

**PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS**

**AGENDA ITEM SUMMARY**

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**Meeting Date:** 12/18/07

☒ **Consent**     ☐ **Regular**  
☐ **Ordinance**     ☐ **Public Hearing**

**Department:****Submitted By:** PALM BEACH COUNTY CRIMINAL JUSTICE COMMISSION**Submitted For:** PALM BEACH COUNTY CRIMINAL JUSTICE COMMISSION

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**I. EXECUTIVE BRIEF**

**MOTION AND TITLE:** Staff recommends motion to approve: (a) An Interlocal Agreement in the amount of \$343,882 with the City of Lake Worth as a partner to implement the Youth Violence Prevention Project in the targeted area; (b) a budget transfer of \$43,882 from Criminal Justice Reserves to increase budget for the Lake Worth Youth Empowerment Center.

**SUMMARY:** The Youth Violence Prevention Project and their primary partners, the five cities at greatest risk for future violence which includes the City of Lake Worth, are beginning their second year of implementation and funding. To date, the funds have established Youth Empowerment Centers in Riviera Beach, West Palm Beach, Lake Worth, and Boynton Beach and a Justice Service Center in Riviera Beach. Belle Glade is projected to begin in January 2008. In addition, an Assistant State Attorney for gun crimes, a juvenile violent offenders program, and joint law enforcement operations with multiple revenue sources completes the implementation plan. The City of Lake Worth has committed \$122,500 to this project for FY 2008. It is intended that the funding for this project be maintained for three years.

The Youth Empowerment Centers in Lake Worth are located at the Osborne Community Center, 1699 Wingfield Street and the Norman Whimbley Gymnasium, located at 1515 Wingfield Street located in the heart of the targeted area. Lake Worth has expanded to include the gymnasium for recruitment and recreational activities for the Center. These Youth Empowerment Centers incorporate teen-specific programs such as: employment services, educational opportunities, tutoring, mentoring, audio visual production and marketing, computer hardware technology and the other components of the Youth Violence Prevention Plan. Together the Centers serve 287 youth regularly. Additionally, the formation of a Lake Worth Youth Empowerment Center Teen Council has helped define the needs and wants of the teens in the community. District 7 (DW)

**BACKGROUND AND JUSTIFICATION:** On February 15, 2005, the Board of County Commissioners (BCC) directed the Criminal Justice Commission (CJC) to develop a Youth Violence Prevention Project which would address the increase in violent firearms crimes. A Youth Violence Prevention Steering Committee was formed to bring local agencies together to create a comprehensive youth violence reduction program. The five targeted areas that became evident through violent crime mapping (GIS) analysis include Riviera Beach, West Palm Beach, Lake Worth, Boynton Beach, and Belle Glade.

Upon Board direction, the CJC created the Youth Violence Prevention Planning Steering Committee to coordinate and research the development of a Youth Violence Prevention Project. Palm Beach County experienced and continues to see an increase of shootings, generating tremendous concern on the part of the Board of County Commissioners, Criminal Justice Commission members, local law enforcement, educators and the community. **(continued on page 3)**

## II. FISCAL IMPACT ANALYSIS

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

| Fiscal Years                               | 2008           | 2009  | 2010  | 2011  | 2012  |
|--|----------------|-------|-------|-------|-------|
| Capital Expenditures                       | _____          | _____ | _____ | _____ | _____ |
| Operating Costs                            | <u>343,882</u> | _____ | _____ | _____ | _____ |
| External Revenues                          | _____          | _____ | _____ | _____ | _____ |
| Program Income (County)                    | _____          | _____ | _____ | _____ | _____ |
| In-Kind Match (County)                     | _____          | _____ | _____ | _____ | _____ |
| NET FISCAL IMPACT                          | <u>343,882</u> | _____ | _____ | _____ | _____ |
| # ADDITIONAL FTE<br>POSITIONS (Cumulative) | _____          | _____ | _____ | _____ | _____ |

Is Item Included In Current Budget? Yes \_\_\_\_\_ No X

Budget Account No.: Fund \_\_\_\_\_ Dept. \_\_\_\_\_ Unit \_\_\_\_\_ Object \_\_\_\_\_

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

Criminal Justice Reserves (\$43,882) 0001-820-9901-9902

### C. Departmental Fiscal Review:

The adopted budget for the Lake Worth Youth Empowerment Center is \$300,000.

## III. REVIEW COMMENTS

### A. OFMB Fiscal and/or Contract Dev. and Control Comments:

Edizalukh Blesse 12/17/07  
OFMB  
12/10/07 CW 12/17/07  
DM  
12/6/07

John L. Jacobowitz 12/13/07  
Contract Dev. and Control  
12/10/07  
This Contract complies with our  
contract review requirements

### B. Legal Sufficiency:

[Signature] 12/17/07  
Assistant County Attorney

### C. Other Department Review:

**(continued from page 1)**

The CJC utilized a national model created by the U.S. Department of Justice, Office of Justice Programs. A comprehensive approach was developed using the research compiled by Florida State University and involved professionals from the criminal justice system, education, and human services, and local youth. Florida State University, Center for Public Policy in Criminal Justice, assimilated and analyzed local violent crime data which demonstrates, after a decline from 1994-2002, a significant increase in murders and firearms crimes. Four subcommittees, including crime prevention, law enforcement, courts and corrections, developed a strategic plan. A Youth Workgroup was formed with 25 youth from various areas of the county. The Workgroup surveyed over 500 youth, including juveniles in jail and on Department of Juvenile Justice probation. The recommendations made by the Workgroup have been incorporated into the overall plan. The research supports a multi-agency comprehensive approach is most effective. The project incorporates the model programs and the recommendations from the subcommittees.

The CJC recommended implementation of a Youth Empowerment Center with programs for teens that are not in the criminal justice system and a Justice Service Center with programs for juveniles and young adults on probation or re-entering from jail and prison in each of the five targeted violent crime areas. The project emphasizes education, employment services, and law enforcement strategies.

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BOARD OF COUNTY COMMISSIONERS  
PALM BEACH COUNTY, FLORIDA  
BUDGET TRANSFER

Page 1 of 1

BGEX 767-120507\*1884

FUND 0001 - General Fund

or items not anticipated in the budget.

| ACCOUNT NAME              | ORIGINAL<br>BUDGET | CURRENT<br>BUDGET | INCREASE      | DECREASE      | ADJUSTED<br>BUDGET | EXPENDED/<br>ENCUMBERED<br>as of 12/03/07 | REMAINING<br>BALANCE |
|---------------------------|--------------------|-------------------|---------------|---------------|--------------------|---|----------------------|
| th Youth Empowerment Ctr. | 300,000            | 300,000           | 43,882        |               | 343,882            | 0   | 343,882              |
| Reserves                  | 500,000            | 378,882           |               | 43,882        | 335,000            | 0   | 335,000              |
| <b>EXPENDITURES</b>       |                    |                   | <u>43,882</u> | <u>43,882</u> |                    |   |                      |

ON  
nt Approval

Signatures

Date

*[Signature]* 12-5-07  
*[Signature]* 12/7/07

*[Signature]*  
12/6/07

By Board of County Commissioners  
At Meeting of 12/18/07

Deputy Clerk to the  
Board of County Commissioners

## CDC#

Reviewed By: J Date: \_\_\_\_\_ Input By: \_\_\_\_\_ Date: \_\_\_\_\_ Monitor Ltr: \_\_\_\_\_ Date: \_\_\_\_\_

[illegible]

# CONTRACT REVIEW CHECKLIST

| #    | DESCRIPTION   | YES                                 | NO | N/A                                 |
|------|---|-------------------------------------|----|-------------------------------------|
| 1.   | Is Agenda Summary Sheet information correct and complete?   | <input checked="" type="checkbox"/> |    |                                     |
| 2.   | Are the parties correctly identified? (All contracts must be with "Palm Beach County" NOT the Department).  | <input checked="" type="checkbox"/> |    |                                     |
| 3.   | Has the other party signed? If not, why? (BCC policy requires other party's signature prior to approval unless it is a higher governmental entity).   |                                     |    |                                     |
| 4.   | Are titles of signing parties and signature lines entered? (Be sure the person signing the contract is authorized to do so by his/her firm and witnessed with a corporate seal, where applicable).  | <input checked="" type="checkbox"/> |    |                                     |
| 5.   | Has the correct/current standard contract been used?  | <input checked="" type="checkbox"/> |    |                                     |
| a.   | If the standard contract has been changed, are changes acceptable?  |                                     |    | <input checked="" type="checkbox"/> |
| 6.   | Are all attachments/exhibits appropriately labeled as such and referenced in the body of the contract?  | <input checked="" type="checkbox"/> |    |                                     |
| 7.   | Do the individual amount in the contract and attachments collectively match the totals in the contract?   | <input checked="" type="checkbox"/> |    |                                     |
| a.   | Is there a cap on the total amount of the contract?   | <input checked="" type="checkbox"/> |    |                                     |
| 8.   | Are the beginning and ending dates correct and specified?   | <input checked="" type="checkbox"/> |    |                                     |
| 9.   | Is there a schedule of events and milestones for completion?  | <input checked="" type="checkbox"/> |    |                                     |
| 10.  | If the contract is for more than two years and ad valorem funds are involved, is there an annual appropriation clause?  | <input checked="" type="checkbox"/> |    |                                     |
| 11.  | Does the "termination clause" allow for termination at the convenience of the County?   |                                     |    | <input checked="" type="checkbox"/> |
| 12.  | Are the indemnification clauses included? (This should be verified with Risk Management for non-standard contracts).  | <input checked="" type="checkbox"/> |    |                                     |
| 13.  | Does the contract contain a clause addressing the Florida Public Entity Crime Statute (287.133) (2) (a)?  | <input checked="" type="checkbox"/> |    |                                     |
| 14.  | Does the item comply with the SBE Ordinance?  |                                     |    | <input checked="" type="checkbox"/> |
| 15.  | Has the Budget Division indicated sufficient Budget availability?   | <input checked="" type="checkbox"/> |    |                                     |
| 16.  | Are the payment provisions acceptable, comprehensive and clear? (Payment should be made after work is completed, however if payment is made prior to completion, a payment schedule based on definable events or measurable percentage of completion or deliverables should be included). <b>(Be sure there are no advance payments).</b> | <input checked="" type="checkbox"/> |    |                                     |
| 17.  | Are reimbursable costs identified and capped? (NOTE: air fare must be at coach rates; per diem, meals, subsistence should be in accordance with Florida Statute 112.061).   | <input checked="" type="checkbox"/> |    |                                     |
| 18.  | Are insurance requirements adequate? (This should be verified with Risk management).  | <input checked="" type="checkbox"/> |    |                                     |
| a.   | Is proof of insurance attached?   |                                     |    |                                     |
| b.   | Is expiration date equal to or longer than the contract period?   |                                     |    |                                     |
| c.   | Is Palm Beach County named as additional insured?   |                                     |    |                                     |
| 19a. | Is liquidated damages clause included? If so what is the daily assessment?<br>\$ /day.  |                                     |    |                                     |
| b.   | Is there an early completion bonus/incentive? If so, what is the daily amount<br>\$ /day.   |                                     |    |                                     |
| 20.  | Is performance/payment bond included?   |                                     |    |                                     |

# INSURANCE REQUIREMENTS:

Original Contract Amount: \$ \_\_\_\_\_

Contractor: \_\_\_\_\_

Expires: \_\_\_\_\_

General Liability

Required: \$ 100/200/100

Limits: \$500,000

\$1,000,000

Other: \$ \_\_\_\_\_

Comprehensive Auto

Required: \$ \_\_\_\_\_

Limits: \$500,000

\$1,000,000

Other: \$ \_\_\_\_\_

Professional Liability Required: \_\_\_\_\_

Limits: \$ \_\_\_\_\_

*If claims-made, maintain coverage for \_\_\_\_\_ years after execution of agr.*

"All Risk" Builder's Risk

Required: \_\_\_\_\_

(Eliminate "Occupancy Clause")

Limits: \$ \_\_\_\_\_

(Equal to total value of project)

Must cover until final acceptance.

Sub-limits not acceptable if less than  
total value of project.)

"All Risk" Transit or Motor Truck

Cargo Required: \_\_\_\_\_

(Replacement cost coverage for  
highest value. Must contain  
Waiver of Subrogation)

Limits: \$ \_\_\_\_\_

Aircraft Liability Required: \_\_\_\_\_

Limits: \$5,000,000

Watercraft Liability Required: \_\_\_\_\_

Limits: \$5,000,000

Workers Compensation

Required: "STATUTORY"

Limits: \$100/500/100

\$500/500/500

\$1M/1M/1M

Excess Liability: \$ \_\_\_\_\_

Other Requirements: \_\_\_\_\_

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

**INTERLOCAL AGREEMENT BETWEEN  
THE BOARD OF COUNTY COMMISSIONERS,  
PALM BEACH COUNTY, FLORIDA, AND  
THE CITY OF LAKE WORTH, FLORIDA**

THIS INTERLOCAL AGREEMENT is entered into this 1st day of October 2007 by and between the Board of County Commissioners, Palm Beach County, a political subdivision of the State of Florida (herein referred to as the COUNTY), and the City of Lake Worth, a municipality located in Palm Beach County, Florida (herein referred to as the CITY), each one constituting a public agency as defined in Part I of Chapter 163, Florida Statutes.

**WITNESSETH:**

**WHEREAS**, Section 163.01 of the Florida Statutes, known as the Florida Interlocal Cooperation Act of 1969, authorizes local governmental units to make the most efficient use of their powers by enabling them to cooperate with other localities on a basis of mutual advantage and thereby to provide services and facilities in a manner and pursuant to forms of governmental organization that will harmonize geographic, economic, population and other factors influencing the needs and development of local communities; and

**WHEREAS**, Part I of Chapter 163 of the Florida Statutes permits public agencies as defined therein to enter into interlocal agreements with each other to exercise jointly any power, privilege, or authority which such agencies share in common and which each might exercise separately; and

**WHEREAS**, The Criminal Justice Commission (CJC), upon direction from the Board of County Commissioners (BCC), continues the development of a Youth Violence Prevention Project which addresses the increase in violent firearms crimes; and

**WHEREAS**, on December 5, 2006 the BCC approved funding to initiate partnerships with Riviera Beach, West Palm Beach and Lake Worth to implement the Youth Violence Prevention Project; and

**WHEREAS**, the Youth Violence Prevention Project has been initiated in four of the five target areas; and



forth in Exhibits "A" and "B"; and

**NOW, THEREFORE**, in consideration of the mutual representations, terms and covenants hereinafter set forth, the parties hereto agree as follows:

#### **SECTION 1. PURPOSE and PAYMENT**

The CITY agrees that it shall implement a Youth Violence Prevention Project in partnership with the COUNTY and adhering to the concepts proposed by the CJC and approved by the BCC, outlined in the Youth Violence Prevention Project Implementation Plan in Exhibit "E". The COUNTY agrees to reimburse the CITY for the expenses identified in Exhibit "B" for the Program in a total amount not to exceed \$343,882.

The COUNTY'S Executive Director of the Criminal Justice Commission may authorize adjustments in the inclusive budgeted items of up to 10% provided there is not an increase in the total Agreement amount.

The COUNTY'S representative shall review in advance all capital and event expenses in excess of \$500.00. All events must have their own budgets. All equipment and capital items costing more than \$300.00 shall be inventoried and marked. A list of all such items shall be provided to the COUNTY'S representative within twenty (20) days of receipt and prior to payment by the COUNTY. In the event of the termination of the Youth Violence Prevention Project by either party under this or subsequent contracts, the items purchased hereunder shall be immediately transferred to the COUNTY.

All subcontracts for services herewith, shall require prior review and written authorization by the COUNTY'S representative.

#### **SECTION 2. REPRESENTATIVE/MONITORING POSITION**

The COUNTY'S representative/contract monitor during the term of this Agreement shall be Brenda Oakes, whose telephone number is (561) 355-1617.

The CITY'S representative/contract monitor during the term of this Agreement shall be, Mr. Daryl Boyd whose telephone number is (561) 533-7359.

#### **SECTION 3. EFFECTIVE DATE/TERMINATION**

This Agreement shall take effect upon execution and shall continue in full force and effect up to and including September 30, 2008 unless otherwise terminated as provided herein.

CITY's monthly programmatic and fiscal invoices, included as part of Exhibits A and B, the COUNTY will reimburse the CITY the not-to-exceed amount in accordance with the budget (Exhibit "B"). Invoices shall be itemized in sufficient detail for prepayment audit thereof. The CITY shall supply any further documentation deemed necessary by the COUNTY, including detailed data for the purposes of evaluation of the project by the Florida State University College of Criminology and Criminal Justice. Invoices received from the CITY will be reviewed and approved by the staff of the COUNTY'S CJC, indicating that expenditure has been made in conformity with this Agreement and then will be sent to the COUNTY's Finance Department for final approval and payment. Invoices will normally be paid within thirty (30) days following approval.

#### **SECTION 6. ACCESS AND AUDITS**

The CITY shall maintain adequate records to justify all charges, expenses, and costs incurred in performing the work for at least three (3) years after completion of the projects. The COUNTY shall have access to all books, records and documents as required in this section for the purpose of inspection or audit during normal business hours.

#### **SECTION 7. BREACH/OPPORTUNITY TO CURE**

The parties hereto expressly covenant and agree that in the event either party is in default of its obligations herein, the party not in default shall provide to the party in default thirty (30) days written notice to cure said default before exercising any of its rights as provided for in this Agreement.

#### **SECTION 8. TERMINATION**

This Agreement may be terminated by either party to this Agreement upon sixty (60) days written notice to the other party.

#### **SECTION 9. ATTORNEY'S FEES**

Any costs or expenses (including reasonable attorney's fees) associated with the enforcement of the terms and/or conditions of this Agreement shall be borne by the respective parties; however, this clause pertains only to the parties to this Agreement.

#### **SECTION 10. NOTICE AND CONTACT**

All notices provided under or pursuant to the Agreement shall be in writing, delivered either by hand or by first class, certified mail, return receipt requested, to the representatives identified below at the address set forth below.

7 North Dixie Hwy.  
City of Lake Worth  
Lake Worth, FL 33460

#### **SECTION 11. DELEGATION OF DUTY**

Nothing contained herein shall be deemed to authorize the delegation of the constitutional or statutory duties of the officers of the COUNTY and CITY.

#### **SECTION 12. FILING**

A copy of this Agreement shall be filed with the Clerk and Comptroller in and for Palm Beach County.

#### **SECTION 13. LIABILITY**

The parties to this Agreement and their respective officers and employees shall not be deemed to assume any liability for the acts, omissions, and negligence of the other party. Further, nothing herein shall be construed as a waiver of sovereign immunity by either party, pursuant to Section 768.28, Florida Statutes.

#### **SECTION 14. REMEDIES**

This Agreement shall be construed by and governed by the laws of the State of Florida. Any and all legal action necessary to enforce the Agreement will be held in Palm Beach County. No remedy herein conferred upon any party is intended to be exclusive of any other remedy, and each and every such remedy shall be cumulative and shall be in addition to every other remedy given hereunder or now or hereafter existing at law or in equity or by statute or otherwise. No single or partial exercise by any party of any right, power, or remedy hereunder shall preclude any other or further exercise thereof.

#### **SECTION 15. EQUAL OPPORTUNITY PROVISION**

The COUNTY and the CITY agree that no person shall, on the grounds of race, color, sex, national origin, disability, religion, ancestry, marital status or sexual orientation be excluded from the benefits of, or be subjected to, any form of discrimination under any activity carried out by the performance of this Agreement.

#### **SECTION 16. INSURANCE BY CITY OF LAKE WORTH**

Without waiving the right to sovereign immunity as provided by s.768.28 F.S., CITY acknowledges to be self-insured for General Liability and Automobile Liability under Florida sovereign immunity statutes with coverage limits of \$100,000 Per Person and

When requested, CITY shall provide an affidavit or Certificate of Insurance evidencing insurance, self-insurance and/or sovereign immunity status, which the COUNTY agrees to recognize as acceptable for the above mentioned coverages. Compliance with the foregoing requirements shall not relieve the CITY of its liability and obligations under this Interlocal Agreement.

#### **Section 17. NOTICES**

The CITY, and its subcontractors, shall include information in all public announcements, advertisements and printed materials relating to the Youth Violence Prevention Project and its activities thereafter; that the funding has been provided by the Palm Beach County Criminal Justice Commission and the Palm Beach County Board of County Commissioners.

#### **Section 18. CRIMINAL HISTORY RECORDS CHECK**

The CITY shall conduct a Criminal History Records Check including fingerprinting for all CITY employees or subcontractors who are in direct contact with youth program participants.

#### **Section 19. REGULATIONS; LICENSING REQUIREMENTS:**

The CITY shall comply with all laws, ordinances and regulations applicable to the services contemplated herein, to include those applicable to conflict of interest and collusion. The CITY is presumed to be familiar with all federal, state and local laws, ordinances, codes and regulations that may in any way affect the services offered.

#### **Section 20. CAPTIONS**

The captions and section designations herein set forth are for convenience only and shall have no substantive meaning.

#### **Section 21. SEVERABILITY**

In the event that any section, paragraph, sentence, clause, or provision herein shall be held by a court of competent jurisdiction to be invalid, such shall not affect the remaining portions of this Agreement and the same shall remain in full force and effect.

#### **SECTION 22. ENTIRETY OF AGREEMENT**

This Agreement represents the entire understanding between the parties, and supersedes all other negotiations, representations, or agreements, written or oral,

**ATTEST:**

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


Sharon R. Bock, Clerk and Comptroller

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

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

(SEAL)

**ATTEST:**

  
Pamela J. Lopez, City Clerk

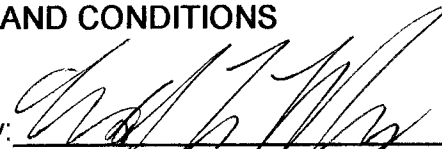


By: \_\_\_\_\_  
City of Lake Worth, FL  
John Siemens, Mayor

**APPROVED AS TO FORM AND  
LEGAL SUFFICIENCY**

By:   
County Attorney

**APPROVED AS TO TERMS  
AND CONDITIONS**

By:   
Michael L. Rodriguez, Executive Director  
Criminal Justice Commission

## 2007-2008 UNIFORM BUDGET

Full Name of Funder

Palm Beach County, Criminal Justice Commission

Funding Period:

07

To: September 30, 2008

Legal Name of Agency

Local Address of Agency

7 North Dixie Highway  
Lake Worth, FL 33460

Telephone Number

Fax Number

561-533-7371

Prepared By

Signature

Typed Name and Title

Daryl Boyd - Reception Manager

Date Submitted

Telephone Number

561-533-7359

Authorized Signature

Signature

Title

Mayor

Typed Name

Date

**September 30, 2008**

# ty

## Dollar

# FORM A : INDIVIDUAL PROGRAM BUDGET NARRATIVE

Exhibits A,B

Page 2 of 3

Proposed Budget For Year Ending:

September 30, 2008

|   | PBC Requested Amount | Balance Amount |
|---|----------------------|----------------|
| Inter Asst. Postions. City is providing one full time position and 50% of an City Police officer.   | 55250.00             | 77000.00       |
|   | 4227.00              |                |
| per \$100 of salary   | 325                  |                |
|   | \$4,552              | \$0            |
|   | \$59,802             | \$77,000       |
| el - funds requested to cover the cost of transportation, registration, youth and appropriate staff for 2 youth crime prevention/leadership g considered are the National Conference for Prevention of Crime in the e Watch of America, and National Youth Crime Prevention Conference. | 10,000               |                |
|   | \$10,000             | \$0            |
|   | \$0                  | \$0            |
| expenses for Osborne Center and staff issued phone.   |                      | \$1,000        |
| Estimated operational cost for Osborne Center   |                      | \$39,000       |



\$40,000Exhibits A,B

\$0

Dollar

# FORM A : INDIVIDUAL PROGRAM BUDGET NARRATIVE

Exhibits A,B

Page 3 of 3

Proposed Budget For Year Ending:

**September 30, 2008**

|   | PBC Requested<br>Amount | Balance Amount |
|---|-------------------------|----------------|
| athletic equipment, games, books, movies, crafts, etc. for all programs<br>Powerment Center not covered by outside agencies. We are expecting 50-75   | \$1,000                 | \$500          |
| ing of flyers and promotional material  | \$6,000<br>\$3,000      | \$5,000        |
|   | <b>\$10,000</b>         | <b>\$5,500</b> |
| snacks for 50-75 youth daily and to provide food for special events such as<br>ater.  | \$5,000                 |                |
| egal  |                         |                |
| renovations not addressed in previous fiscal year.  | \$5,000                 |                |
| ce - Chair and PA rental for special events   | \$3,000                 |                |
| als   |                         |                |
| s for memebership in FRPA for staff   | \$500                   |                |
| ning opportunities not covered by Prime Time.   | \$500                   |                |
| tions - \$139,650 to For the Children to provide a daily after school<br>Center, a satellite program at Lake Worth Middle School and a<br>program. \$50,500 substance abuse prevention program to be determined.  | \$223,080               |                |
| anizations  |                         |                |
| en Advisory Council to cover costs not already addressed in this proposal.<br>pecial events, supplies not previously addressed, awards, printing, equipment<br>to contract with a transportation provider for children or families who are<br>ents without transportation assistance. Estimating transporting 25-30 people<br>ummer Mural Project is \$2,000. | \$27,000                |                |
|   | <b>\$259,080</b>        | <b>\$0</b>     |

|   |           |              |
|---|-----------|--------------|
|   |           | Exhibits A,B |
|   |           |              |
|   | \$343,882 | \$122,500    |
| m |           |              |

Dollar

# 1 PERSONNEL BUDGET NARRATIVE

DER: Palm Beach County, Criminal Justice Commission

\_\_\_ of \_\_\_

Budget for Fiscal Year October 1, 2007 - September 30, 2008

| (3)              | (4)          | (5)            | (6)                      | (7)                      | (8)                              | (9)      | (10)     |
|------------------|--------------|----------------|--------------------------|--------------------------|----------------------------------|----------|----------|
| Agency<br>Salary | Dates        |                | Number of<br>Pay Periods | Salary Per<br>Pay Period | Percentage<br>of Total<br>Salary | Amount   | Total    |
|                  | From         | To             |                          |                          |                                  |          |          |
| 050.00           | Oct. 1, 2007 | Sept. 30, 2007 | 26.00                    | 425.00                   | 100.00                           | 11050.00 | 11050.00 |
| 050.00           | Oct. 1, 2007 | Sept. 30, 2007 | 26.00                    | 425.00                   | 100.00                           | 11050.00 | 11050.00 |
| 050.00           | Oct. 1, 2007 | Sept. 30, 2007 | 26.00                    | 425.00                   | 100.00                           | 11050.00 | 11050.00 |
| 050.00           | Oct. 1, 2007 | Sept. 30, 2007 | 26.00                    | 425.00                   | 100.00                           | 11050.00 | 11050.00 |
| 050.00           | Oct. 1, 2007 | Sept. 30, 2007 | 26.00                    | 425.00                   | 100.00                           | 11050.00 | 11050.00 |
|                  |              |                |                          |                          |                                  |          |          |
|                  |              |                |                          |                          |                                  |          |          |
|                  |              |                |                          |                          |                                  |          |          |
|                  |              |                |                          |                          |                                  |          |          |
|                  |              |                |                          |                          |                                  |          |          |
|                  |              |                |                          |                          |                                  |          |          |
| 55,250           |              |                |                          |                          |                                  | \$55,250 | \$55,250 |

## FORM C: TOTAL AGENCY BUDGET BY PROGRAM

Page 1 of 4

Proposed Budget For Year Ending:

September 30, 2008

|          | (2)       | (3) | (4) | (5) | (6) | (7) | (8)             |
|----------|-----------|-----|-----|-----|-----|-----|-----------------|
| Programs |           |     |     |     |     |     | Total<br>Budget |
|          |           |     |     |     |     |     |                 |
| Families |           |     |     |     |     |     | \$0             |
| Specify) | 343882.00 |     |     |     |     |     | 343882.00       |
| Child    |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     |                 |
| Cty      |           |     |     |     |     |     | \$0             |
| Chest    |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$0             |
|          |           |     |     |     |     |     | \$122,500       |
|          |           |     |     |     |     |     |                 |
|          | \$343,882 | \$0 | \$0 | \$0 | \$0 | \$0 | \$466,382       |

## FORM C: TOTAL AGENCY BUDGET BY PROGRAM

Page 2 of 4

Proposed Budget For Year Ending:

September 30, 2008

|           | (2)      | (3) | (4) | (5) | (6) | (7) | (8)             |
|-----------|----------|-----|-----|-----|-----|-----|-----------------|
| as        |          |     |     |     |     |     | Total<br>Budget |
|           | 55,250   |     |     |     |     |     | \$55,250        |
|           |          |     |     |     |     |     | \$0             |
| ent       | 4,552    |     |     |     |     |     | \$4,552         |
| efits     | \$59,802 | \$0 | \$0 | \$0 | \$0 | \$0 | \$59,802        |
|           |          |     |     |     |     |     | \$0             |
| vel       | 10,000   |     |     |     |     |     | \$10,000        |
|           | \$10,000 | \$0 | \$0 | \$0 | \$0 | \$0 | \$10,000        |
| ancy      |          |     |     |     |     |     | \$0             |
|           |          |     |     |     |     |     |                 |
| Occupancy | \$0      | \$0 | \$0 | \$0 | \$0 | \$0 | \$0             |
|           |          |     |     |     |     |     | \$0             |
|           |          |     |     |     |     |     | \$0             |

## FORM C: TOTAL AGENCY BUDGET BY PROGRAM

Page 3 of 4

Proposed Budget For Year Ending: September 30, 2008

|        | (2)      | (3) | (4) | (5) | (6) | (7) | (8)             |
|--------|----------|-----|-----|-----|-----|-----|-----------------|
|        |          |     |     |     |     |     | Total<br>Budget |
|        |          |     |     |     |     |     | \$0             |
|        | \$0      | \$0 | \$0 | \$0 | \$0 | \$0 | \$0             |
|        | 1000.00  |     |     |     |     |     | \$1,000         |
|        | 6000.00  |     |     |     |     |     | \$6,000         |
|        | 3000.00  |     |     |     |     |     | \$3,000         |
| ies    | \$10,000 | \$0 | \$0 | \$0 | \$0 | \$0 | \$10,000        |
|        | 5,000    |     |     |     |     |     | \$5,000         |
| /Legal |          |     |     |     |     |     | \$0             |
|        |          |     |     |     |     |     | \$0             |
|        | 5000.00  |     |     |     |     |     | \$5,000         |
| ance   | 3000.00  |     |     |     |     |     | \$3,000         |

## FORM C: TOTAL AGENCY BUDGET BY PROGRAM

Page 4 of 4

Proposed Budget For Year Ending: September 30, 2008

|              | (2)       | (3) | (4) | (5) | (6) | (7) | (8)             |
|--------------|-----------|-----|-----|-----|-----|-----|-----------------|
|              |           |     |     |     |     |     | Total<br>Budget |
| s            |           |     |     |     |     |     |                 |
| uals         |           |     |     |     |     |     | \$0             |
|              | 500.00    |     |     |     |     |     | \$500           |
|              | 500.00    |     |     |     |     |     | \$500           |
|              |           |     |     |     |     |     | \$0             |
| zations      | 223080.00 |     |     |     |     |     | 223080.00       |
| rganizations |           |     |     |     |     |     | \$0             |
|              | 27000.00  |     |     |     |     |     | \$27,000        |
|              | \$259,080 | \$0 | \$0 | \$0 | \$0 | \$0 | \$259,080       |
| al items)    |           |     |     |     |     |     | \$0             |
|              |           |     |     |     |     |     | \$0             |
|              | \$343,882 | \$0 | \$0 | \$0 | \$0 | \$0 | \$343,882       |



## th

th

| <b>Position Title</b> | <b># of Positions</b> | <b>Total Salaries</b> |
|-----------------------|-----------------------|-----------------------|
| Plant                 | 5.00                  | 55250.00              |
|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
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|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
|                       |                       |                       |
|                       | 5.00                  | 55250.00              |

## Exhibit C

REPORTING MONTH: \_\_\_\_\_

Organization: \_\_\_\_\_  
Project Name: \_\_\_\_\_  
on completing this form: \_\_\_\_\_

**Categories:**

[illegible]

**CENTER**

**Due Dates:** The 10th of each month following each month of services.

## LAW ENFORCEMENT

Please indicate the following:

## License Plate Identification System

Total number of identifications:

\_\_\_\_\_

## Community Oriented Policing

Total number of contacts with the public:

11/11/2011

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**Reimbursement Request**

**SUMMARY STATEMENT OF TOTAL PROJECT COSTS**

|               |  |                |  |
|---------------|--|----------------|--|
| Agency:       |  | Project #:     |  |
| Subgrantee:   |  |                |  |
| Address:      |  | Project Title: |  |
| Telephone:    |  | Claim #:       |  |
| Claim Period: |  |                |  |

| Budget Category                       |  | Category Total |
|---------------------------------------|--|----------------|
| Salaries & Benefits                   |  |                |
| Other Personal / Contractual Services |  |                |
| Expenses                              |  |                |
| Operating Capital Outlay              |  |                |
| Indirect Costs                        |  |                |
| Total Claim Amount                    |  |                |

I hereby certify that the above costs are true and valid costs incurred in accordance with the project agreement.

Date \_\_\_\_\_ Signed \_\_\_\_\_  
Project Director

## DETAIL OF SALARIES AND BENEFITS

|   | County:                              | Claim Period:                   |                         |   |                                | Claim #:           |
|---|--------------------------------------|---------------------------------|-------------------------|---|--------------------------------|--------------------|
|   | Project Title:                       |                                 |                         |   |                                | Telephone:         |
| Job Title   | Type of Work<br>Performed on Project | Hrs.<br>Worked<br>on<br>Project | Total<br>Hrs.<br>Worked | % | Gross Salary<br>for Pay Period | Charges to Project |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
|   |                                      |                                 |                         |   |                                |                    |
| Subtotals   |                                      |                                 |                         |   |                                |                    |
| Total Actual Cost of Retirement, Group Insurance, FICA Taxes, Etc. (from Page 3, Details of Benefits) |                                      |                                 |                         |   |                                |                    |
| Total Overtime Pay and Benefits (from Page 4, Details of Overtime Pay and Benefits)                   |                                      |                                 |                         |   |                                |                    |
| This column total must appear on Page 1, Summary Statement. Total Salaries and Benefits               |                                      |                                 |                         |   |                                |                    |

DETAIL OF BENEFITS

|  |                |                |      |               |                                 |                                      |                                   |
|--|----------------|----------------|------|---------------|---------------------------------|--------------------------------------|-----------------------------------|
|  |                | County:        |      | Claim Period: |                                 | Claim #:                             |                                   |
|  |                | Project Title: |      |               |                                 |                                      | Telephone:                        |
| Health Insurance   | Life Insurance | Retirement     | FICA | Other (List)  | Total Benefits Paid this Period | Percentage of Time Worked on Project | Total Benefits Charged to Project |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
|  |                |                |      |               |                                 |                                      |                                   |
| This column total must appear on Page 2, Detail of Salaries & Benefits |                |                |      |               | Total Charges to Project        |                                      |                                   |

DETAIL OF OVERTIME PAY AND BENEFITS

|   |                                      |                           |                                 |
|---|--------------------------------------|---------------------------|---------------------------------|
|   | County:                              | Claim Period:             | Claim #:                        |
|   | Project Title:                       | Telephone:                |                                 |
| Job Title   | Type of Work<br>Performed on Project | Hrs. Worked<br>on Project | Charges to Project              |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
|   |                                      |                           |                                 |
| Subtotals   |                                      |                           |                                 |
| Group Insurance, FICA Taxes, Etc. (from Page 5, Details of Benefits for Overtime Only)  |                                      |                           |                                 |
| Total must appear on Page 2, Detail of Salary and Benefits, if regular Salaries and<br>Benefits are included in the budget. If no regular Salaries and Benefits are included then<br>, Summary Statement. |                                      |                           | Total Overtime Pay and Benefits |

DETAIL OF BENEFITS FOR OVERTIME ONLY

|                                   |                |                |      |               |                                   |          |  |
|-----------------------------------|----------------|----------------|------|---------------|-----------------------------------|----------|--|
|                                   |                | County:        |      | Claim Period: |                                   | Claim #: |  |
|                                   |                | Project Title: |      |               | Telephone:                        |          |  |
| Health Insurance                  | Life Insurance | Retirement     | FICA | Other (List)  | Total Benefits Charged to Project |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
|                                   |                |                |      |               |                                   |          |  |
| Detail of Overtime Pay & Benefits |                |                |      |               | Total Charges to Project          |          |  |



DETAIL OF OTHER PERSONAL/CONTRACTUAL SERVICES (OPS)

|   |   |               |              |            |
|---|---|---------------|--------------|------------|
| County:   |   | Claim Period: |              | Claim #:   |
| Project Title:  |   |               |              | Telephone: |
|   | Description of Services Provided<br>(Provide Unit Cost if Applicable) | Date Paid     | Check Number | Amount     |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
|   |   |               |              |            |
| This column total must appear on Page 1, Summary Statement. |   |               |              | Total      |

DETAIL OF EXPENSES

|   |                     |                |               |            |
|---|---------------------|----------------|---------------|------------|
|   |                     | County:        | Claim Period: | Claim #:   |
|   |                     | Project Title: |               | Telephone: |
|   | Description of Item | Date Paid      | Check Number  | Amount     |
|   |                     |                |               |            |
|   |                     |                |               |            |
|   |                     |                |               |            |
|   |                     |                |               |            |
|   |                     |                |               |            |
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|   |                     |                |               |            |
|   |                     |                |               |            |
|   |                     |                |               |            |
|   |                     |                |               |            |
| This column total must appear on Page 1, Summary Statement. |                     |                | Total         |            |

DETAIL OF OPERATING CAPITAL OUTLAY (OCO)

|   |                         |               |              |            |
|---|-------------------------|---------------|--------------|------------|
|   | County:                 | Claim Period: |              | Claim #:   |
|   | Project Title:          |               |              | Telephone: |
|   | Description of Property | Date Paid     | Check Number | Amount     |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
|   |                         |               |              |            |
| This column total must appear on Page 1, Summary Statement. |                         |               |              | Total      |

DETAIL OF INDIRECT COSTS

|   |             |               |              |          |
|---|-------------|---------------|--------------|----------|
| County:   |             | Claim Period: |              | Claim #: |
| Project Title:  |             | Telephone:    |              |          |
|   | Description | Date Paid     | Check Number | Amount   |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
|   |             |               |              |          |
| This column total must appear on Page 1, Summary Statement. |             |               |              | Total    |

Exhibit E

**Criminal Justice Commission  
Implementation Plan for Youth Violence Prevention Project**

Each participating city, in recognition of the findings of the Criminal Justice Commission's Youth Violence Prevention Project Steering Committee that youth violence must be addressed in a comprehensive and systematic way, wishes to participate in this worthwhile project.

Each participating city agrees to:

- Abide by the requirement that all city-related projects and efforts will service the residents within the identified geographic areas as outlined by Criminal Justice Commission maps
- The city will make a commitment of building space for services within the identified geographical areas
- Design a phase-in plan, including timeline, for the creation of a Youth Empowerment Center
- Design a phase-in plan, including timeline, for a Justice Service Center
- Participate in the multi-agency task force law enforcement component of the Youth Violence Prevention Project
- Utilize the findings of the Project's 500 youth surveys to develop and prioritize youth empowerment programs
- Pay the city's portion of all goods, services, and personnel used in connection with this project
- Develop separate community advisory boards for youth and young adults
- Participate in all aspects of evaluation including data collection, data sharing, site monitoring and visits

**Background:**

The Criminal Justice Commission utilized a national model created by the U.S. Department of Justice, Office of Justice Programs for the development of the Youth Violence Prevention Project. A comprehensive approach was developed using the research compiled by Florida State University and involved professionals from the criminal justice system, education, and human services, and local youth. Florida State University, Center for Public Policy in Criminal

## Exhibit E

### Components:

#### 1. Crime Prevention:

The establishment of a Youth Empowerment Center in each targeted area that provides activities and services to youth ages 13-18, including after school programs and activities, tutoring/mentoring, job training for in school and out of school youth, information on resources, gang prevention outreach, parenting classes, employment services, Safe Schools Programs and transportation.

#### 2. Law Enforcement:

The law enforcement strategies include:

- a. Provide training for all law enforcement agencies on the collection of evidence by standardization of evidence collection policies, procedures and training
- b. Utilization of the newer technology "license plate recognition cameras" in each of the targeted areas
- c. Community oriented police officer in each targeted area
- d. Ad campaigns utilizing bus shelters and billboards to assist in cold case investigations, provide crime prevention tips, and to make people aware of the penalties for gun crimes
- e. Gun safety programs, including working with gun dealers to better secure the firearms
- f. Multi-Agency Task Forces
  - i. Violent Crimes Task Force
  - ii. Joint operations with Alcohol, Tobacco, Firearms, and Explosives

#### 3. Courts:

The strategies for the Courts component are designed to divert youth from the juvenile justice system and provide the judiciary with additional sanctions.

- a. Extend Youth Court within each targeted area
- b. Establish Aggression Replacement Therapy (ART) as a specialized program for violent juvenile offenders. ART provides an alternative

Exhibit E

4. **Corrections:**

Establish a Justice Service Center in each targeted area to provide assistance to juvenile and young adult offenders up to age 29. The Justice Service Center provides services either on-site or through referrals. These services include employment, substance abuse, mental health, legal assistance, re-entry assistance, life skills, and probation sanction assistance.

Educational programs such as Safe Schools and Career Academies, and law enforcement strategies except for the cameras and the community oriented police officer would be countywide. Each targeted area will have an Advisory Board of residents and a Teen/Youth Council. For each area, a Memorandum of Understanding will describe the participation of the local government, human service agencies, foundations and other funding sources. The CJC will maintain oversight until all sites have been established.

The specific programs are: Youth Empowerment Centers and Justice Service Centers in the five targeted areas incorporate all four components of the plan. Memorandums of Understanding will be completed by Criminal Justice Commission.

| Youth Empowerment Center Programs:  | Responsibility                              |
|---|---|
| <b>Youth Empowerment Facility</b>   | City  |
| <b>Youth/Teen Advisory Council</b><br>Council or Board of youth from the target area to meet regularly to recommend programs and policies of the Youth Empowerment Center   | City  |
| <b>Teen Center</b><br>Provide educational and recreational programming. Maintain a clean safe and secure environment. Work with the youth council to identify new educational recreational programs, activities and special events. | City  |
| <b>Career Academy</b><br>Designated Career Academies would provide opportunities for in school and out of school youth  | MOU with School District and Charter School |

Exhibit E

|  |   |
|--|---|
| Provide before school/after-school tutoring, including FCAT skill building   |   |
| <b>Mentoring</b><br>Provide mentors for youth to support and be positive role models   | <b>MOU with Big Brothers Big Sisters</b>                            |
| <b>Job Training</b><br>Workforce Alliance is funding a program for approximately 100 at-risk youths to prepare them for careers and jobs that are in demand in Palm Beach County. The program will supplement existing programs at the high schools of the county and provide additional resources. Junior Achievement of the Palm Beaches will manage the program with the objective of motivating selected at-risk youth to graduate, providing them additional workplace skills and then assist them with job placement.<br><br>Workforce Alliance has contracted with three agencies to carry out academic and job-training services for at-risk and disadvantaged youth in Palm Beach County on a year-round basis. Priority will be given to proposals to serve the youth in those areas of the county that were pointed out the research sponsored by the Youth Violence Prevention Committee. Alliance expects to bring the selected programs to over 500 youths, both in-school and out-of-school | <b>MOU with Workforce Alliance and Palm Beach Community College</b> |
| <b>Information on Resources</b><br>Provide information on existing resources for youth including school programs, job training and employment opportunities, services available  | <b>City and MOU with collaborating agencies</b>                     |
| <b>Community Outreach</b><br>A worker to intervene with youth in the Youth Empowerment Center area to engage them in positive  | <b>City</b>   |



# Exhibit E

|   |      |
|---|------|
| motivating selected at-risk youth to graduate, providing them additional workplace skills and then assist them with job placement |      |
| <b>Transportation</b><br>The youth surveyed indicated that a major issue to attending programs and activities is transportation.  | City |
| <b>Life Skills</b>  |      |
| <b>Cultural Diversity Training</b>  | City |

|  |                       |
|--|-----------------------|
| <b>Justice Service Center</b><br>Develop the Justice Service Center concept in targeted neighborhoods in order to provide assistance to residents, juvenile offenders, and adult offenders. The Justice Service Center would provided services to assist residents and both juvenile and adult offenders either onsite or through referrals. These services would include employment, substance abuse, mental health, legal assistance, re-entry assistance, life skills, community outreach, and probation sanction assistance. | <b>Responsibility</b> |
| <b>Justice Service Center Facility</b>   | City                  |
| <b>Mental Health Services</b><br>The Justice Service Center would provide assistance to those seeking mental health services. By partnering with mental health providers, residents and both juvenile and adult offenders can access services through referrals.   | MOU with DCF          |
| <b>Substance Abuse Services</b><br>Substance Abuse Services- the Justice Service Center would be able to provide substance abuse counseling either onsite or through referrals.  | MOU with DCF          |

Exhibit E

|   |      |
|---|------|
| Alliance and other agencies, the Justice Service Center would offer an array of referrals to partner agencies that can provide the individual with assistance in obtaining employment, gaining self-sufficiency, gaining work skills to obtain employment, and upgrading skills to maintain employment. |      |
| <b>Legal Services</b>   |      |
| <b>Cultural Competency Training</b>   | City |
| <b>Life Skills</b>  | City |
| <b>Social Services</b>  | City |

| Law Enforcement  | Responsibility  |
|--|---|
| <b>Evidence Collection Training and MOU for standardized collection</b>  | MOU with Palm Beach Community College and City                          |
| <b>Community Oriented Policing</b><br>A Community Oriented Police Officer in each of the target areas to develop relationships within the neighborhood help citizens feel safer and become more involved in reducing crime in the area.  | City  |
| <b>License Plate Recognition Cameras</b><br>To place such units in areas where stolen vehicles are most likely to be driven.   | City  |
| <b>Gun Safety Programs</b><br>To develop a plan that would support gun dealers/suppliers partnering with Law Enforcement to better secure their firearms. Most violent crimes involving firearms are from weapons that have been stolen. Helping Law Enforcement track people who have a potential for violence who purchase firearms from them. | City and MOU with Palm Beach Sheriff's Office Violent Crimes Task Force |

Exhibit E

|   |  |
|---|--|
| working together at gun shows or simply as tracking over the counter sales.   |  |
| <b>3:</b> To just plain reduce the number of youths getting access to firearms. Plus reduce the number of violent persons getting firearms. |  |
| <b>Joint Operations</b><br>Participate in the Violent Crimes Task Force and other joint operations to target violent offenders              | <b>City and MOU with Palm Beach Sheriff's Office Violent Crimes Task Force</b> |
| <b>Race Relations Training</b>  | <b>City</b>  |

| <b>Courts</b>   | <b>Responsibility</b>                                  |
|---|--|
| <b>Youth Court</b>  | <b>MOU with School District</b>                        |
| <b>Aggression Replacement Therapy (ART)</b><br>established as a specialized program for violent juvenile offenders. ART provides an alternative treatment program to stem the violence at an earlier age. | <b>Contract with Agency to provide it countywide</b>   |
| <b>Initiate judicial training</b> on ways to involve the parents more in the judicial process to reduce the likelihood of recidivism.   | <b>MOU</b>   |
| <b>Fund new prosecutor</b> to handle violent firearm crimes with defendants up to 29 years of age and to work with law enforcement on the prosecution of these crimes                                     | <b>CJC Agreement with Office of the State Attorney</b> |