07  
Date

Approved by:   
Assistant County Administrator

8-2-07  
Date

**II. FISCAL IMPACT ANALYSIS**

**A. Five Year Summary of Fiscal Impact:**

Fiscal Years	2007	2008	2009	2010	2011
Capital Expenditures	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Operating Costs	<u>7,500</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
External Revenues	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
Program Income (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
In-Kind Match (County)	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
<b>NET FISCAL IMPACT</b>	<b><u>7,500</u></b>	<b><u>-0-</u></b>	<b><u>-0-</u></b>	<b><u>-0-</u></b>	<b><u>-0-</u></b>
<b># ADDITIONAL FTE POSITIONS (Cumulative)</b>	_____	_____	_____	_____	_____

Is Item Included in Current Budget? Yes X No \_\_\_\_\_  
 Budget Account No.: Fund 3600 Department 583 Units R907  
 Object 8201 Program N/A

**B. Recommended Sources of Funds/Summary of Fiscal Impact:**

Recreation Assistance Program

District 7                      3600-583-R907-122-8201                      \$7,500

**C. Departmental Fiscal Review:** ckopelakis

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development and Control Comments:**

\_\_\_\_\_  
OFMB

\_\_\_\_\_  
Contract Development and Control

**B. Legal Sufficiency:**

\_\_\_\_\_  
Assistant County Attorney

**C. Other Department Review:**

\_\_\_\_\_  
Department Director

REVISED 10/95  
ADM FORM 01

G:\SYINGER\RAP06-07\District 7\MLFH\Agenda.doc

**AGREEMENT BETWEEN PALM BEACH COUNTY AND MUSEUM OF LIFESTYLE AND FASHION HISTORY, INC. FOR 2007 PROGRAMS AND EXHIBITS**

**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 Museum of Lifestyle and Fashion History, Inc., a Florida not-for-profit corporation authorized to do business in the State of Florida, hereinafter referred to as "MLFH".

**WITNESSETH:**

**WHEREAS**, MLFH is a history museum that offers retrospective and anthropology exhibits showcasing lifestyle, history, cultures, people, places, fashion trends, architecture, furnishings, locomotives and toys, and information about popular uses of artifacts by people/events over periods of time; and

**WHEREAS**, MLFH provided the Children & Parents Day Winter Wonderland on January 14, 2007 and the Swedish Enchantment Gala on April 28, 2007, which were special events for the community (the Events); and

**WHEREAS**, the Events cost approximately \$62,000 for arts and craft supplies, entertainment, entertainers, performers, music, sound system/video, printing, graphic design, signage, mailings/postage, catering, valet parking, photography, security, special events coordinator fees, and decorations/room decor; and

**WHEREAS**, approximately five hundred (500) people attended the Events; and

**WHEREAS**, MLFH has requested that County provide \$7,500 to help offset costs for the Events and

**WHEREAS**, funding for MLFH for the Events in an amount not-to-exceed \$7,500 is available from The Recreation Assistance Program (RAP) – District 7; and

**WHEREAS**, historical and cultural museums and programs 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 \$7,500 to MLFH for the Events to assist with the cost of arts and craft supplies, entertainment, entertainers, performers,

music, sound system/video, printing, graphic design, signage mailings/postage, catering, valet parking, photography, security, special events coordinator fees, and decorations/room décor, 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 MLFH 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 MLFH. Said information shall list each invoice paid by MLFH and shall include the vendor invoice number; invoice date; and the amount paid by MLFH along with the number and date of the respective check or proof of payment for said payment. MLFH shall attach a copy of each vendor invoice paid by MLFH 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, MLFH's Program Administrator and Project Financial Officer shall certify the total funds spent by MLFH on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by MLFH and approved by MLFH as indicated.

3. MLFH incurred expenses for the Project beginning on May 1, 2006. Those costs incurred by MLFH for the Project, approved and submitted accordingly by MLFH subsequent to May 1, 2006, 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 MLFH 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. MLFH warrants that it is an active not-for-profit corporation, duly chartered and registered with the Florida Department of State, Division of Corporations.

6. MLFH 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. MLFH shall be responsible for the cost of operation and maintenance of the Project, including all associated costs.

8. The term of this Agreement shall be until August 31, 2007, commencing upon the date of execution by the parties hereto.

9. The parties agree that, in the event MLFH is in default of its obligations under this Agreement, the County shall provide MLFH thirty (30) days written notice to cure the default. In the event MLFH 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 MLFH for the Project deemed to be in default and MLFH shall return any County RAP funds already collected by MLFH 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. MLFH shall complete the Project by May 31, 2007, and invoices and checks submitted for reimbursement must be dated within the project time frame of May 1, 2006, through May 31, 2007. MLFH shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before August 31, 2007. Upon written notification to County at least ninety (90) days prior to that date MLFH may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny MLFH's request for said extension.

12. In the event MLFH 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 MLFH. The determination that MLFH has ceased or suspended the Project shall be made by County and MLFH agrees to be bound by County's determination.

13. MLFH 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 MLFH. 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 MLFH 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, MLFH 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 MLFH, 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 this Agreement for which MLFH is eligible to receive reimbursement from the County.

16. MLFH 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 MLFH are not intended to and shall not in any manner limit or qualify the liabilities and obligations assumed by MLFH under this Agreement.

**Commercial General Liability.** MLFH 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. MLFH shall provide this coverage on a primary basis.

**Worker's Compensation Insurance & Employer's Liability.** MLFH shall maintain Worker's Compensation & Employers Liability in accordance with Florida Statutes Chapter 440. MLFH shall provide this coverage on a primary basis.

**Additional Insured.** MLFH 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." MLFH shall provide the Additional Insured endorsements coverage on a primary basis.

**Waiver of Subrogation.** MLFH 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 MLFH 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 MLFH enter into such an agreement on a pre-loss basis.

**Certificate(s) of Insurance.** Prior to execution of this Agreement by the County, MLFH 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, MLFH shall demonstrate financial accountability through the submission of acceptable financial audits performed by an independent auditor.

18. MLFH 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 MLFH, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

19. The County and MLFH 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, MLFH 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 MLFH:

Executive Director  
Museum of Lifestyle and Fashion History, Inc.  
P.O. Box 6127  
MLFH, FL 33482

Delray Beach 154

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.

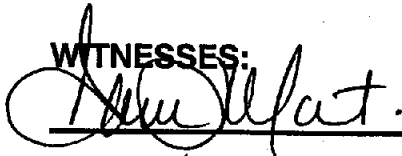
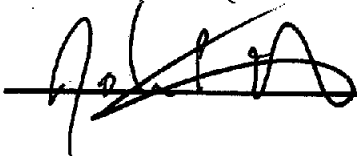
**ATTEST:**  
**SHARON R. BOCK, Clerk & Comptroller**

**PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS**

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
Commissioner Addie L. Greene,  
Chairperson

**WITNESSES:**

  
\_\_\_\_\_  
  
\_\_\_\_\_

**MUSEUM OF LIFESTYLE AND FASHION HISTORY, INC.**  
**FEI Number: 65-0999010**

By: Lori J. Durante  
Name (Type or Print)

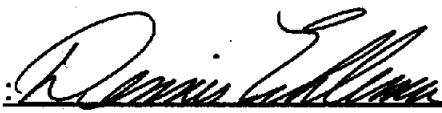
Title: Exec. Dir

By:   
Signature

**APPROVED AS TO FORM AND LEGAL SUFFICIENCY**

By: \_\_\_\_\_  
County Attorney

**APPROVED AS TO TERMS AND CONDITIONS**

By:   
Dennis L. Eshleman, Director  
Parks and Recreation Department

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

Name of Agency: **Museum of Lifestyle and Fashion History, Inc.**  
Mailing Address: P.O. Box 6127  
Delray Beach, FL 33482

Federal Employer Identification Number: 65-0999010

Name of President: (Interim) Charlotte G. Durante

Name of Executive Director: Lori J. Durante

Project Liaison Information:

Name: Lori J. Durante

Telephone #: 561-243-2662

Fax #: 561-243-9916

e-mail: [Durante@MLFHMUSEUM.org](mailto:Durante@MLFHMUSEUM.org)

**PROJECT INFORMATION**

1. Name of Project: **2007 Programming and Exhibits**
2. Project Description
  - General (Project Scope):

The **Swedish Enchantment Gala** is an ode to Swedish culture, history, lifestyle, fashion and interior design and the 2nd annual Gala will be presented by the Museum of Lifestyle & Fashion History on **Saturday, April 28, 2007**. The 2<sup>nd</sup> annual Gala will be held at the historic 1925 Boynton Woman's Club in Boynton Beach, Florida which is a building that is on the National Registry of Historic Places. The Swedish Enchantment Gala will also celebrate the 300<sup>th</sup> anniversary (Tercentenary) for Carl Linnaeus who was a Swedish scientist and botanist. The event will be one of the premier events in South Florida that will include a special museum curated exhibition of Swedish fashions and furniture.

On Sunday, January 14, 2007, the Museum of Lifestyle & Fashion History of Delray Beach hosted its 2<sup>nd</sup> annual **Children & Parents Day Winter Wonderland** at the 1925 Boynton Woman's Club in Boynton Beach, FL. The 1925 Boynton Woman's Club was designed by famed architect **Addison Mizner** and is on the National Registry of Historic Places. Use of the more than 16,000 square feet facility for the 2007 Winter Wonderland event was generously provided to the Museum as a donation by the Woman's club.

- Public Purpose:

The April 28<sup>th</sup> **Swedish Enchantment Gala** will support the educational programs of the Museum of Lifestyle & Fashion History, its Narrated Bus Tours of Historic Delray Beach, the Children's Mathematics Narrated Bus Tour of Historic Delray Beach as well as the Museum's efforts to build a proposed 8,000 square feet building in Delray Beach for small-format exhibits and the Narrated Bus Tours of Historic Delray Beach and also an 18,000 square feet museum facility to be located on the 1.4 acres property site in Boynton Beach that has been acquired by the Museum for the purpose of presenting permanent and traveling exhibits. Included in the building plans for the permanent 18,000 square feet museum facility will be a gallery dedicated to Swedish fashion, interior design and history along with diverse history exhibits about other cultures, societies, fashion, interior design, architecture and popular culture.

The purpose of the **2007 Children & Parents Day** was to provide a fun-filled day of family adventures with arts, crafts, and history education activities for children. The activities included various types of Winter-themed arts & crafts plus puppet show, magic show and story book readings

- Location:

1925 Boynton Woman's Club in Boynton Beach, FL is location for Swedish Enchantment and was also the location for the 2007 Children & Parents Day

- Anticipated Number of Participants/Users:

200 people are expected for the 2007 Swedish Enchantment Gala.  
More than 300 people attended the 2007 Children & Parents Day.

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

**Swedish Enchantment and Children & Parents Day**

Arts & Crafts Supplies  
Entertainment  
Entertainers  
Performers  
Music  
Sound System/Video  
Printing  
Graphic Design  
Signage  
Mailings  
Postage  
Catering  
Valet Parking  
Photography  
Security  
Special Events Coordinator  
Decorations/Room Decor

4. Estimated Lump Sum Total for Projects: \$62,000 Total (\$35,000 for Swedish Enchantment; \$27,000 for Children & Parents Day)
5. Project Initiation date (date of first invoice for which reimbursement will be requested) and anticipated End date (date which project will be completed and all invoices paid). May 1, 2006 to May 31, 2007

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 at this time. After the Agreement is approved, and the reimbursement request is submitted, all invoices and checks must be dated within the stated project time frame AND Categories for Project Elements must be listed in Section 3 above in order to be eligible for RAP reimbursement.

6. Required Attachments:  
Certificate of Insurance           ✓

Amount of Recreation Assistance Program Funding awarded

\$ 7.500

District 7

(Filled in by County)

Form available online by request. Contact Susan Yinger at [svinger@pbcgov.com](mailto:svinger@pbcgov.com)



PALM BEACH COUNTY  
PARKS AND RECREATION DEPARTMENT

EXHIBIT B

CONTRACT PAYMENT REQUEST

\_\_\_\_\_  
Date

Grantee \_\_\_\_\_ Project Name: \_\_\_\_\_

Submission #: \_\_\_\_\_ Reimbursement Period: \_\_\_\_\_

Item	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)	_____	_____
<b>TOTAL PROJECT COSTS</b>		=====	=====

Key Legend

- C = Contractual Services
- S = Salary & Wages
- M = Materials, Supplies, Direct Purchases
- E = Equipment
- T = Travel
- I = Indirect Costs

Certification: I hereby certify that the above expenses were incurred for the work identified as being accomplished in the attached progress reports.

Certification: I hereby certify that the documentation has been maintained as required to support the project expenses reported above and is available for audit upon request.

\_\_\_\_\_  
Administrator Date

\_\_\_\_\_  
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

\_\_\_\_\_  
Department Director 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

Grantee: \_\_\_\_\_

Submittal #: \_\_\_\_\_

\_\_\_\_\_ Date

Project Name: \_\_\_\_\_

Contract Reimbursement Period: \_\_\_\_\_

#	Payee (Vendor/Contractor)	Key	Check or Voucher		Invoice			Expense Description
			Number	Date	Number	Date	Amount	
1	_____	_____	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____	_____	_____
11	_____	_____	_____	_____	_____	_____	_____	_____
12	_____	_____	_____	_____	_____	_____	_____	_____
13	_____	_____	_____	_____	_____	_____	_____	_____
14	_____	_____	_____	_____	_____	_____	_____	_____
15	_____	_____	_____	_____	_____	_____	_____	_____
16	_____	_____	_____	_____	_____	_____	_____	_____
						TOTAL \$	_____	

Certification: I hereby certify that the purchases noted above were used in accomplishing this project.

Certification: I hereby certify that bid tabulations, executed contract, cancelled checks, and other purchasing documentation have been maintained as required to support the costs reported above and are available for audit upon request.

\_\_\_\_\_  
 Administrator Date

\_\_\_\_\_  
 Financial Officer Date



# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/14/2007

PRODUCER (561) 732-9305 FAX: (561) 364-9848  
Harvey E. Oyer Jr. Inc.  
511 East Ocean Avenue

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

Boynton Beach FL 33435

INSURERS AFFORDING COVERAGE

NAIC #

INSURED  
Museum of Lifestyle and Fashion History Inc.  
PO Box 6127

INSURER A: Burlington Ins Co

INSURER B:

INSURER C:

INSURER D:

INSURER E:

Delray Beach FL 33482

**COVERAGES**

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS								
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	535B012639	3/7/2007	3/7/2008	EACH OCCURRENCE \$ 1,000,000								
	GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPIOP AGG \$ Included								
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$								
	EXCESSUMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATU-TORY LIMITS	OTH-ER												
E.L. EACH ACCIDENT	\$												
E.L. DISEASE - EA EMPLOYEE	\$												
E.L. DISEASE - POLICY LIMIT	\$												
	OTHER												

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

Additional Insured:  
Palm Beach County Parks and Recreation

**CERTIFICATE HOLDER**

(561) 963-6734  
Palm Beach County Parks and Recreation  
Susan Yinger  
2700 6th Ave S  
Lake Worth, FL 33461

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE  
Rob Macoviak/ROBERT



**MUSEUM OF LIFESTYLE & FASHION HISTORY, INC.**

P.O. Box 6127

Delray Beach, FL 33482

Phone: (561) 243-2662 • Fax: (561) 243-9916

[www.mlfhmuseum.org](http://www.mlfhmuseum.org) • E-mail: [durante@mlfhmuseum.org](mailto:durante@mlfhmuseum.org)

**OVERALL GOALS:**

Established in 1999, The Museum of Lifestyle & Fashion History of Delray Beach, Florida (Palm Beach County) is a 501(c)3 non-profit organization. It offers history, retrospective and anthropology exhibits show-casing ethnic cultures, people, places, artifacts, lifestyle and fashion trends, architecture, furnishings, locomotives and toys, and information about popular uses of artifacts by people/events of the periods of time.

Date: June 15, 2007

To: Susan Yinger  
Palm Beach County Parks & Recreation  
Palm Beach County

From: Lori J. Durante, Executive Director  
Museum of Lifestyle & Fashion History

Phone: 561-243-2662

Fax: 561-243-9916

[www.MLFHMUSEUM.org](http://www.MLFHMUSEUM.org)

**BOARD OF TRUSTEES**

Charlotte G. Durante  
Dwight Stephenson  
Dinah Stephenson, Esq.

RE: Worker's Comp.

**BOARD MEMBERS EMERITI**

Boris & Edith Rueger

This letter is to confirm that the Museum of Lifestyle & Fashion History is not required to have Worker's Comp. All staff is volunteer.

**AMBASSADOR**

Nancy Boyle

Thank you.

**ADVISORY BOARD**

John Glover  
Melodie Shute  
Dr. Elizabeth Stone  
Brigitte Wiebelt

**EDUCATION**

**ADVISORY BOARD**

Nat Harrington  
Elizabeth Wesley

**CHARTER MEMBER,**

**INITIAL ORGANIZING PRESIDENT  
& IMMEDIATE PAST-PRESIDENT**

Doak Campbell, III, Esq.

Lori J. Durante

Executive Director/Chief Curator